

Increasing Access to the Sleep Medicine Specialty for Veterans

Lindsey P. Barrett

College of Nursing, East Carolina University

Increasing Access to the Sleep Medicine Specialty for Veterans

Main Points

- The sleep medicine triage tool was utilized for 96% of all consults placed over the project timeframe.
- Only 4% of veterans left the site out of the consults triage with the triage tool.
- Developed a standardized, evidence-based triage tool resulted in 120 appointment hours being opened by ensuring consults were placed effectively.
- Streamlined consult triaging from the developed triage tool that led to sooner scheduling times and fewer delays.
- Access to care in sleep medicine was increased by changing the CPAP consult process.
- The sleep medicine triage tool can be implemented at any federally funded clinic that serves veterans.

Background and Purpose

Veterans deserve the right to receive top-tier medical care at federally funded clinics. This type of care should be characterized by its efficiency, timeliness, and adherence to evidence-based guidelines. It is imperative to enhance veterans' healthcare journey by addressing current challenges. Based on the facility website, care coordination at this site is the same as in the community, care transition is better than in the community, and over 93% of veterans agree or strongly agree that they trust this facility for their healthcare needs (U.S. Department of Veteran Affairs, 2023). There are frequent delays in securing appointments with sleep medicine specialists within the site due to processing consult delays and limited provider availability. Consequently, veterans are directed outside the federally funded clinic to seek care in the

community. This situation presents an opportunity to elevate the level of care provided to veterans. Registered nurses are involved in the care coordination process. Research has shown that utilization of a triage tool by nursing staff at the point of referral in sleep medicine led to better outcomes than physicians triaging sleep referrals as evidence-based guidelines are used versus previous experience and opinion (Donovan et al., 2021). This quality improvement project aimed to increase referrals within the facility rather than outside resources by providing increased access to sleep medicine care with an evidence-based triage tool nurses use. Veterans should be given a choice of how and where they want to receive care. This quality improvement project demonstrates the desire to increase autonomy for veterans in their healthcare choices when deciding on care.

Methodology

The development of the sleep medicine triage tool was created from a national federally funded organizational template, with evidence-based guidelines on pathways for the need of a sleep study or sleep medicine consult. This tool was formulated by the project lead, and also consisted of scripting for the nurses and clinics to be utilized during the project implementation. The project implementation spanned over 10 weeks, from January to March 2024. Over this period, nurses underwent training on how to utilize the sleep medicine triage tool and the referral coordination process through a series of PowerPoint sessions. The triage tool was used for every referral placed for a sleep study or sleep medicine consultation. The project lead was present on-site every week to promptly address any emerging issues. Furthermore, bi-weekly meetings were scheduled between the project lead, the staff using the triage tool, and the site liaison. The Plan-Do-Study-Act (PDSA) method was integrated into the process. Thorough data collection and review were conducted, with any necessary adjustments or modifications scheduled during the

two-week review sessions for the triage tool or the current process in place. Microsoft Excel tracking sheets were employed on a secure SharePoint platform to monitor the project's progress, including the number of daily canceled consults and instances where the triage tool couldn't be utilized, often due to complex patient cases, manually tracked this information. Following the project's completion, a post-implementation survey was administered, gathering valuable feedback from the staff who used the triage tool.

Results

Out of the 1619 consults conducted throughout the project, the triage tool was utilized in 96% of the cases. 5% of sleep medicine and sleep study consults were canceled because they were not appropriate. However, 72 consults were ineligible for use by the triage tool due to the complexity of the veteran's health status. The data collected demonstrates that 74% of veterans received care within an appropriate timeframe at the site and actively chose to continue receiving their care within the federally funded clinic that serves veterans.

Specifically, an analysis of the CPAP consult title revealed that it was inaccurately placed 63% of the time, indicating a significant area for improvement in the process. A separate process was dedicated outside of the quality improvement project to streamline the CPAP consult process of ordering a machine and supplies for the veteran.

Working with the triage tool, over 120 appointment hours were opened to ensure the consults were placed appropriately, and veterans were given the choice to decide how they received care. By providing the choice to the veteran and all available options (within the site and the community clinics), only 4% of veterans left the facility.

Strengths and Limitations

Streamlining a standardized triage tool process allowed for the consistency of veterans to receive the same consistent care for the same symptoms and diagnoses. Multiple nurses could use this tool without questions if the consult had been dispositioned properly. The triage tool created better outcomes and solutions for the patient. By doing this, access was increased not only in the federally funded clinic that serves veterans but also in the community as consults were correctly dispositioned. This project places a strong emphasis on the coordination of care, which involves ensuring that all aspects of a patient's care are well-managed and effectively communicated among healthcare providers and professionals involved. By improving the veteran's experience, they were contacted proactively to discuss their care options and have discussions regarding care within the facility or in the community.

Despite the numerous accomplishments made during the project, it's essential to recognize the challenges. Multiple providers departed before the project commencement, significantly impeding veterans' access to internal site appointments. Staffing limitations resulted in a shortage of nurses available to assess the sleep medicine consults. Furthermore, the rising number of veterans seeking assistance from the federally funded clinics has placed a strain on already limited resources.

Implications and Conclusion

Access to care has been increased just by changing one consult process, the CPAP consult. Streamlining the consults being triaged led to sooner scheduled times and fewer delays. It also allowed multiple nurses to use this without any question of whether it was done effectively or correctly. The use of an evidence-based, streamlined triage tool can be used at any federally funded clinic that serves veterans. There is a need to increase provider staffing at all sites of care. A team-based approach to this process is crucial for the success of the veteran's

access to high-quality care. More meetings would need to happen to continue to update the sleep medicine triage tool. There should be a limited number of people involved in care options discussions with the veteran to minimize miscommunication.

The triage tool empowers clinicians to dedicate more time to patient care in the clinic, ultimately enhancing patient care and maximizing medical resources. This will generate cost savings for these federally funded clinics that serve veterans. It will also enable providers to operate at the highest extent of their license in delivering care to veterans within the clinical setting instead of allocating valuable time to administrative tasks such as reviewing consults, a responsibility that registered nurses are fully capable of managing. The utilization of a triage tool and appropriate access to specialty consultation appointments in sleep medicine will ensure high-quality care that veterans desire.

References

Donovan, L.M., Palen, B.N., Syed, A.S., Blankenhorn, R., Blanchard, K., Feser, W.J., Magid, K., Gamache, J., Spece, L.J., Feemster, L.C., Fernandes, L., Kirsh, S., & Au, D.H. (2021). Nurse-led triage of new sleep referrals is associated with lower risk of potentially contraindicated sleep testing: A retrospective cohort study. *BMJ Quality & Safety Journal* (30)7, 599-607.
doi: [10.1136/bmjqs-2020-011817](https://doi.org/10.1136/bmjqs-2020-011817)

U.S. Department of Veterans Affairs. (2023, July). *Facility Performance W.G. (Bill) Hefner*

Salisbury Department of Veterans Affairs Medical Center. VA Access to Care.

<https://www.accesstocare.va.gov/FacilityPerformanceData/FacilityData?stationNumber=659>