

# **Outpatient Transformation Patient Initiated Follow Up (PIFU)**

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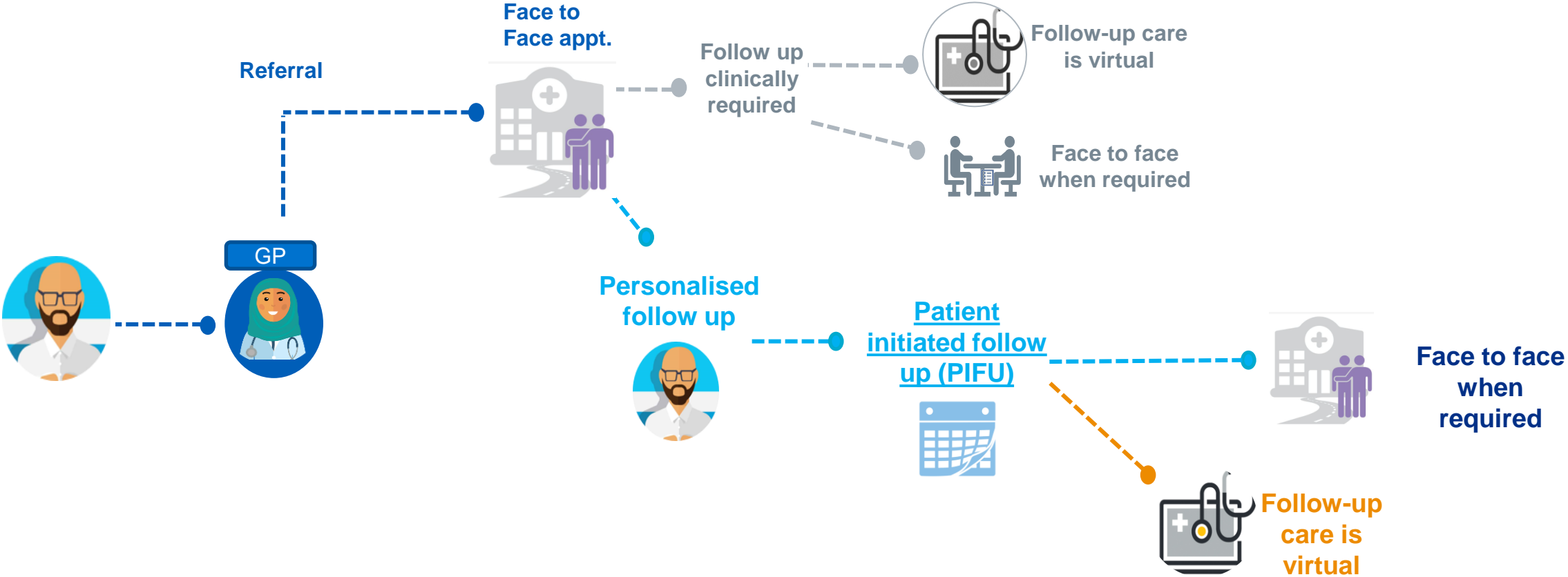
# What is Patient initiated follow up (PIFU)?

- When a patient requests and arranges their follow up appointments as and when needed
- This could be:
  - When a condition flares up
  - When they have a concern
- Long or short term conditions



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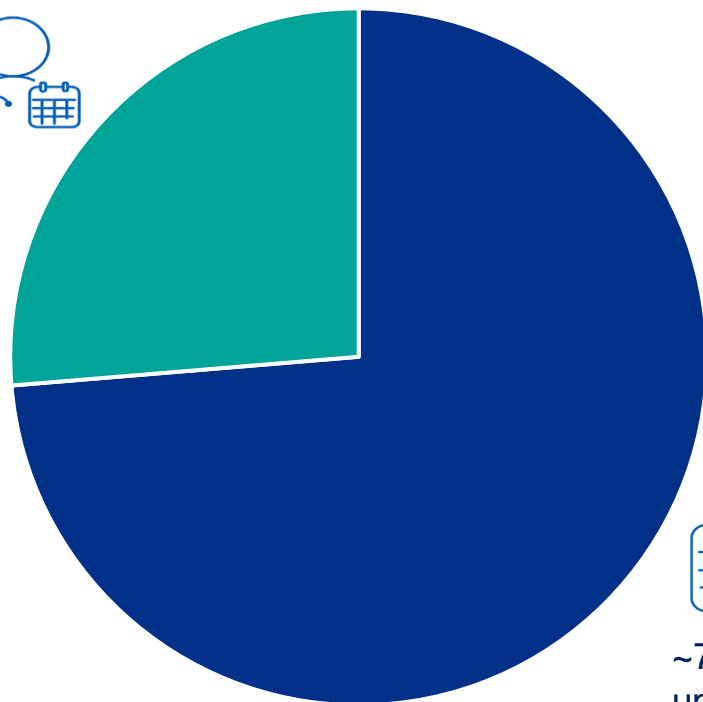
# What is PIFU?



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# Why do we need PIFU?

~30% new



~70% follow-ups

~1.3 million follow ups in  
Sussex each year

How much value are  
these to patients?

# The benefits of PIFU

Empowers  
patients to  
manage  
condition

Enables  
shared  
decision  
making

Ensures  
effective  
use of  
resources

Releases  
capacity  
for other  
activities

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# Our plan in Sussex

- We are doing PIFU and this has been steadily increasing – target set for this year
- Clinically agreed criteria
- National benchmarking
- Focusing on key areas
- Ensuring patients can access services



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# What we want to understand?

- What is the impact on patients?
- Does this cause any barriers for certain groups of people?
- What other support do you feel patients would need if on a PIFU pathway?
- How patient information is perceived, is it clear, concise and in a format people can understand?





# Breakout rooms

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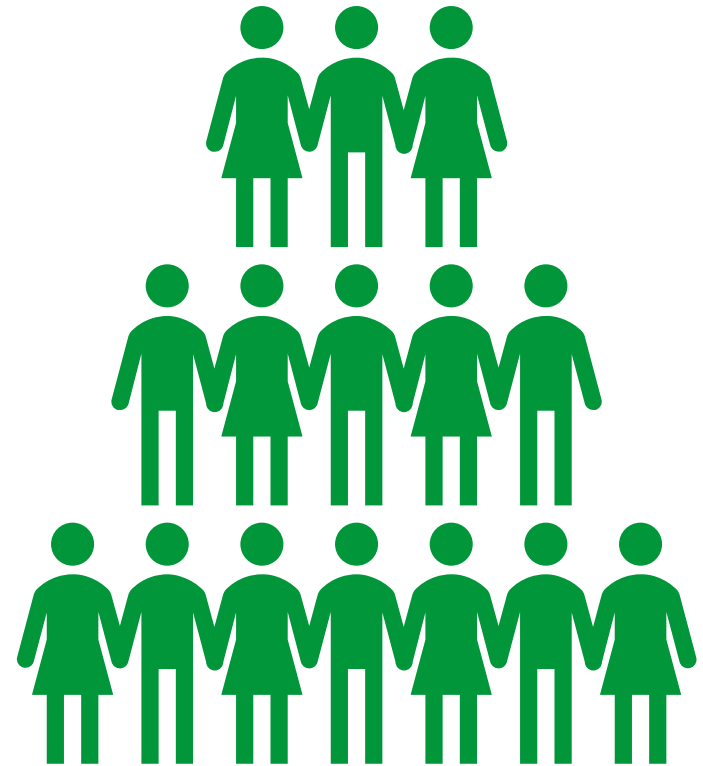


# **Outpatient Transformation Reducing ‘Did not Attends’ (DNAs)**

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# Reducing DNAs

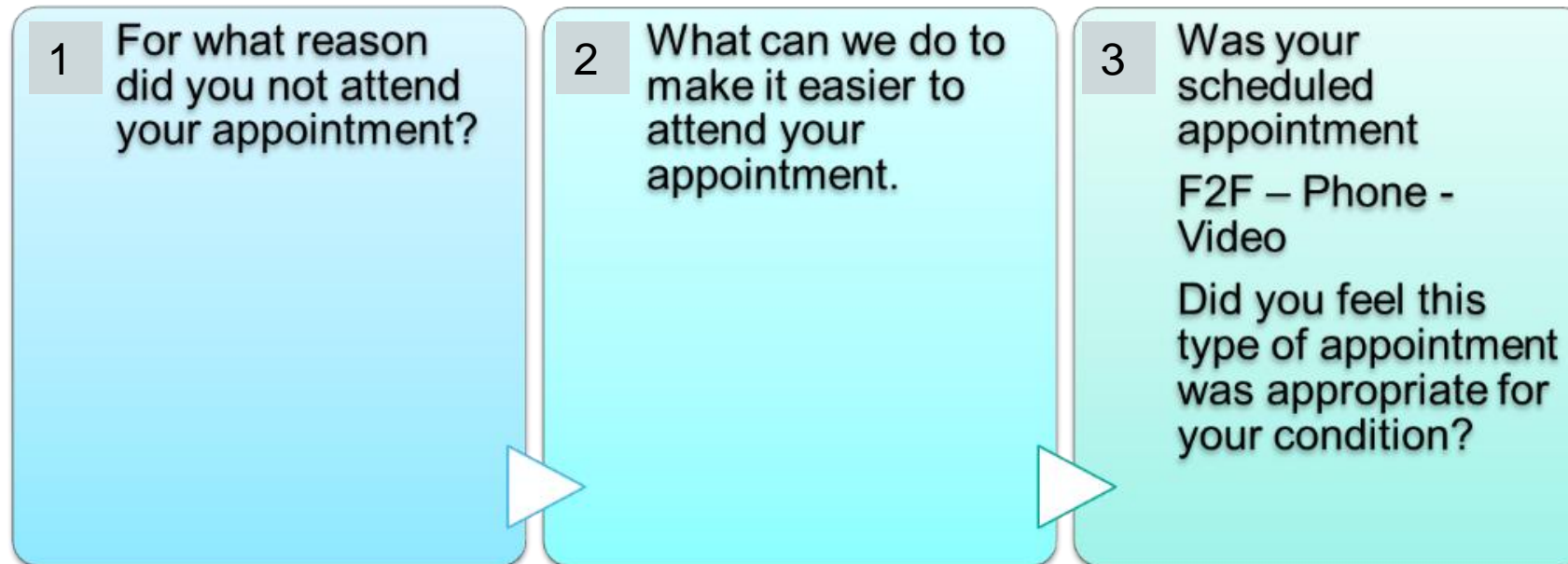
- In Sussex ~75K patients DNA their appointment each year
- These appointments are then wasted
- Each costs the NHS £160
- Why do patients DNA?
- How can we reduce this?



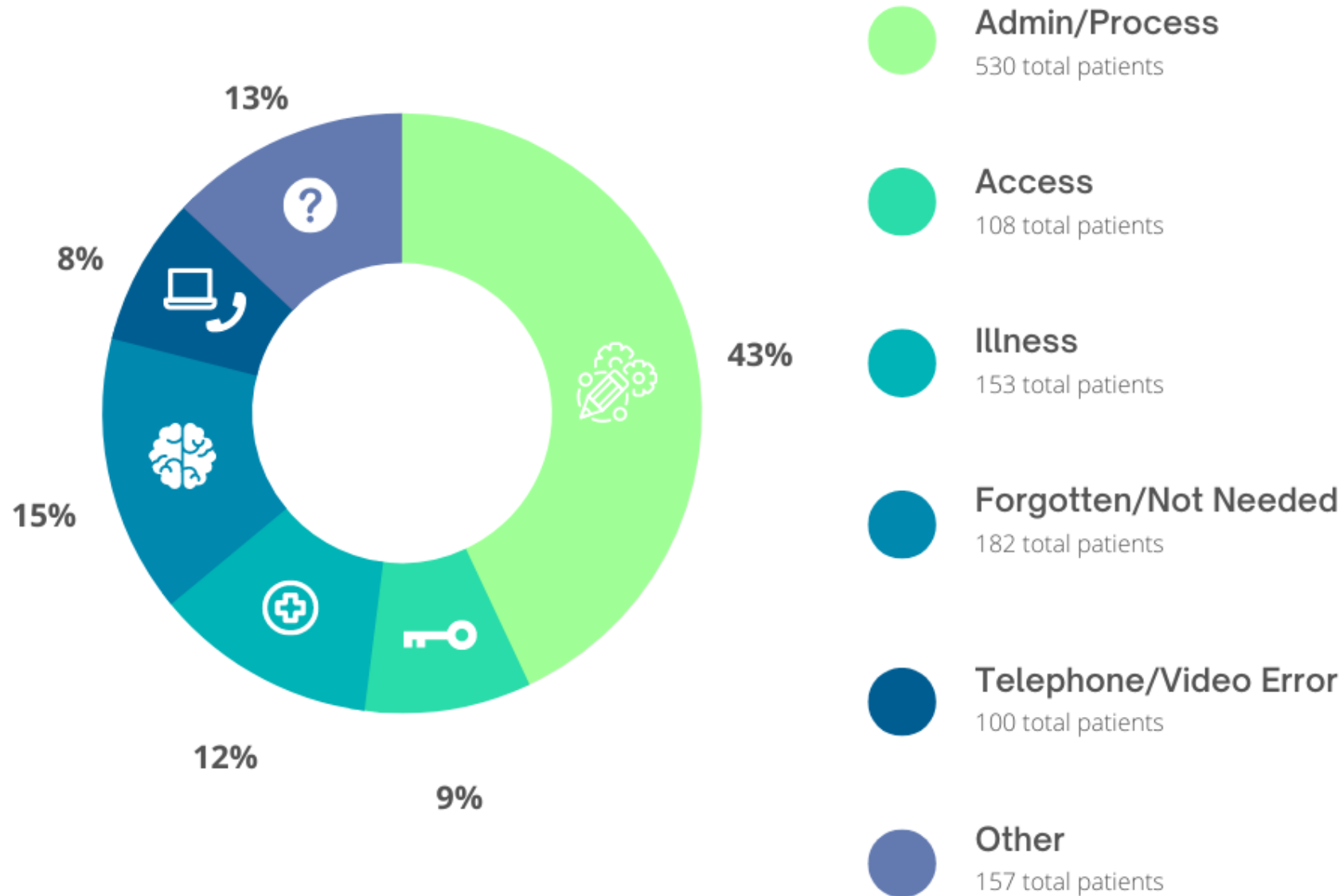
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# DNA Case Study

- 4,911 patients who DNAd were contacted
- **1230** responded
- Asked the following:



# Reasons for DNA Themes



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# What can we influence?

Patient  
unaware of  
appt

Not able to  
take time  
off work

Difficulty  
cancelling  
appts

Patient not  
brought

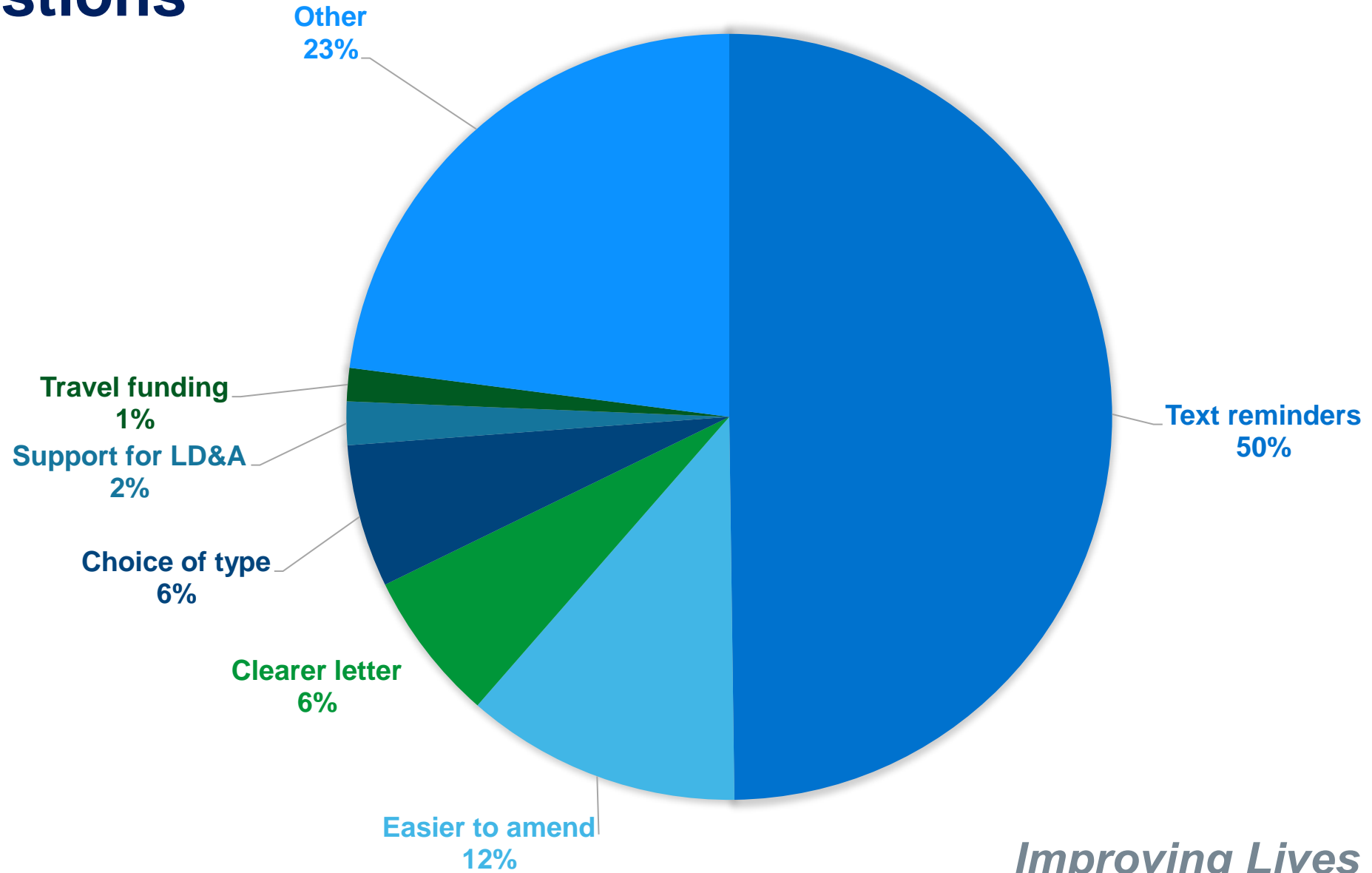
Admin error

Transport/  
cost issues

Unclear  
letters

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# Suggestions



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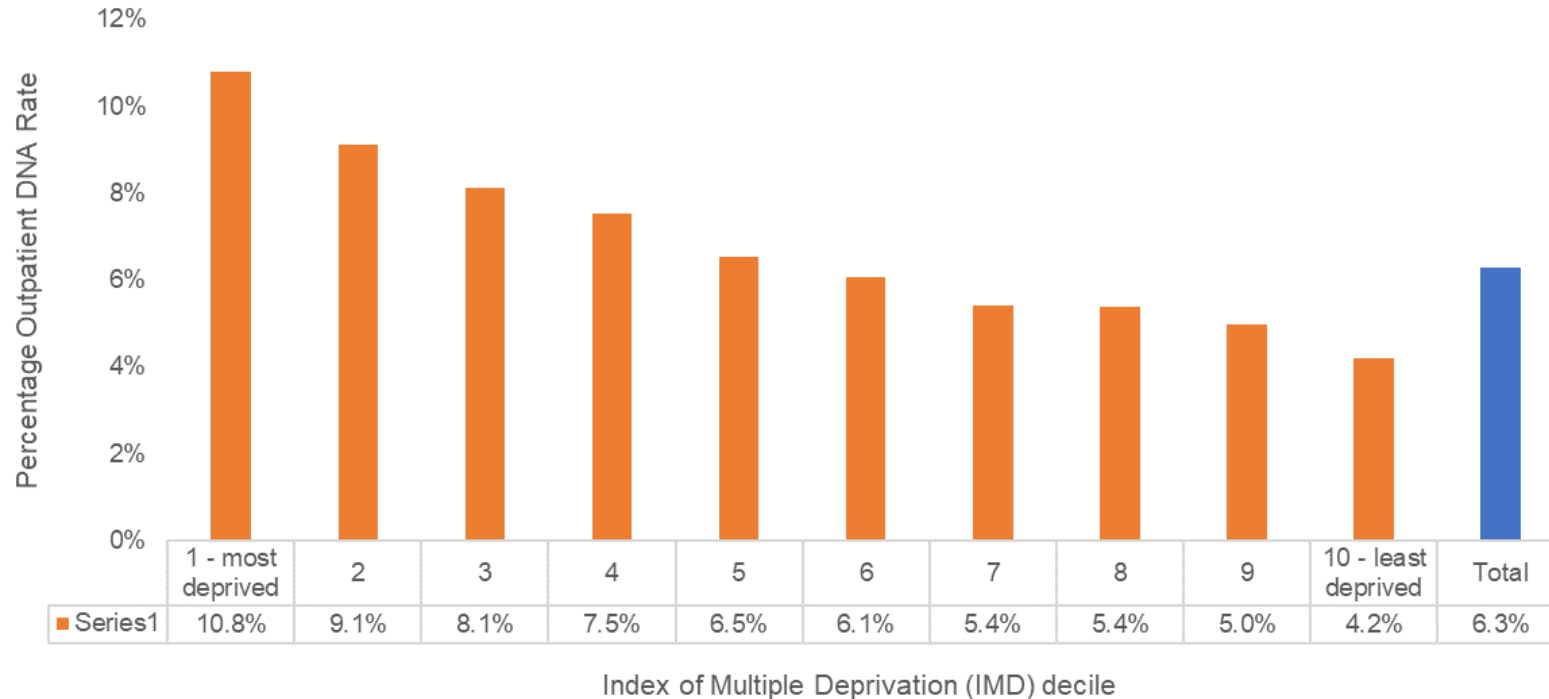
# DNA in Sussex



- DNA rate decrease as the patient ages
- DNAs increase for those living in deprived areas
- Those in the 'Black' ethnic categories have the largest overall DNA rate
- DNA rates for males are slightly higher
- This is greatest in the age band 20 to 39

# DNAs and Deprivation

Sussex ICB Outpatient DNA rate by IMD decile (all providers)  
Apr-22 to Dec-22



If the overall DNA rate was the same as least deprived (4.2%) we could reduce DNAs by around 1/3



# Our plan in Sussex

- We now have all this data – so what?
  1. Specialty specific
  - 2. Health Inequalities**
  3. Patient access (portals)



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# What do we want to understand?

- How can we support patients from areas of deprivation and minority ethnic groups to attend?
- How patient information is perceived, is it clear, concise and in a format people can understand?





# Breakout rooms

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