

WASTING PATIENT TIME: WAITING VARIATION IN TWO CASES OF CLINICAL PRACTICE

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ABSTRACT

Health Care should consider patient waiting time as a measure of service quality. Patients are too often delayed in the waiting room and the examining room. Beyond waiting, patients also consume time during examination, diagnosis and treatment activities. Total system time can be improved if wait is eliminated and service time is reduced by redesign of practice protocols.

This research is a comparison of two dermatology practices experienced by the author. The contrast of waiting room times was so amazing that this reality demands an explanation. Simple queuing models are utilized to demonstrate these variations, to recommend delivery improvement strategies and to generalize a waiting policy for any medical service. Beyond this presentation, further field data and more complex queuing/simulations models are required to more accurately predict system behavior under alternative designs.

Time is often wasted in service delivery and should be decreased as services seek to be leaner. Long service experiences are certainly inversely related to patient satisfaction and service quality. So it is now clear that the health care industry is accepting an imperative to reduce delay, seeking consistent relationships among measures of “faster, better, cheaper”. The intervention of the author’s HMO to allow another provider due to the long wait is an indication of the current intolerance for patient delay. It appears we have found a limit to wait so for medical practices, insurers and certainly patients, “waiting is waste”.