

Rezzie - A novel nurse-led approach to results management at Sydney Sexual Health Centre demonstrating cost effectiveness and time efficiency

Authors:

SCALLY E¹, NUGENT C¹, SHI J¹, WISEMAN V², WATTS C², MCIVER R¹, HOUGHTON R¹

¹Sydney Sexual Health Centre, Sydney/Sydney Eye Hospital, 8 Macquarie Street, Sydney, NSW 2001, Australia

²The Kirby Institute, University of New South Wales, Sydney, NSW 2052, Australia

Background:

At Sydney Sexual Health Centre (SSHC), an algorithm in the electronic medical record flags non-urgent results for the ordering clinician to review and sends automated negative results via text messages to patients. Urgent results, pathology errors and delays are managed by specially trained nurses who communicate with patients using the pseudonym 'Rezzie' and share one full-time equivalent position. This project aims to describe and quantify the Rezzie workload and estimate the cost savings to the health system of a nurse-led model compared to the traditional approach of ordering clinician management.

Approach:

We extracted results and timestamp data for SSHC in 2019 including the number of tests ordered by doctors and nurses. We calculated the proportion of results requiring urgent management, the number of client contact attempts and the time in minutes to patient notification using Rezzie. We used time in minutes to manage a result and the NSW public health system awards to calculate the annual cost in wages of each model.

Outcomes:

In 2019, 130,527 tests were ordered. Of these, 9,596 (7%) were urgent and managed by Rezzie. The median time to patient notification was 58 minutes. Over 2400 urgent results were ordered by a doctor and managed by Rezzie conserving 633 medical officer hours. We estimated annual costs using Rezzie to be \$89,814.40 compared to \$111,029.45 using an ordering clinician, providing health system savings of \$21,207.60 annually.

Innovation and Significance:

The allocation of a specialist nurse to manage a large volume of urgent results led to timely patient notification and treatment outcomes. Whilst various models of results management are used in sexual health settings, there is a paucity in the literature of models of care descriptions and demonstrated efficiencies. Our unique nurse-led model was cost saving and time efficient when compared with ordering clinicians managing similar results.

Disclosure of Interest Statement:

The authors received no specific funding for this project and have no disclosures.

Acknowledgement: Heng Lu, IT Manager, Sydney Sexual Health Centre