doccla

Maximising clinical capacity

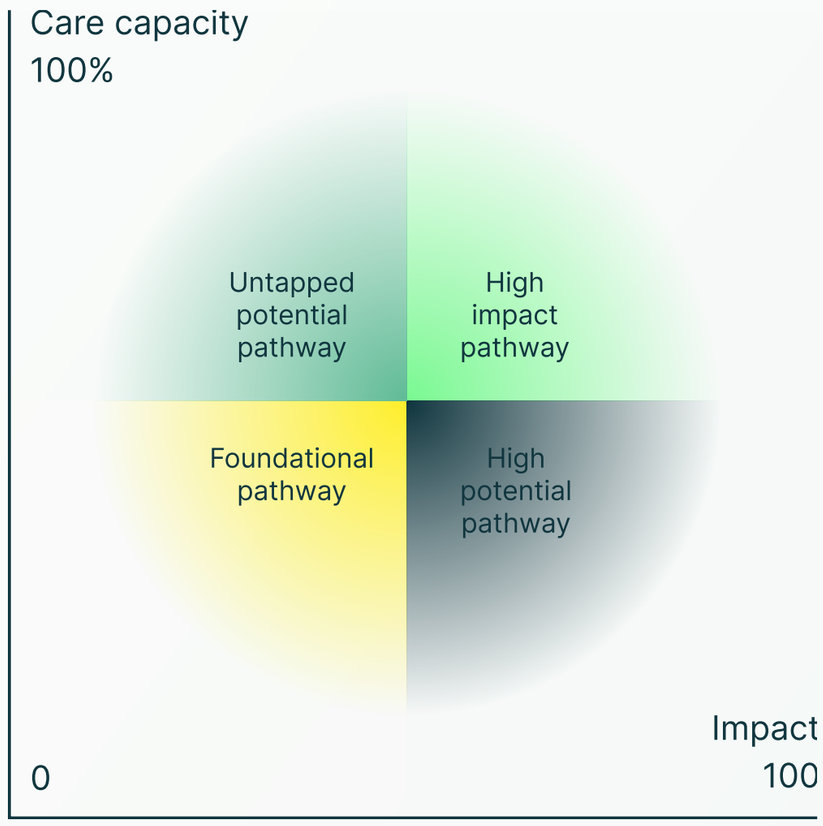
A winter playbook for healthcare organisations

A practical guide for healthcare organisations to maximise existing virtual care resources during winter by assessing current capabilities, increasing utilisation, and enhancing capacity without needing additional funding or staff.

Variables and impact score formula breakdown

To effectively prioritise which virtual care pathways to optimise during periods of high demand, we use an Impact Score formula that accounts for both the potential benefits of increasing virtual care utilisation and managing capacity efficiently.

Summary of impact score ranges and actions



$$\text{Utilization Rate (\%)} = \left(\frac{\text{3-Month Rolling Avg. Virtual Care Usage (Beds)}}{\text{Virtual Capacity (Beds)}}\right) \times 100\%$$

$$\text{Impact Score} = (100 - \text{Virtual Care Utilisation Rate(\%)}) \times \left(1 - \frac{\text{Referral Rate(\%)}}{\text{Assumed Referral Rate (30\%)}}\right) \times \text{Avg. Physical LOS (Days)}$$

Care capacity	Impact		Outcome	Suggested Actions
Untapped Potential Pathway	75% - 100%	0 - 40	Capacity is high, but the pathway is not generating substantial impact.	Optimise referral processes and consider redirecting capacity to other high-demand pathways.
High Impact Pathway	75% - 100%	40 - 100	The pathway is highly impactful, and virtual care capacity is well-utilised.	Maintain current strategies, monitor performance, and consider expanding capacity if demand continues to grow.
Emerging Pathway	0% - 40%	0 - 40	The pathway has low capacity and low impact but could grow over time.	Focus on gradual improvement, building capacity, and exploring opportunities for future growth.
High Potential Pathway	0% - 40%	40 - 100	Impact is high, but virtual care capacity is low, indicating unmet demand.	Invest in increasing capacity to meet the high demand and impact potential.

Before you read

As winter approaches, healthcare organisations face the annual challenge of increased patient demand, particularly from cardiovascular and respiratory conditions exacerbated by the colder weather. Building on the strategies outlined in our blog post, “Preparing for Winter: 5 Tactics to Mitigate Healthcare Pressures”, this playbook delves deeper into how you can maximise your existing virtual care resources. **For organisations already utilising virtual care, this guide provides actionable steps to enhance these services, alleviating winter pressures without the need for additional funding or staff.**

Assess your current virtual care capabilities & gaps

“Assessing your current virtual care capabilities is not always easy, especially when dealing with the ongoing demands of healthcare delivery. It takes time and careful reflection to truly understand where gaps exist, but this step is crucial for creating a service that genuinely benefits both patients and clinicians. At Doccla, we’re always ready to support teams through this process—whether it’s helping you gather the necessary data, sharing templates, or offering best practices. We’re here to make that journey a little less daunting, every step of the way.”

Rhiannon Thomas
Senior Implementation Lead at Doccla

Build an assessment framework

To effectively maximise your virtual care resources, start by constructing an assessment framework. This framework focuses on key factors such as utilisation rates, referral rates, and length of stay (LoS) for your virtual care pathways, helping you identify underutilised services, understand potential benefits, and prioritise areas for optimisation.

Utilisation referral score matrix template

Develop a matrix that provides a strategic overview of each virtual care pathway. The matrix should include the following variables:

1. 3-Month Rolling Average Virtual Care Usage (Beds) - Ask your virtual care supplier, at Doccla this can be sourced directly from our reports
2. Virtual Capacity (Beds) - Ask your virtual care supplier, at Doccla this can be sourced directly from our reports
3. Virtual Care Utilisation Rate (%) - Calculated by the formula below
4. Virtual Referral Rate (%) - Calculated by dividing the number of referrals to virtual wards by the total number of admissions to the pathway both physical ward admissions and virtual.
5. Physical Admissions 3-Month Rolling Average - Data should be readily available from your services
6. Average Physical Length of Stay (LOS) (Days) - Data should be readily available from your services
7. Impact Score (0-100) - Calculated by the formula below

Virtual care pathway	Virtual care usage **3 mon rolling avg, beds**	Virtual capacity **Beds**	Virtual care utilisation rate **%**	Virtual referral rate **%**	Physical admissions **3 mon rolling avg**	Avg. physical LOS **Days**	Impact score **0–100**

Identify causes of underutilisation

Understanding why certain pathways are under-utilised is crucial. Common causes may include:

Lack of Awareness
Referring clinicians and patients may not be fully aware of available virtual care options.

Training Gaps
Clinicians might feel unprepared to use virtual care technologies effectively.

Workflow Integration Issues
Challenges in integrating virtual care into existing clinical workflows.

Patient Reluctance
Hesitation from patients due to unfamiliarity or mistrust of virtual care.

Technical Barriers
Limited access to necessary technology or infrastructure.

Strategy for uncovering causes of underutilisation

The strategy to uncover the causes of underutilisation involves a systematic approach:

Data collection
Gather quantitative and qualitative data from various stakeholders, including clinicians, patients, and administrative staff.

Stakeholder engagement
Involve key stakeholders through surveys, interviews, and focus groups to gain insights into their experiences and perceptions.

Process analysis
Examine current workflows and processes to identify integration challenges and inefficiencies.

Barrier identification
Categorise the barriers into themes such as awareness, training, workflow integration, patient reluctance, and technical issues.

Action planning
Develop targeted interventions to address identified barriers.

For clinicians root cause analysis deep dive and quick assessment

“Clinicians are on the front lines, and we understand the immense pressures they face daily. Integrating virtual care can feel like an additional challenge, but with the right support, it becomes a tool that lightens the load rather than adds to it. At Doccla, we believe that proper training, clear guidance, and ongoing support are essential in helping clinicians confidently embrace virtual care. This, in turn, not only enhances patient outcomes but also makes workflows smoother, helping to reduce stress and improve overall efficiency.”

Greg Edwards Chief Medical Officer, Doccla

Setting up surveys

Objective

Assess clinicians’ awareness, attitudes, and challenges regarding virtual care pathways.

Survey Design Tips

- Keep it concise: Limit to 10-15 questions to encourage completion.
- Use a mix of question types: Include multiple-choice, Likert scale, and open-ended questions.
- Ensure anonymity: Encourage honest feedback by keeping responses confidential.

Sample survey questions

AWARENESS AND KNOWLEDGE

How familiar are you with the virtual care pathways available in our organisation?

○ ○ ○ ○ ○

Not familiar Very familiar

Have you received formal training on how to refer patients to virtual care?

○ Yes ○ No

PERCEPTIONS AND ATTITUDES

Do you believe virtual care is as effective as in-person care for suitable patients?

○ Yes ○ No ○ Depends on the case (please specify) _____

What concerns do you have about utilising virtual care pathways?

_____

WORKFLOW INTEGRATION

How easy is it to incorporate virtual care referrals into your daily workflow?

○ Very easy ○ Somewhat easy ○ Neutral ○ Somewhat difficult ○ Very difficult

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What barriers do you face when referring patients to virtual care? (Select all that apply)

☐ Lack of time

☐ Complex referral process

☐ Uncertainty about patient eligibility

☐ Technical issues

☐ Other (please specify)

Days-in-the-life exercise

Objective

Observe and document clinicians' daily workflows to identify integration challenges with virtual care.

Note structure example

Clinician details

- Name/ID (optional for anonymity)
- Specialty/Department
- Years of experience

Schedule overview

- Time-blocked schedule of the day
- Types of appointments (in-person, virtual, administrative tasks)

Workflow observations

Morning Routine

- Review of patient lists
- Identification of potential virtual care candidates

Patient Consultations

- Duration and nature of consultations
- Discussion of virtual care options

Referral process steps taken

Administrative Tasks

- Documentation practices
- Use of electronic health records (EHR)
- Time spent on referral processes

Challenges Noted

- Time constraints
- Referral system usability issues
- Interruptions or multitasking demands
- Communication barriers with patients or team members

Positive Observations

- Efficient use of virtual care tools
- Successful patient education on virtual care
- Streamlined referral processes

Clinician Feedback

- Personal insights on virtual care integration
- Suggestions for improvement

Review referral and admission data

Objective Analyse data to identify patterns and assess if patients could have been suitable for virtual care.

Steps

Collect data

- Number of referrals to virtual care per clinician.
- Admission rates for conditions suitable for virtual care.
- Patient outcomes and readmission rates.

Identify trends

- Clinicians with low referral rates.
- Departments or units with underutilisation.

Assess patient inclusion / exclusion criteria

- Review admission records to determine if patients met criteria for virtual care.
- Analyse reasons for in-person admissions over virtual referrals.

Workflow integration issues

- Evaluate if complex referral processes hinder timely referrals.
- Identify bottlenecks in the referral system.

Finding the heroes

Objective Learn from clinicians who are effectively utilising virtual care pathways.

Steps

Data analysis

• Identify clinicians or teams with high virtual care referral rates.
• Examine their patient outcomes and satisfaction scores.

One-on-one interviews

Introduction
• Thank them for their effective use of virtual care.
• Explain the purpose of the interview.
Discussion points
• What motivates you to refer patients to virtual care?
• What benefits have you observed for your patients and your practice?
• Can you describe your workflow when referring patients to virtual care?
• What challenges have you overcome, and how?
• What advice would you give to colleagues hesitant about virtual care?
Closing
• Express appreciation.
• Discuss potential for them to mentor others or share best practices.

Extract Learnings

• Identify successful strategies and mindsets.
• Explore possibilities for peer-led training or mentorship programs.

For patients
Root cause analysis

Post admission or discharge survey

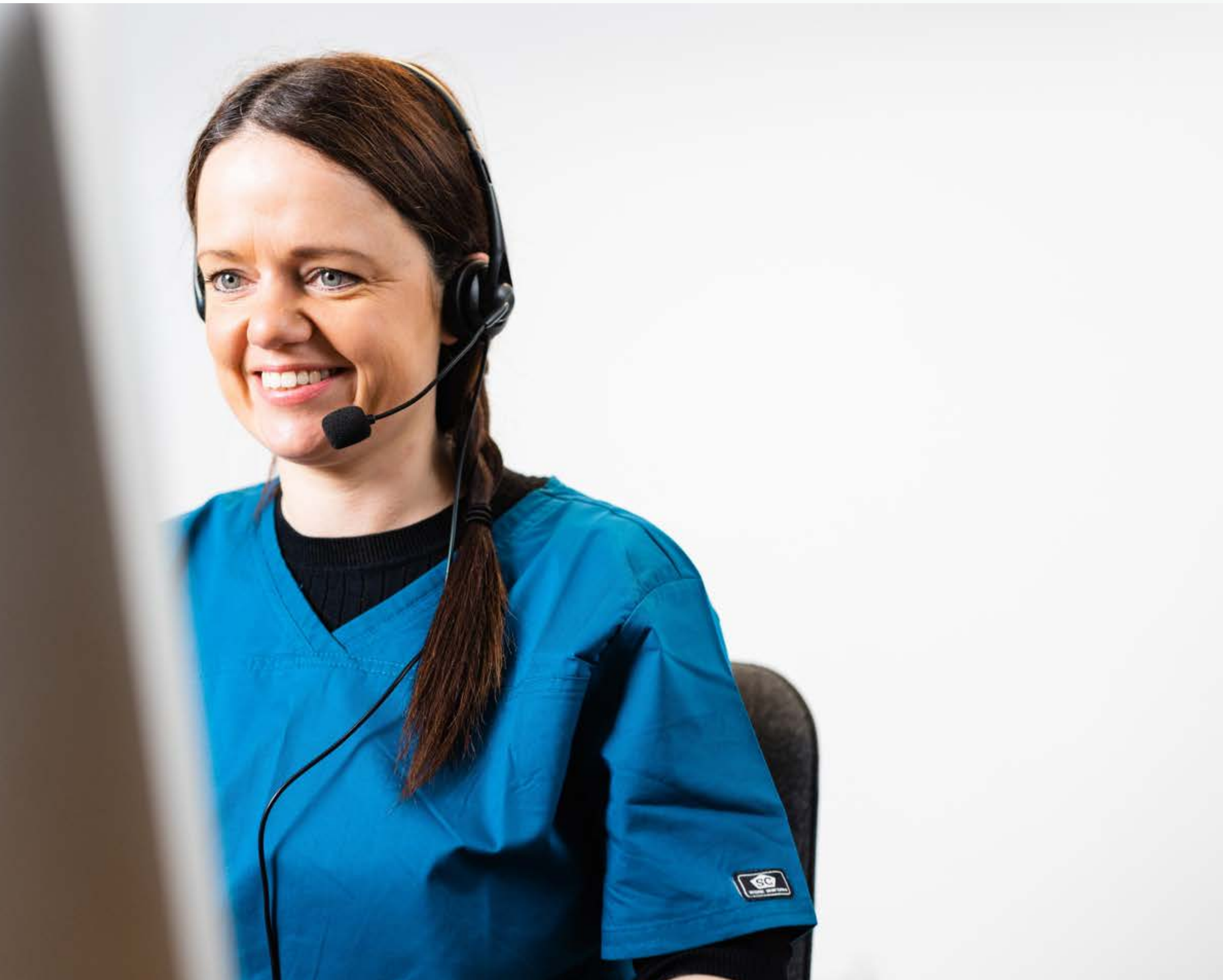
Objective

Understand patients’ awareness and perceptions of virtual care options.

Criteria for patient selection

• Recently admitted or discharged patients eligible for virtual care.

• Diverse demographic representation (age, gender, ethnicity).



Sample survey questions

AWARENESS

Before your admission/discharge, were you informed about virtual care options?

◯ Yes ◯ No

ACCESS TO TECHNOLOGY

Do you have access to a reliable internet connection and a device suitable for virtual care?

◯ Yes ◯ No

PERCEPTIONS

How comfortable are you with using technology (e.g., smartphones, computers) for healthcare?

◯ Very comfortable ◯ Somewhat comfortable ◯ Not comfortable

Would you consider using virtual care services for your condition?

◯ Yes ◯ No ◯ Not sure (please explain) _____

CONCERNS

What concerns do you have about virtual care? (Select all that apply)

☐ Privacy and security
☐ Technology challenges
☐ Preference for face-to-face interaction
☐ Lack of personal touch
☐ Other (please specify)

SUPPORT NEEDS

What would make you feel more comfortable using virtual care? (Select all that apply)

☐ Technical assistance
☐ Educational materials
☐ Assurance of privacy
☐ Testimonials from other patients
☐ Other (please specify)

Phone call interview

Objective Gain deeper insights into patient attitudes and barriers.

Interview structure

Preparation

- Obtain consent
  Ensure the patient agrees to participate.
- Schedule
  Respect the patient’s availability.

Introduction

- Introduce yourself
  Name, role, and purpose of the call.
- Set expectations
  Explain the interview will take about 15–20 minutes.

Discussion points

- Can you share your experience with the healthcare services you received recently?
- Were you informed about virtual care options? If yes, what was your impression?
- What concerns or reservations do you have about using virtual care?
- What benefits do you see in virtual care, if any?
- What support would you need to feel comfortable using virtual care services?

Active listening

- Encourage Openness
  Use empathetic responses.
- Probe for Details
  Ask follow-up questions for clarity.

Closing

- Summarise key points
  Reflect back what you’ve heard.
- Thank the patient
  Express appreciation for their time and insights.
- Next steps
  Inform them of how their feedback will be used.

Tackling the identified issues

After analysing the collected data, the root causes of underutilisation typically fall into three main categories:

1. Low referrals due to deficient/restrictive patient protocols

Review acceptance

- Evaluate the current eligibility guidelines for virtual care.
- Identify if criteria are too restrictive or unclear.

Benchmarking

- Compare protocols with industry standards and best practices.
- Consult with Doccla to access benchmarking data and recommendations.

Protocol Refinement

- Simplify and clarify guidelines.
- Ensure criteria are inclusive of patients who can safely benefit from virtual care.

Communication

- Disseminate updated protocols to all clinicians.
- Provide quick-reference materials or decision aids.

2. Low referrals due to clinician adoption barriers

Educational Workshop

- Overview of virtual care benefits and organizational goals.
- Present case studies showcasing positive patient outcomes.
- Share statistics on efficiency gains and patient satisfaction.
- Invite a peer who is a strong advocate of virtual care to share experiences.
- Illustrate the virtual care process from referral to discharge.
- Hands-on demonstration of referral processes and virtual care technologies.
- Q&A session

Provide brochures, guides, and a placeholder link to Doccla's clinician educational materials.

Ongoing support

- Establish a mentorship program pairing experienced virtual care clinicians with those less familiar.
- Offer regular updates and refresher sessions.

Addressing mistrust and misconceptions

- Create forums for open discussion about concerns.
- Provide evidence-based information to counter myths.

Ongoing support

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- Provide evidence-based information to counter myths.

3. Low adoption due to patient reluctance or technical barriers

Patient engagement campaign:

Recently discharged patients and those frequently admitted for conditions suitable for virtual care.

- Distribute leaflets and brochures in the hospital setting.
- Display banners and posters highlighting virtual care benefits.
- Develop a patient microsite dedicated to virtual care information.
- Include testimonials, FAQs, and easy-to-understand guides.

Enhancing accessibility

- Explore options to provide devices or internet access to patients in need.
- Offer assistance through helplines or in-person sessions to help patients set up and navigate virtual care platforms.

Building trust

- Clearly communicate how patient data is protected.
- Use patient-centred language and address individual concerns.

Feedback

- Implement surveys or feedback forms to continually assess patient satisfaction and identify areas for improvement.

Conclusion

As the winter season approaches, healthcare organisations are likely to experience increased patient demand, particularly for conditions like cardiovascular and respiratory illnesses that tend to worsen in colder weather. This playbook has outlined practical steps to maximise existing virtual care resources, focusing on assessing current capabilities, identifying causes of underutilisation, and implementing targeted strategies to enhance utilisation without the need for additional funding or staff.

By thoroughly evaluating utilisation rates and impact scores, organisations can prioritise which virtual care pathways to focus on during peak times. Understanding and addressing the barriers faced by both clinicians and patients—such as lack of awareness, training gaps, workflow integration challenges, patient reluctance, and technical issues—is crucial for optimising virtual care services.

Implementing targeted actions like refining patient protocols, offering educational workshops for clinicians, and engaging patients through tailored communication can significantly improve the adoption and effectiveness of virtual care pathways. These steps not only help in managing increased patient loads but also contribute to maintaining high-quality care delivery during demanding periods.

With experience supporting over 50% of NHS Integrated Care Systems and managing more than four million patient days, Doccla has gained valuable insights into effective virtual care implementation. If your organisation is seeking guidance on winter planning or enhancing virtual care services, we are available to offer support and share best practices.

For assistance with maximising your clinical capacity this winter through optimised virtual care solutions, please feel free to contact us.

About Doccla

Doccla is the virtual ward company. Founded in 2019, we have since maintained an unwavering ambition to supply the very best patient monitoring service with the highest levels of clinician and patient satisfaction. Clients praise our comprehensive support, which frees them from worrying about implementation, technology, logistics and patient compliance. We take care of every detail to allow clinicians to focus on what they do best, caring for patients. Our service is proven to reduce costs for a wide range of pathways, improving outcomes and freeing resources. It is the future of healthcare, today.

For more information, visit doccla.com.

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