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St George's University Hospitals 
NHS Foundation Trust

Outpatient Services

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Outpatient services at St. George's

Summary / Key Facts:

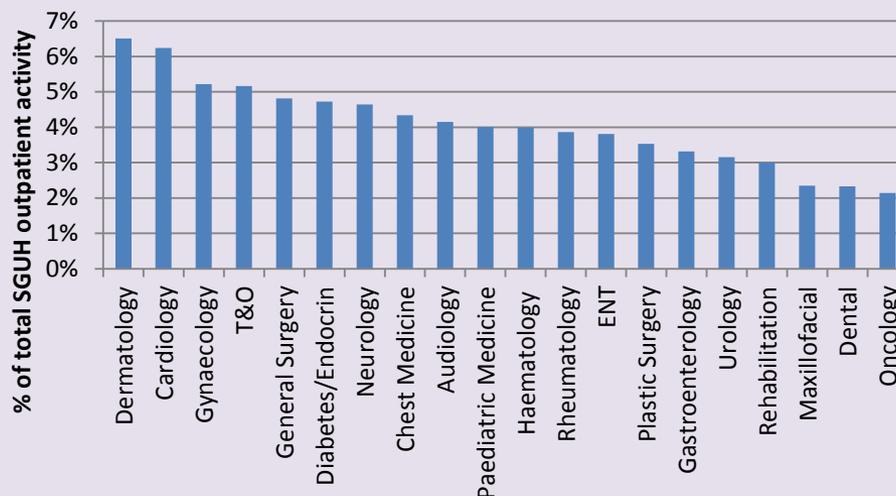
Structure

- In 17/18 just over 80% of our outpatient appointments were delivered on the main Tooting site; 15% at Queen Mary's Hospital; and the remainder at the Nelson.
- The Corporate Outpatient Service sits within the Children, Women, Diagnostics Therapeutics and Critical Care Division, but some specialties (e.g. neurosurgery) have their own outpatient booking function.

Activity

- The Trust delivered over 630,000 (13,000 per week) outpatient appointments in 2017/18
- 20 specialties account for 80% of total outpatient activity, with 5 (dermatology, cardiology, gynaecology, trauma & orthopaedics and general surgery) accounting for just under 30% (see chart).

20 specialties accounting for 80% of total outpatient activity (17/18)



Outpatient services at St. George's – CQC Perspective

Summary / Key Facts:



Quality

- Outpatient services at St George's were rated 'requires improvement' in the last CQC report (up from 'inadequate'), with a range of opportunities identified for improvement.

Outpatient services: the Trust's improvement journey through the CQC domains

Improving our outpatient offering has been a major priority for the Trust over the past two years, backed by a significant programme of activity.

Achievements to date include:

ENSURING OUTPATIENT SERVICES ARE SAFE

- Introducing regular audits for cleaning, medicines storage, documentation, patient safety/experience, environment, medicines management and waiting times.
- Introducing a workforce plan, including training plans
- Driving up the number of patients with an electronic record as part of their appointment (now over 50%, with a plan to reach 100%).
- Rolling out Electronic patient systems on the Tooting site, with QMH to follow

ENSURING OUTPATIENT SERVICES ARE CARING

- Improving customer service through specific training and moving towards an electronic display of waiting times in all areas.
- Driving up use of self-check-in booths: 18 booths are in place. Work is underway to optimise the use and location of the current booths to increase take up prior to procuring further Booths for additional locations.

ENSURING OUTPATIENT SERVICES ARE RESPONSIVE

- Ensuring GPs have access to electronic advice & guidance. Now in place across all of the Trust's specialties.
- Switching to electronic referrals (eRS): 100% of the Trust Consultant Led Services are now published and ready for electronic referrals (eRS); with 85% of primary care referrals now received electronically
- Reminding patients of appointments by text: one way text reminders are now live across the majority of outpatient services with over 100,000 reminders sent each month. Two-way texts live in some services with roll out planned for coming months.
- Maximising call centre staff capacity to book appointments: call answering targets have been adjusted to enable a greater proportion of staff available to book appointments to ensure that patients are able to choose the most suitable appointment date and time.

ENSURING OUTPATIENT SERVICES ARE RESPONSIVE

- Undertaking clinic moves to decongest Lanesborough Wing, an area of concern highlighted by the CQC. A number of urology clinics have now moved to QMH. Further work in plan for Clinic B
- Freeing up consultant capacity to respond to patient need, through virtual consultations and non-consultant-led clinics.
- Giving patients 'open access' follow-ups: following successful trials in sub-specialties within ENT and Plastics with between 1% - 4% of patients using the service requesting a follow up appointment, the model is now available for rollout to further suitable specialties.

ENSURING OUTPATIENT SERVICES ARE WELL LED

- Restructuring the corporate outpatient service, focusing on aligning functions, including the move of the Follow Up appointment management to the Central Booking Service (CBS).
- Improving staff engagement, with weekly meetings, monthly communication dates, walk arounds, feedback boards and an open door policy.
- Driving operational performance improvement through weekly challenge meetings and an Operational Delivery Group which focuses on areas such as Clinic Utilisation, Clinic Cancellations and DNA (Patient Do Not Attends)

Outpatient services: looking to the future

To date, over 30 care groups within the Trust have also undertaken a SWOT analysis and presented their strategic vision to the Board, many of which have included a focus on the future of outpatient services

At a stakeholder event in November on the future of outpatient services, attended by approximately 80 Trust staff and external stakeholders (e.g. commissioners, patient representatives), there was widespread support for change, but also a number of barriers identified that would need to be overcome:

- Support for providing care in different settings (particularly in collaboration with primary care, or virtually);
- Support for providing care through a different skill mix with less reliance on consultants (e.g. through greater use of allied health professionals, physician associates, consultant nurses);

As part of the development of the Trust's wider clinical strategy, a series of twelve events (three public and nine staff) were undertaken in November / early December 2018 with over 160 participants. A number of key themes related to outpatient transformation, with staff and the public both articulating the need to:

- make better use of technology (e.g. virtual clinics, patient-managed apps, patient portals),
- Change/streamline pathways (e.g. one-stop clinics, rapid access, collaboration with primary care, group outpatient sessions), and
- use a different workforce mix (e.g. greater use of specialist nurses, physician associates, and allied health professionals).

Outpatient services: looking to the future

OPPORTUNITIES

Building on these improvements and looking to the future, a series of engagement events and discussions with the Board have helped shape our analysis of the current status quo, and our vision for the future.

At a stakeholder event in November 2018 on the future of outpatient services, attended by approximately 80 Trust staff and external stakeholders including commissioners and patient representatives. There was widespread support for change, but also a number of barriers identified that would need to be overcome:

- **Digitising outpatient services** – potential for greater use of virtual appointments, virtual triage, and integrated paperless patient note management, booking and communication, all contributing to more efficient, more responsive and safer care.
- **New workforce models** – potential for greater use of consultant nurses, physician associates and allied health professionals

Outpatient services: looking to the future

OPPORTUNITIES

- **Collaboration with primary/community care** – providing specialist input, advice and guidance for GPs, virtual MDTs, pre-assessment before patients see specialists, enhanced triage – thereby avoiding unnecessary hospital visits.
- **One stop clinics** – coordination of care activities (assessment, diagnostics, treatment) into single attendances; joint clinics for patients with multiple conditions
- **Rationalisation** – bringing together disparate services and co-locating them to increase quality and efficiency (e.g. rationalisation of infusion suites); centralisation of outpatient bookings whilst ensuring booking staff are aligned to and develop expertise in particular services
- **Developing our specialist services & responding to population need** – using the workforce and estate capacity freed up through the above to develop/grow our more specialist services, and provide an outpatient offering more responsive to the needs of patients.

Outpatient services: looking to the future

YOUR OPPORTUNITY

TWO QUESTIONS TO ASK

FIRST QUESTION

- **Developing our specialist services & responding to population need;**

Capacity will be freed up to develop/grow our more specialist services, and provide an outpatient offering more responsive to the needs of patients , what would you like to see and where?

Discuss and feedback

5 MINS TO DISCUSS AND 10 FEEDBACK

Outpatient services: looking to the future

YOUR OPPORTUNITY

TWO QUESTIONS TO ASK

SECOND QUESTION

- **Digitising outpatient services** – potential for greater use of virtual appointments, virtual triage, booking and communication, all contributing to more efficient, more responsive and safer care.

What could be improved? Example of 2 way texting via mobile / smartphone technology. What would you like to see and where?

Discuss and feedback

5 MINS TO DISCUSS AND 10 FEEDBACK