

Study on the Application Effect of Walk-around Management Mode in Special Outpatient Clinics

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Abstract: *Objective*: To explore and analyze the application effect of the walking management mode in special outpatient clinics. *Methods*: Data on patient satisfaction, complaint volume, consultation efficiency, and nursing service workload before and after implementing the walking management mode in the hospital's special outpatient clinics were compared. *Results*: After implementing the walking management mode, patient satisfaction and consultation efficiency were significantly improved, the average number of complaints per person was reduced, and the average number of daily services was increased. The differences were statistically significant. *Conclusion*: The use of the walking management mode in special outpatient clinic nursing work can improve the quality and efficiency of outpatient nursing, increase patient satisfaction by increasing the number of proactive services, and is worthy of promotion and application.

Keywords: Walk-around management mode; Outpatient clinics; Patient satisfaction; Nursing efficiency

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1. Introduction

In the overall planning of hospital management, outpatient patient management is an important aspect. Factors such as the large number of outpatient patients, complex disease types, varying levels of education, and patients' unfamiliarity with the hospital environment and consultation process often lead to overcrowded outpatient clinics, low consultation efficiency, and poor patient experience. Inefficient outpatient services not only result in a poor experience for medical staff and patients but also lead to a certain degree of waste of medical resources. The traditional outpatient guidance management mode is decentralized and passive, passively accepting inquiries from patients and their families, following routine procedures, and having limited guidance and dispersal capabilities. Patients demand faster, more convenient, and higher-quality medical services. Therefore, optimizing the outpatient service model, improving the overall quality of outpatient services, and increasing patient satisfaction with medical treatment are urgent issues that need to be addressed in hospital outpatient clinics.

As an important component of medical services, special outpatient clinics' continuous innovation and optimization of their nursing service models are crucial for improving patient satisfaction and the quality of medical services. Traditional special outpatient clinic nursing services are usually based on fixed locations, resulting in lower service efficiency. Walking management is a proactive and flexible management model that allows managers to obtain richer and more direct insights into employees' work problems and understand work difficulties through walking around ^[1]. In the field of healthcare and nursing, walking management is often applied to outpatient patient management. Under this model, nursing staff are not fixed in one location but actively move among patients to provide more personalized services. Compared to the traditional fixed service model, walking management helps to more comprehensively understand patients' needs, respond to their questions promptly, and improve the quality and efficiency of services. By providing comprehensive personalized services, it may have a positive impact on outpatient patient management ^[2–6].

This study aims to explore the application effects of the walking management mode in special outpatient clinics. By comparing the data collected during the implementation of the walking management mode from 2022 to 2023 with the data from the traditional special outpatient nursing mode from 2018 to 2022, the study analyzes various indicators including patient satisfaction (measured by the number of outpatient complaints and patient satisfaction scales), outpatient visit efficiency (measured by patient waiting time, payment time, inspection waiting time, and medicine collection time), and the service volume of outpatient nursing staff (measured by the average daily service frequency and average daily walking steps). This analysis aims to assess the practical application effects of the walking service mode in special outpatient nursing services.

2. Materials and methods

2.1. Data sources

The data comes from the special outpatient complaint data of Beijing Jishuitan Hospital in 2022 and 2023 (including doctor-patient office, medical service department, and online platform), as well as the statistical system data of the hospital's special outpatient departments including patient waiting time (from registration to consultation), payment time (from payment order to payment), inspection waiting time (from inspection order to inspection start), and medicine collection time (from prescription order to medicine collection)).

2.2. Methods

A non-concurrent controlled study was conducted. The control group consisted of 98 patients' satisfaction rating data and special outpatient nursing service data collected during the implementation of the traditional special outpatient nursing service mode from October to December 2022. The experimental group consisted of 90 patients' satisfaction rating data and special outpatient nursing service data collected during the implementation of the walking management mode from January to March 2023. Traditional outpatient nursing includes triage, patrol, treatment, and care, while the implementation of walking management mainly includes: 1) Pre-service: data collection, information verification, and classification management of initial and follow-up visits. 2) Active service: regular patrols, communication to understand needs, timely identification, and resolution of problems. 3) Post-diagnosis guidance: appointment scheduling for inspections, pathology consultations, and rehabilitation guidance. Regular summary and discussion meetings are also held for continuous improvement.

2.3. Observation indicators

This study compared patient satisfaction and the number of complaints in the special-needs clinic before and after implementing ambulatory management. To evaluate nursing services, the study designed a specialized patient satisfaction assessment scale. The nursing service satisfaction scale mainly includes five evaluation indicators: medical environment, consultation order, quality service, professional level, and medical experience. The study adopted the Likert 5-level evaluation model, namely, very satisfied (5), relatively satisfied (4), average (3), dissatisfied (2), and very dissatisfied (1), with a total score of 25. The study collected data on the efficiency of patient visits to the special-needs clinic (waiting time for consultation, payment, examination, and medicine collection). Wearable devices were used to record data such as the number of services and steps taken by special-needs nursing staff during their working hours. This allowed us to compare the impact of ambulatory management on clinic efficiency and nursing workload.

2.4. Statistical analysis

We processed the data using SPSS 22.0 statistical software. The measurement data was expressed as "mean \pm standard deviation", and the t-test was used to compare the mean values between groups. The test level was set at α =0.05, and a P-value less than 0.05 was considered statistically significant.

3. Results

3.1. Increased patient satisfaction and decreased complaints before and after implementing ambulatory management

Patient satisfaction is one of the important indicators to measure the quality of nursing services. The research results showed that the satisfaction scores of special-needs clinic patients before and after adopting ambulatory management were 15.11 ± 2.24 and 16.59 ± 1.77 , respectively, and the difference was statistically significant (P < 0.001). This improvement was mainly reflected in the increased scores for consultation order (P < 0.001) and service quality (P < 0.01) shown in **Table 1**. This was also reflected in the number of complaints in the special-needs clinic. Although the total number of complaints showed an increasing trend year by year, after implementing ambulatory management, the number of complaints per 10,000 visits to the special-needs clinic decreased from 9.92 to 5.67 in 2023. Among them, complaints about medical resources, outpatient services, and medical staff decreased significantly (**Table 2**).

Satisfaction scores	October-December 2022 (N = 98)	January-March 2023 (N = 90)	<i>P</i> value
Clinic environment	2.84 ± 0.99	3.03 ± 0.79	<i>P</i> > 0.05
Consultation order	2.77 ± 0.94	3.52 ± 0.95	<i>P</i> < 0.001
Quality service	2.84 ± 0.99	3.22 ± 0.92	<i>P</i> < 0.01
Professional level	3.84 ± 0.99	3.94 ± 0.71	P > 0.05
Treatment experience	2.84 ± 0.99	3.03 ± 0.79	P > 0.05
Total score	15.11 ± 2.24	16.59 ± 1.77	<i>P</i> < 0.001

 Table 1. Patient satisfaction scores in the special-needs clinic before and after implementing ambulatory management

	2022	2023	2022	2023
Special needs clinic visits	32260 people	81135 people	Complaints/10,000 visits	Complaints/10,000 visits
Medical staff	7	9	2.17	1.11
Clinic service	9	6	2.79	0.74
Medical policy	4	12	1.24	1.48
Medical fees	4	9	1.24	1.11
Medical resources	5	2	1.55	0.25
Medical quality	3	8	0.93	0.99
Total	32	46	9.92	5.67

Table 2. Complaint quantity and correction values in special needs outpatient clinics from 2022 to 2023

3.2. Implementing mobile management improves the efficiency of outpatient visits

Through statistical analysis of patients' waiting times for consultation, examination, medicine collection, and payment, this study found that the use of mobile management mode reduced the waiting time for patients in various stages of outpatient visits, thereby improving the efficiency of medical visits as shown in **Table 3** (P < 0.05, P < 0.001)

Table 3. Outpatient efficiency

Patient waiting duration	October-December 2022	January-March 2023	P value
Waiting for consultation	98.47 ± 41.79	61.11 ± 29.01	<i>P</i> < 0.001
Examination	15.13 ± 5.37	11.07 ± 7.46	<i>P</i> < 0.05
Medicine collection	4.4 ± 1.24	1.47 ± 0.51	<i>P</i> < 0.05
Payment	2.95 ± 1.17	2.24 ± 1.12	<i>P</i> < 0.001

3.3. Ambulatory management significantly increases the number of outpatient services and workload

A prominent feature of the ambulatory management model in outpatient clinics is the proactive approach, inquiry, and service provided by nurses. Comparing the average daily service frequency and number of steps between the two service models, the study found that implementing the ambulatory management model across different nursing positions resulted in a higher number of services provided, along with an increase in the number of steps taken by nursing staff as shown in **Table 4** (P < 0.05, P < 0.01, P < 0.001).

Table 4. Statistics on the average daily service frequency and number of steps taken by nursing staff in specialtyoutpatient clinics (N = 21)

	Nursing position	October-December 2022	January-March 2023	<i>P</i> value
Average daily service frequency	Triage	194.86 ± 91.7	330.17 ± 16.29	<i>P</i> < 0.01
	Treatment and care	194.29 ± 63.70	310.86 ± 22.08	<i>P</i> < 0.001
	Patrol	191.29 ± 67.51	298 ± 23.48	<i>P</i> < 0.001
Number of service steps	Triage	7266.29 ± 917.39	9775.43 ± 997.52	<i>P</i> < 0.001
	Treatment and care	8662.43 ± 963.2	11627 ± 946.63	<i>P</i> < 0.001
	Patrol	8420.71 ± 1440.26	10710.57 ± 1563	<i>P</i> < 0.05

4. Discussion

Research both domestically and internationally has shown that implementing ambulatory management in outpatient clinics can change the management model for outpatient patients, enhance service philosophy, ensure work quality, improve the work experience of medical staff and patient satisfaction, better implement quality nursing services, and provide a good guarantee for the development of outpatient management work ^[1–9]. This study evaluated the application effects of ambulatory management in special-needs outpatient nursing work from several perspectives, including patient satisfaction, outpatient efficiency, and nursing workload. By comparing differences in patient satisfaction, complaint volume, outpatient efficiency, and nursing workload before and after implementing ambulatory management, this study found that ambulatory management can improve patient satisfaction and reduce the average number of complaints per person. This suggests that the ambulatory management model can better meet patients' personalized needs and enhance their satisfaction with medical services. With the improvement of complaint mechanisms and increasing awareness, although the number of outpatient complaints has increased year by year, there has been a significant decrease in the number of complaints per capita regarding outpatient services, medical resources, and medical staff after implementing ambulatory management. This may be because ambulatory management can more timely identify and resolve patients' problems, reducing the accumulation of dissatisfaction among patients. Outpatient congestion and unclear instructions often lead to inefficient consultations, examinations, and payments, resulting in low consultation efficiency. Patients who lack guidance can also exacerbate outpatient congestion. The proactive management model significantly improves consultation efficiency by having nursing staff actively inquire and guide each patient, promptly resolving their issues. Ambulatory management also places higher demands on nursing staff, manifesting in increased service frequency and walking steps. This may be related to nurses being able to proactively move among patients and complete tasks more efficiently. However, it may also be a necessary means to serve more patients and improve service efficiency. Overall, adopting the ambulatory management model in special-needs outpatient clinics allows nursing staff to more flexibly adapt to patients' needs and provide more caring and personalized nursing services. This, in turn, enhances patient satisfaction, reduces potential complaints, and improves the overall quality and efficiency of medical services.

Disclosure statement

The authors declare no conflict of interest.

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