Improving HIV patient appointment system- a Bushenyi Medical Centre (BMC) experience

Namanya Vian Katagwa
Gulu University and Bushenyi Medical Centre, Uganda

BMC has an HIV/AIDS programme with 4000 clients in care, 2,300 (57.5%) on ART of whom 160 (7%) are children. In 2012, BMC observed fluctuating numbers of clients in the clinic on different appointment days leading to congestion and late departure of clients. The main reasons were:

- Appointments being given by different people on one day,
- Retrieval of charts on the client visit day,
- Clients not sure of the flow and
- Unmarked offices
- Too many unscheduled visits made by patients for minor illnesses

The team, as part of their CQI activity decided to: Streamline appointments to an average of 70 clients per day in order to reduce patient waiting time and improve clinic organization and patient flow

- An assessment was done to determine the average number of clients that can be seen per appointment day.
- An appointment book was bought and an adherence nurse was put in charge of giving the appointment dates.
- The receptionist was tasked to retrieve files a day before the clinic day.
- Patient flow charts were displayed all over the clinic to help patients on the clinic flow.
- A nurse was identified to do refill drugs for patients who don’t need to see a doctor.
- Appointment cards were used to help triage the clients.

Patients were advised to go to nearest health centers in case to minor sicknesses through health education sessions

- By September 2012, about 80 clients were consistently attending the clinic daily compared to 50-100 clients per day before intervention
- Waiting time reduced from 4 to 2 hours on average
- Missed appointments reduced from an average of 40 to 8 per month
- Retention in care improved from 85.7% to 87%

Conclusion: HIV/AIDS clinics need to maintain timely appointments in order to reduce congestion and long waiting hours.

Biography

Namanya Vian Katagwa has completed 4th year bachelor’s degree in Human Medicine and Surgery at Gulu University; he also has 1 year-experience in community health, project management and rural research in Uganda at the age of 23. He has not yet published any papers but he has been invited for the European Cancer Prevention Annual meeting in Belgium and also to publish his research in the European Journal of Cancer Prevention. He is currently a principal investigator with Medical Students Research Association.

namanyavain@yahoo.com