

# **Getting Ready for Self-Scheduling**

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Version 21.3



Our new Multi-Location Calendar updates are here! Please see the OP 21.3 Calendar Articles for an overview of the changes. Practices can configure OP to switch to the new calendar and explore its features.

#### Overview

As you may have heard, the new OP Patient Portal based on the InteliChart platform will offer Live Scheduling options that you can control. Since we know that many practices build their schedule templates months ahead of time, there is a small but crucial enhancement that you will be able to use so that your schedule will be properly setup to allow or disallow patient Live Scheduling.

## **Appointment Slot Protection**

If you are responsible for maintaining your practice's appointment calendar, you know that time is made available for individual providers by "painting" slots with different Appointment Zones. Zones act like templates with universal properties that control all slots to which they are applied. Specifically, each Zone has two properties that control how appointments painted with it can be assigned: Protection Status and Purpose. By default, Zones are not protected, which means all authorized users can fill associated slots with appointments for any time period. Until now, OP offered two forms of protection:

- Owner Protected: only the person who "owns" the slot (by virtue of it being in their column of the schedule), as well as superusers who have the Schedule\_Overwrite\_OwnerProtectedTemplates permission, may add appointments.
- Same Day Only: slots can only be booked on the day when they exist on the calendar. This allows you to reserve time that cannot be booked in advance. The same override permission referenced above also applies to this type.

A third protection option: **Staff Protected** has been added. Slots painted with a Zone that is Staff Protected will be invisible to patients who are trying to schedule and appointment on the Patient Portal using live scheduling. This allows you to control how much (if any) of your calendar is open or closed to Live Scheduling.

#### **Appointment Slot Purpose**

For staff, the Zone Purpose is advisory, not mandatory. These generic purposes, like Preventive Encounter, Non-Preventive Encounter, Any Encounter, Consultation, and so on, are treated like strong "suggestions" of how to book the time. However, OP will not prevent a staff member from booking a sick appointment in a well slot, or vice versa. The ultimate enforcement mechanism is an office policy about circumstances which do (or do not) warrant using slots for other than their intended purposes. For example, Well time that did not fill prior to today would become fair game for any kind of appointment, in order to fill the slot.



**Important**: When patients use Live Scheduling, the Purpose will be enforced on their requests. If they ask for an Appointment Type that is associated with Well care, they will only be shown empty slots of sufficient length with a generic purpose of Preventive Encounter or Any Encounter. The same will be true of sick visits, nursing visits, consults, and so on.





## Planning for Live Scheduling

With that background, let's consider several strategies you can begin to follow today as you build your forward schedule, so your calendar will be ready when the big day comes.

- NO Live Scheduling: If you don't plan to offer patient live scheduling in the foreseeable future, you only need to do one
  thing:
  - Go to the Appointment Zones tab on the Appointment Types form and change the Protection Status of all blank or Not Protected zones to Staff Protected. This will prevent all of your current zones from being visible to self-scheduling requests. (You don't need to change any Zones that are currently set to Owner Protected or Same Day, because those will never be shown to patients.)
- FULL Live Scheduling: If you want to fully enable live scheduling, you don't have to do anything. By leaving Zones blank or Not Protected, slots associated with them will immediately become visible once you enable self-scheduling on the portal.
- PARTIAL Live Scheduling: We know there is a lot of sensitivity around live scheduling, particularly whether patients will be able to schedule appointments that don't make sense. You have full control over this.

## Other Live Scheduling Factors

We understand that time is your most valuable asset and that mis-scheduling has the potential to cause more problems than it solves, if not used wisely. To that end, be aware of the following considerations that should help put your mind at ease about taking this step:

- There is no such thing as an open-ended request. In order to request an appointment, the patient must provide a reason, location (if you have more than one), provider (or say "next available with anyone"), and time frame. If any of your existing Appointment Types are only appropriate for staff scheduling, there will be a new property that controls whether patients can request them.
- Based on this information, OP will run a process very similar to what happens today when you try to find the next available appointment on the calendar.
- Since OP knows which patient is making the request, Sick and Well override appointment types on individual patient charts will be applied when fulfilling the request so they cannot schedule too little time.
- At the system level, you will have control of an "exclusive window" for both Sick and Well visits. For example, you might
  create an exclusive window for Sick visits so they cannot be booked by patients with less than two hours notice.
   Overnight, patients could book early Sick slots, but once you are in the office they could only self-book at least two hours
  ahead of the booking time. How you establish these preferences depends on your office policies and how open your
  schedule really is. The important thing is that it will be under your control.

Version 20.3

#### Overview

As you may have heard, the new OP Patient Portal based on the InteliChart platform will offer self-scheduling options that you can control. Since we know that many practices build their schedule templates months ahead of time, version 14.19.6 and higher contains a small but crucial enhancement that you will soon be able to use so your schedule will be properly setup to allow or disallow patient self-scheduling if you enable this feature when it becomes available in the future.



**Note**: Version 14.19.8 fixed the issue of disabling the Schedule when all Appointment Zones were set to Staff Protected that was introduced in version 14.19.6.

#### **Appointment Slot Protection**





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- Same Day Only: slots can only be booked on the day when they exist on the calendar. This allows you to reserve time that cannot be booked in advance. The same override permission referenced above also applies to this type.

OP 19.6 adds a third protection option: **Staff Protected**. In the future, slots painted with a Zone that is Staff Protected will be invisible to patients who are trying to self-schedule. This allows you to control how much (if any) of your calendar is open or closed to self-scheduling.

#### **Appointment Slot Purpose**

For staff, the Zone Purpose is advisory, not mandatory. These generic purposes, like Preventive Encounter, Non-Preventive Encounter, Any Encounter, Consultation, and so on, are treated like strong "suggestions" of how to book the time. However, OP will not prevent a staff member from booking a sick appointment in a well slot, or vice versa. The ultimate enforcement mechanism is an office policy about circumstances which do (or do not) warrant using slots for other than their intended purposes. For example, well time that did not fill prior to today would become fair game for any kind of appointment, in order to fill the slot.

When patients self-schedule, the Purpose will be enforced on their requests. If they ask for an appointment type that is associated with well care, they will only be shown empty slots of sufficient length with a generic purpose of Preventive Encounter or Any Encounter. The same will be true of sick visits, nursing visits, consults, and so on.

### Planning for Self Scheduling

With that background, let's consider several strategies you can begin to follow today as you build your forward schedule, so your calendar will be ready when the big day comes.

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- FULL Self Scheduling: If you want to fully enable self-scheduling, you don't have to do anything. By leaving Zones blank or Not Protected, slots associated with them will immediately become visible once you enable self-scheduling on the portal.
- PARTIAL Self Scheduling: We know there is a lot of sensitivity around self-scheduling, particularly whether patients will be
  able to schedule appointments that don't make sense. You have full control over this. Here are a few options you might
  consider until you gain some real world experience:
  - If you want to allow self-scheduled well visits only, set Staff Protected status only on Zones that are not related to well care
  - If some of your doctors are willing to self-schedule while others are not, you can create one or more new Zones that are similar to your existing Zones, but with a different Protection Status and a slightly different color to distinguish between





protected and unprotected slots with the same basic purpose. Then when you build your schedule, use the appropriate Zone type to distinguish between those that should or should not allow self-scheduling. In either event you have not given away control of any part of your schedule. Unprotected Zones are open to all users, both staff and patients. There is no such thing as a patient-only zone.

## Other Self-Scheduling Factors

We will provide more details about self-scheduling in future release notes, but hopefully this is enough to help you get started thinking about your strategy. We understand that time is your most valuable asset, and that mis-scheduling has the potential to cause more problems than it solves if not used wisely. To that end, be aware of the following considerations that should help put your mind at ease about taking this step:

- There is no such thing as an open-ended request. In order to request an appointment, the patient must provide a reason, location (if you have more than one), provider (or say "next available with anyone"), and time frame. If any of your existing Appointment Types are only appropriate for staff scheduling, there will be a new property that controls whether patients can request them.
- Based on this information, OP will run a process very similar to what happens today when you try to find the next available appointment on the calendar.
- Since OP knows which patient is making the request, sick and well override appointment types on individual patient charts will be applied when fulfilling the request so they cannot schedule too little time. In addition, the system can prevent patients from scheduling their next well visit before it is due.
- At the patient level, there will be a new property to exclude patients from self-scheduling (for those who abuse the system
  or have special needs), or to specify that they must be seen only by their PCP, or that they must be seen by a member of
  their PCP's Team.
- At the system level, you will have control of an "exclusive window" for both sick and well visits. For example, you might create an exclusive window for sick visits so they cannot be booked by patients with less than two hours notice. Overnight, patients could book early sick slots, but once you are in the office they could only self-book at least two hours ahead of the booking time. Similarly, you might say that well visits must be booked at least three days ahead; if they need something sooner than that, they must call the office to arrange it. (Otherwise patients who need a last minute well visit to fill out school forms could sneak into valuable same day sick time.) How you establish these preferences depends on your office policies and how open your schedule really is. The important thing is that it will be under your control.

