


# Allied health clinical leader

Dietitian first  
gastroenterology clinic

# Drivers for change

- Need to improve gastroenterology outpatient services
  - reduction of Category 2 and Category 3 waiting lists
  - improve access and patient journeys
- Demonstrate Dietitians ability to effectively act in Extended scope roles within Allied Health

# Key elements of role

- Dietitian provides comprehensive clinical and dietary assessment and intervention to eligible gastroenterology patients
  - Role undertakes request and interpretation of relevant pathology and other diagnostic tests
  - Patients referred for gastroenterology opinion or review, or are discharged directly back to community-based services
  - Under governance of gastroenterologist or surgeon
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# Evidence of impact

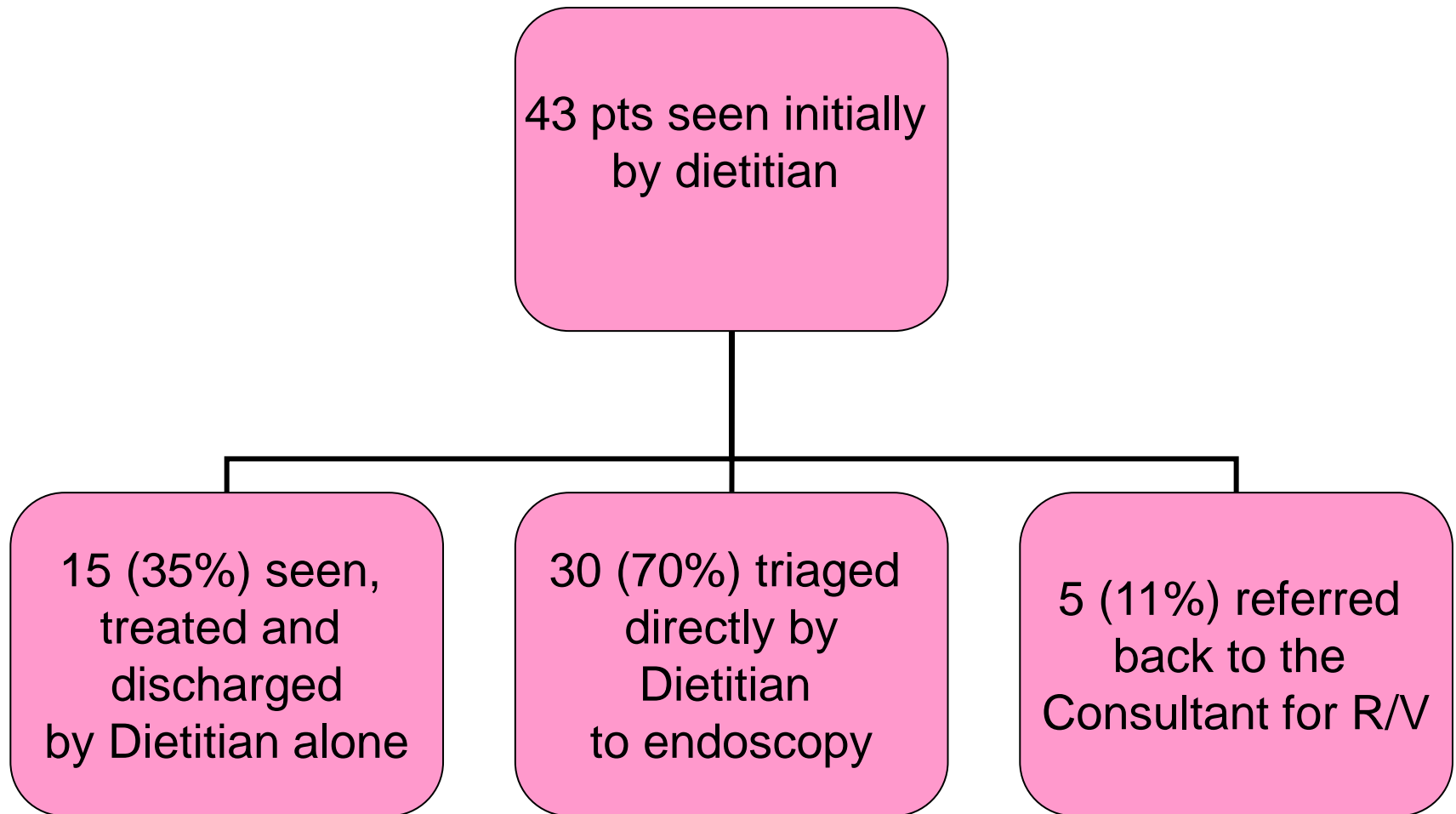
- Pilots at Bundaberg and Royal Brisbane and Women's Hospital evaluated the leader role via:
  - staff and patient surveys
  - pre/post intervention measures of waiting lists, patients seen, patients removed from wait lists

# Intermediate outcomes: Bundaberg

(12 month pilot underway)

- A predetermined range of gastro diagnosis (IBD, IBS, Coeliac, GORD) expedited from Category 2 and 3 waiting list by the dietitian
- 63 patients offered an appointment to this clinic, in the initial 6 months of the pilot
- 43 new patients seen by the Dietitian
- Mean waiting time significantly lower ( $p=0.016$ ) in the dietetic triage group compared to the pre-diet clinic group
- On average patients were seen 23 days earlier
- Patient satisfaction was excellent

# Results at 6 months - Bundaberg



# Outcomes: Royal Brisbane and Women's Hospital

- 11 patients reviewed by dietitian over 12 months
- On average patients seen 250 days earlier (29 days dietitian clinic vs 286 days for Category 2 vs 312 days for Category 3)
- 100% of patients discharged to community services and declined gastroenterology consultation
- High level of patient and stakeholder satisfaction