Inefficient Delivery of Healthcare

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Inefficient Delivery of Healthcare

Carolynn Ohlson • Gregory Dracoulis • Katherine King

Problem Statement
The delivery of healthcare is inefficient largely due to problems with accessibility and continuity of care. These problems, however, can be resolved through the implementation of recent logistical innovations.

Continuity of Care

The Problem: Paper Records
- Low transportability from office to office
- Not easily accessible for patients/clinicians
- Waste time and space in the office
- Can often be illegible and misread (15%)
- Complicate billing process with insurance

The Solution: Electronic Health Records (EHR)
- Greater accessibility for doctors and patients
- Quick, easy communication between offices
- Enhances continuity of care, reducing error
- Relevant records delivered when needed
- Patients share responsibility for maintenance

Accessibility

The Problem: Scheduling
- Demand exceeds supply; supply decreasing
- Worried well seen more than stoic sick
- Self-fueling shortage reduces quality of care
- Different patients have different needs

Solution: Open Access
A model in which patients schedule appts the day of instead of booking in advance.
- Meets demand as it develops
- Patients are seen for original concerns
- Closes gap between supply and demand
- Reduces crowding of ER's

Solution: More Appt Types
- Routine physician visit: for most
- Non physician visit: for minor issues
- Telephone consult: for those without time
- Home visit: for those without a ride
- Group visit: for collaborative work on common treatment plan

Action Plan:
Develop and publish PSAs directed toward educating patients and clinicians of the given solutions. Distribute educational brochures to local practices and hospitals.

Record Management for the Developing World
- Free, open-source tools can lower cost barrier
- Open-source means the tools can be adapted
- Web based SW reduces system requirements
- Reduces physical overhead for physicians
- Better records can help improve compliance

Accessibility in the Developing World
- High cell phone penetration can be leveraged
- Information sharing with scheduling/transit
- Gov’t provided laptops spread connectivity
- Telemedicine consults from local physicians
- Use VOIP to allow international aid as well

References (Selected)
King, MD, Raymond T. Personal Interview. Nov 152008.

“A patient-centered vision would define quality as providing the care that the patient needs in the manner the patient desires...”

“Two cardinal goals of primary care are accessibility and continuity of care.” – JAMA

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