

Patients' experiences of outpatients' booking services

A local Healthwatch report: executive summary

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Healthwatch comments

Working closely with the Clinical Commissioning Group (CCG) and local NHS Trust, Healthwatch Brighton and Hove launched an outpatients' booking survey in January 2020. With the help of our volunteers we subsequently visited several outpatient departments based at the Royal Sussex County and Princess Royal hospitals to speak with patients. We wanted to understand what aspects of the current booking system were working, and where it fell- down. By March, we had gathered the views of 120 patients. Our plans to analyse the results, publish our report and discuss our findings with providers were halted by the COVID-19 pandemic.

COVID-19 will undoubtedly impact on future outpatient waiting times which are increasing one week every week. In the future, services are likely to face severe disruption and it may take years to restore services to a new normal.

As systems look to restore after COVID-19, we will return to our project's findings and work with our CCG and NHS Trust to determine what the data reveals in terms of where improvements can be made.

Patient experiences can also help to deliver on the NHS Long Term Plan for transforming outpatients' systems, whilst modernising it for the benefit of patients.

In the interim, we have produced this executive summary detailing our work and impact in 2019-2020.

July 2020

Executive summary

Welcome to our summary report which examines patient's experiences of having their outpatient's appointment booked for them.

We would like to extend our thanks to Brighton and Sussex University Hospitals NHS Trust (BSUH) and Brighton and Hove Clinical Commissioning Group (CCG) for their close cooperation in the development and delivery of this project.

Highlights from this project include



Healthwatch visited
4 hospitals; 19 wards;
9 departments and
3 specialist mental
health services



11 Healthwatch staff and
volunteers took part,
contributing over 75
hours. BSUH and SPFT
staff supported us.



We collected 120 patient
experiences using a
survey developed with
the involvement of BSUH
and CCG

What impact has Healthwatch had

As well as delivering this project and discussing our concerns directly with BSUH, the CCG and a company called Optum (who deliver GP outpatient referrals), and providing them with real-life case studies highlighting patient experiences, we have:



Been interviewed by the
BBC about patient
experiences helping to
raise public awareness.



Liaised with other
Healthwatch teams to
understand the wider
context.



Been asked to join the
newly created BSUH
Outpatient improvement
group and at the Trusts
meetings with Optum



Recognition of our work by the CCG

We are delighted you are doing this really thorough piece of work - it comes at just the right time, and will hopefully lead to some significant improvements for our population.

Dr Rachel Cottam GP, Clinical Lead, Planned Care, CCG



Background

National context of outpatients' services

At the time of writing (February 2020) it was reported that outpatient attendances had been steadily rising over the past ten years reaching 94 million at an estimated cost of £8 billion a year. The [NHS Long Term Plan](#) highlighted a move away from traditional outpatient service provision, and redesigning the way they are delivered. This includes [embracing new technology](#) to better serve patients' needs and better use NHS resources.

Local context

Brighton and Sussex University Hospitals NHS Trust (BSUH) see over 50,000 people across their outpatient departments a month and receive on average 600-650 new referrals a day. Referrals from GPs account for approximately 46% of all referrals, with the remaining 56% received from a variety of sources, for example consultant to consultant, A&E, and allied healthcare professionals.

Our local Trust see 50,000 people for outpatient services per month

The current system is stretched. BSUH is currently unable to consistently offer non-emergency outpatient appointments and operations within [18 weeks](#) of a GP referral to all patients all the time. Some specialties are particularly affected, for example urology, whilst other services face less pressure. At the same time, the Trust experiences high levels of patients who do not attend their booked appointments, and it is estimated that 70% of people who call up with queries regarding their appointment did not need to. But these factors also suggest that patients are not receiving the information they need at the right time, and/or face difficulties when trying to amend their appointments.

Large numbers of patients fail to attend booked appointments (In England 1 in 5)

In this context, small changes or improvements to existing systems could have sizeable positive impacts on thousands of patients.

Action taken by Healthwatch

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Healthwatch helped to identify problems with letters being sent to patients. The letters were later withdrawn and replaced with better quality letters which contained clearer and more accurate information

Healthwatch raised our concerns with the CCG in July 2019, highlighting the experiences of local people using the booking services, including those of staff in the Healthwatch office and our volunteers. We have shown an example case study that we shared with the CCG below.

Separately, we raised our concerns at the BSUH Patient Experience and Engagement Group (March 2019). We were advised that the Trust had decided to conduct a front to back end review to improve their referral system and communications, but that this would take time to complete. We advised the Commissioner of outpatient services of our concerns and at his request provided Optum (who manage GP referrals to outpatients' services) with real-life examples.

The problems associated with booking appointments were also raised by our Healthwatch Chair with councilors and was an item on the Health and Overview Scrutiny Committee agenda in 2019.

The Trust is managing a programme to improve outpatient services at BSUH and is starting to redesign pathways and processes across a number of the largest specialities. They shared this work with Healthwatch and asked for our input into the design.

What has changed since Healthwatch first investigated

Online patient portal

In March, BSUH Trust launched Patient Knows Best (PPK), a new online portal which allows patients to log in, track and manage their documents. Resources attached to patient pathways will also be stored here. This system is being trialled.

Patient letters

In response to Healthwatch and patient feedback and recognising the negative impact that letters were having on patients and BSUH, the CCG reviewed and revised letters that were sent out to patients by Optum, who manage GP referrals. The updated, simpler, and shorter patient letters are now live.

Tackling DNA Rates

The Trust have implemented options to allow people to cancel and change outpatient appointments online - <https://www.bsuh.nhs.uk/your-visit/your-outpatient-appointment/cancel-or-reschedule-your-appointment/>. They also plan to provide patients with 6-weeks advance notice of their appointment date so that

they can plan ahead, with the aim of reducing numbers of ‘Do Not Attends’ (DNAs), which continue to be high.

In June 2019, there was a backlog of 8,500 people in the booking system who had not been looked at/offered an appointment. By September 2019, this was down to 350, achieved by the Trust focussing on their processes and cutting out duplication.

Patient Choice

Optum Referral Management Systems are commissioned to offer patients a choice of provider where this is available, and it has not already been specified by the GP. Optum should call up patients to discuss. Where choice has not been specified and there is a choice of provider available, Optum have now implemented a voicemail system to address failed contact issues highlighted to us by patients.

Management of Optum

Brighton and Hove CCG have formal quarterly contract meetings managed by the Commissioning Support Unit (CSU) to review the performance of the provider against agreed KPI's.

Patient case study raised with providers by Healthwatch

- On 21st May 2019, Mr. X was referred into urology services. He did not hear back and fell ill in the interim and had to go into hospital.
- On 18th June, an urgent referral was made whilst Mr. X was in hospital.
- On 21st June, Mr X received a letter from Optum, stating “*you have been referred but you don't need to do anything unless you do not hear by 5th July*”. The letter stated the appointment would be at Royal Sussex County Hospital.
- On 21st June, another letter arrived from e-referrals service with the same booking reference as the Optum letter concerning the same referral except that it said “*you need to book an appointment, but our records say you have not booked an appointment ... you need to log in and book*”. At no time had Mr X been given log in details.
- After 5th July Mr X rang the number on the Optum letter for the hospital in question. The hospital advised that they do not provide outpatients urology at the hospital.
- The GP stepped in and booked an appointment for 25th July at another hospital.
- On 8th July, Mr X received 3 letters: one letter from Optum; one letter from e-referrals and one letter from the other hospital confirming an appointment on 25th July.
- On 15th July, Mr X received a letter from the other hospital cancelling the appointment. He was told that Optum should not have booked him an appointment at the hospital as they do not do e-referrals for urology. He was advised that referrals should be sent to the hospital who will then triage them and write to the patient to confirm the appointment. He was also advised that the wait time for the service was 10 weeks.
- Mr X was finally given an appointment for October.

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