LAC DU BONNET MEDICAL GROUP WALK-IN PATIENT SURVEY

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**Background:** Lac du Bonnet is located an hour northeast of Winnipeg and is home to a population of 1069 people. The population of Lac du Bonnet increases significantly in the Summer months as it is frequented by many cottagers. The demand for medical care is often greater than what the number of providers can accommodate.

I spent eight weeks in the community working with Dr. Papetti of the Lac du Bonnet medical group. The clinic is staffed with two physicians and a nurse practitioner who attempt to accommodate walk-in patients as needed throughout their busy work day. My project was to assess the walk-in access which patients had at this clinic via a survey that patients would be given to fill out as they waited for their appointment.

The goal of this project was to assess the ease at which patients could get same day appointments and to find out where the patient would have gone had they not gotten an appointment. This will help to quantify the number of walk-in patients seen, as well to determine the extent to which the non-emergent visits to the emergency department in Pinawa would be avoided. These data can also be used for clinic scheduling in terms of whether more or less time needs to be allotted to accommodate these walk in patients.

31 surveys were collected during this period and the results are discussed in the order which they were presented on the survey.

Survey questions:
Are you a regular patient of this clinic?

83.9% of walk-in visits were of regular patients of the clinic. The majority of the visits of patients that were not regulars to this clinic were of children between 0-10 years of age.

What is the patient’s age?

![Patient age in years](image)

How soon were you able to get an appointment?

93.5% of patients were seen same day, while the remaining were seen next day.
What was the patient’s alternative choice had they did not received a walk-in appointment?

![Patient alternative if they did not receive an appointment](chart)

- 16.10%: Visit another clinic
- 29%: Go to the ER
- 45.20%: Wait for the next appointment
- 9.70%: Stay home

What was the reason for your appointment?

The reason for the appointment was reported by the patient prior to seeing the provider. The majority of patients reported upper or lower respiratory symptoms including ear aches and coughs. Others reported minor injuries from falls, stepping on a nail and having a fish hook stuck in the hand. The remainder of patients presented for routine medical care including check-ups or follow-up.
Were your needs met today? If not, what do you plan to do next?

This question was answered after seeing the provider. In some instances, the patient left prior to getting a chance to answer. 28 of the 31 patients were able to answer this question. Of those that answered, 100% reported that their needs were met and there were no indications that the patient intended to seek additional medical care elsewhere afterwards.

**Conclusion:** The volume of walk-ins seen during this time period is significantly underestimated by this sample size due to the fact that these surveys were handed out by the front desk staff and at times the staff were not available to hand them out. It is estimated that the number of walk-ins seen during this time may be as much as two fold greater. However, this sample is likely representative of what information the other walk-in patients would have provided had they been given the survey. It is interesting to note what the patient’s reported as an alternative had they not received a same day appointment – 90.3% of patients would have sought medical care elsewhere had they not been able to see a provider. Of these, 32.1% would have gone to the emergency department. This is a significant burden of patients the Pinawa ER would have seen otherwise, had the walk-in service not been available. Of the 31 patients seen all presented with problems that were manageable within the clinic and patients all reported that their needs were met during the visit.

In the future it would be useful to also assess patients that did not receive a walk-in appointment. It is unknown where and if these patients sought medical care elsewhere as only
patients that were able to get an appointment had an opportunity to complete the survey. It is difficult to quantify how many patients were turned away because a provider was not able to see them that day and it is unknown whether these patients chose to seek medical care otherwise.