



Health and Social Care Scrutiny Sub (Community and Children's Services) Committee

Date: MONDAY, 11 NOVEMBER 2013
Time: 1.45 pm
Venue: BASINGHALL SUITE - GUILDHALL, EC2

5. MINOR INJURY UNIT REPORT

Report of Barts Health NHS Trust.

John Barradell
Town Clerk and Chief Executive

This page is intentionally left blank

Agenda Item 5

Committee(s):	Date(s):
Health and Social Care Scrutiny Sub Committee	11 th November 2013
Subject: Barts Health NHS Trust update	Public
Report of: Director of Community and Children's Services	For Information
Summary	
<p>This paper gives brief updates from Barts NHS Health Trust. These include:</p> <ul style="list-style-type: none">• Promoting the Minor Injuries Unit as an alternative to A&E• Outpatients' appointment booking systems <p>The Trust is currently undergoing a CQC inspection, and is expected to attend the next Health and Social Care Scrutiny Sub Committee to give a full update. The Trust will also be present at the Joint Health Overview and Scrutiny Subcommittee (JHOSC) on 20th November.</p> <p>Recommendation(s)</p> <p>Members are asked to:</p> <ul style="list-style-type: none">• Note this report and its contents	

Main Report

This paper gives brief updates from Barts NHS Health Trust.

The Trust is currently undergoing a CQC inspection, and is expected to attend the next Health and Social Care Scrutiny Sub Committee to give a full update. The Trust will also be present at the Joint Health Overview and Scrutiny Subcommittee (JHOSC) on 20th November.

Promoting the Minor Injuries Unit as an alternative to A&E

Barts Health is working to ensure that it is prepared for winter, and the increase in demand for acute and emergency care which the season brings. Members may be aware that the Department of Health has released funding to the NHS to help support trusts during the winter. The funding has been agreed much earlier this year than in 2012, allowing everyone in the health and social care sectors to plan more effectively for winter. Barts Health has secured funding of £12.8m to boost winter care plans, and is working with commissioners and local providers to agree how best

to make use of the funds. This will include opening additional capacity in hospitals to meet expected demands for inpatient beds. Barts Health will continue to keep members informed.

In addition, and as part of the Trust's communications strategy, Barts Health is in discussions with local commissioners on a joint awareness campaign, supported through social marketing, to help members of the public make informed decisions about services to use during the winter period. Once the detail of this campaign has been agreed, Barts Health would welcome the support from the City of London and will be in touch with the City's strategy and communications team in due course.

Outpatients' appointments booking systems

Members have previously expressed concerns about patients being told to ignore appointments letters, and then subsequently missing appointments and being discharged. It is believed that such a situation may have arisen as a result of the previous system of "Partial Booking". Partial Booking relied upon sending at least two computer generated letters to patients asking them to call a call centre to book a new appointment. When a patient called and an appointment could not be booked, telephone staff escalated this and advised the patient that they would be contacted within two weeks with a new appointment. However, the telephone staff were unable to suppress the auto-generation of further letters, which is often why patients were advised to 'ignore' them should they receive any further correspondence.

This was a less than ideal process and would have been extremely frustrating for patients – this was one of the main reasons the Trust took the decision to move to a Full Booking Model earlier this year (in June 2013). Full Booking is a process whereby the Trust endeavours to make telephone contact with the patient, rather than put the onus on the patient by sending them several letters asking them to contact the Trust. Full booking is a simpler, less confusing and more efficient process and improvements have been seen for booking new appointments. This new system does rely upon the Trust being able to make contact with the patient by telephone, and if for some reason this is not possible e.g. they have been provided with an incorrect telephone number, then an appointment letter will be sent to the patient address on file.

Barts Health is working hard to improve outpatients' experiences. A full report on progress made is included as appendix 1

Appendices

1. Barts Health: Progress update on outpatients

Farrah Hart

Health and Wellbeing Policy Development Manager

T: 020 7332 1907

E: farrah.hart@cityoflondon.gov.uk

This page is intentionally left blank

Barts Health: Progress update on outpatients

Paper provided by Lisa Hollins, Director of Service Development

6 November 2013

Purpose

This report provides an update on performance for outpatients at Barts Health NHS Trust.

This report is produced following a request by the City of London Health and Social Care Scrutiny Sub Committee for an update on outpatient services, in particular on waiting times and appointment letters.

Outpatients at Barts Health

The vision for Barts Health is to change lives, by delivering excellent health outcomes and health improvement for the residents of east London and beyond. Barts Health delivers 1.4 million outpatient appointments per year across our six hospital sites. The Trust has recently expanded its outpatient services and introduced new ways of delivering care for our patients, through telephone and skype consultations.

The key areas for the Barts Health outpatient strategy are to improve standards, improve patient pathways and use IT to transform patient experience. In order to review and improve services, the Trust has implemented the following structures:

- A Transformation Board to oversee change and share good practice across the organisation
- A tried and tested programme of pathway change for all clinical teams
- Operational meetings on each site
- A training and development programme to embed pathways through lean principles
- Weekly meetings to lead change with general managers
- Engagement events with a variety of staff involved in delivering outpatient services

Over a three year period, there has been a significant improvement in core standards for outpatient services, which has been measured by response times. However patient feedback provides a more comprehensive insight into how our services are performing. Following improvements in access to first outpatient appointments and rebuilding the outpatient environment over the past three years (2009 – 2012), patient feedback has told us that:

- Reported problems with appointment times down from 17% to 4%
- 6% of patients reported problems with the environment in 2012 - a decrease from 25% in 2009



- The net promoter score (how many patients recommend the service) improving from 52% to 87% on the Whipps Cross site.

The focus for improving standards in 2013 has been to be more efficient in the turnaround time of outpatient letters. With 1.4 million outpatient letters being sent to GPs and patients, we need to ensure clear reporting on our performance. The Trust has consistently improved turnaround of letters month on month and following rigorous scrutiny and local actions. The majority of our services are now close to or under 10 days for letter turnaround times.

Further work has just started to look at reviewing waiting times in clinics across the organisation and our outpatient services will now be reporting monthly feedback on the Friends and Family test. The Trust would be happy to report back to members on this early next year.

Improvements in pathways and innovations in care

Barts Health has also started a systematic review of outpatient pathways to ensure that we take advantage of recent innovations in care and that the patient pathway is consistent across the Trust.

Creating ideal pathways is the best way of producing better outcomes for our patients and more effective, timely care. Barts Health started a programme in April 2013, where 18 service teams were supported to take part in pathway redesign events, to review how they can improve pathways and patient experience. The programme has produced some major improvements for patients including:

- Introducing one stop haematuria (urology) pathways that ensure all diagnostics are completed on the day with a full report back to the GP within five days
- Straight to diagnostic tests for a number of gynaecology pathways ensuring diagnosis and treatment is given more rapidly for the patient
- Introducing one stop clinics for Gynaecology services to shorten the time to treatment and move patients from daycase to an outpatient setting
- Changes to cardiac patient pathways that have promoted consistent discharging and enabled capacity for new patients to be seen more quickly
- Improvements to rheumatology patient pathways – moving to one stop clinics delivered within 2 weeks of referral
- Delivering one stop maternity services to ensure faster care for patients and releasing capacity for a growing number of births
- Telephone follow-ups for breast and testis cancer patients in their homes rather than in a clinic setting.

The Trust is planning to review pathways for other specialties and will have an on-going programme to care outpatient care within each area.

Specific concerns raised by members

Members of the committee have expressed some concerns regarding the waiting times experienced by patients for the central outpatients' appointments line.

The waiting times for appointments are regularly reviewed by the outpatients' team. There was an increase in waiting times earlier this year due to an increase in demand for outpatient services overall, and a peak in activity at certain times in the week.

To ensure waiting times are much lower for patients and to improve the experience when booking appointments, the Trust has now agreed to bring in additional staff resource for the central outpatients' appointments line. We expect to be implemented in November 2013.

A specific concern has also been raised regarding the appointment letter system which gave patients two reminder letters and then a discharge letter. These letters are automatically generated by the computer system and can be confusing for some patients whose appointments have been noted and will be booked closer to when the appointment time is due.

The Trust moved to a different process for appointments in June this year (Full Booking) whereby patients do not get an appointment letter asking them to call in to the appointments line; instead they are directly called by staff at the hospital to arrange an appointment. This will result in improvement for patients and we will continue to monitor patient feedback on the system.

Summary

Outpatient care is the most common contact that a patient has with the Trust and there is an ongoing programme of work to that looks at how we can make improvements. The information above outlines specific areas of improvement over the past year, and describes the Trust's commitment to making further improvements for our patients. Lisa Hollins, Director of Service Development can would welcome welcome the opportunity to verbally update on our progress at a future meeting of the committee.

This page is intentionally left blank