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# Advanced Dietitian Second Gastroenterology Model

Initiative Type

Model of Care

Status

Sustained

Added

06 March 2018

Last updated

17 August 2020

URL

<http://staging.clinicalexcellence.qld.gov.au/improvement-exchange/advanced-dietitian>

## Summary

Traditional models of care (MOC) use specialist medical practitioners as the key decision makers in all stages of referral, admission, treatment, monitoring and discharge process for this patient group. It is proposed that there is the potential to use an innovative MOC, where an advanced dietitian reviews a subset of patients according to predetermined eligibility criteria, under the oversight of GE medical specialists. It is anticipated that this will increase capacity for GE medical specialists to focus on more

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critical and more complex patients. The service is now integrated as part of the gastroenterology service and has since received permanent funding through the Gold Coast HHS.

### Key dates

Jan 2018

Jun 2019

### Implementation sites

Gold Coast University Hospital

### Partnerships

Healthcare Improvement Unit

## Key Contacts

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## Aim

- To implement a responsive, pro-active and new Advanced Scope - Dietitian Second Gastroenterology MOC for adults with coeliac disease, Inflammatory Bowel Disease (IBD), Eosinophilic esophagitis (EoE), Gastro Oesophageal Reflux Disease (GERD), functional gut disorders and liver disease. The aim is to reduce the number of consultant reviews required by patients thereby boosting capacity for gastroenterology medical specialist services.
- To implement an advanced dietitian "Virtual Clinic" to monitor stable patients, further reducing the need for outpatients and consultant appointments.
- To continue building a multi disciplinary relationship between Nutrition-Dietetics-Gastroenterology.

## Benefits

The potential benefits of this model includes:

- Enhanced patient flow
- Reduced delays in commencement of patient management through an integrated patient care model
- Patients seen by the most appropriate clinician for their condition
- Patients seen within clinically recommended timeframes
- Increasing capacity for gastroenterology medical specialists to see more complex and critical cases
- Co-ordinated surveillance of conditions in scope and improved continuity of care
- Increased patient satisfaction, quality of life, and outcomes.
- Increased staff and referrer satisfaction
- Improved access to appropriate medical imaging, investigations and procedures
- Enhancement of inter professional relationships.

## Background

There is a great demand for specialist gastroenterology outpatient appointments with increasing waiting lists in the Gold Coast Hospital and Health Service which has contributed to an increasing number of patients waiting longer than clinically recommended times for their initial appointments. Based on the outpatient schedule monitor there are currently fewer available appointment slots/week for the number of patients needing to be seen and the number is estimated to increase. The situation is further exacerbated by the number of gastroenterology medical specialist follow up appointments required by this patient group. Chronic gastrointestinal conditions require ongoing medical specialist

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input and there it can often be challenging for patients to be reviewed within clinically recommended timeframes that are required or recommended for optimisation of outcomes. There can be duplication of services, disjointed surveillance and management of complications. There was an opportunity to use an innovative model of care where an advanced dietitian could review selected gastroenterology patients, thereby increasing capacity for gastroenterology medical specialist to focus on more critical and complex cases or medical interventions. The Gold Coast Hospital and Health Service Gastroenterology and Nutrition and Food Services departments were successful in obtaining \$250,000 worth of funding to establish an Advanced Dietitian Second Gastroenterology Clinic in the hospital and health service.

## **Solutions Implemented**

This project has contributed to the state-wide and HHS strategic objectives of reducing wait lists and reducing the number of Queenslanders waiting longer than clinically recommended times. The project has contributed to streamlining of clinical pathways for patients, helping reduce duplication and improving co-ordination and surveillance. Stakeholder and patient surveys have indicated high levels of satisfaction with the service.

## **Evaluation and Results**

An evidenced informed and systematic approach was used to develop evaluation indicators specifying the success of the project. The broad themes of patient safety, patient satisfaction, effectiveness and efficiency were used to determine the performance and impact of the project. The following criteria were used to evaluate the project outcomes.

- Patient Safety
- Satisfaction
- Access
- Effectiveness
- Efficiency

Data obtained was analysed comparing the pre- and post-implementation phases. Further information was also obtained if it assisted in the interpretation of the results. This information was then used to form the basis for the recommendations made in this evaluation report. Almost all the gastroenterologists who completed the survey had referred to the advanced gastroenterology dietitian second clinic. All 12 respondents indicated that they would refer patients to the service in future.

## **Lessons Learnt**

Initial challenges finding adequate number of clinic spaces for the project.

