

Reducing Waiting Times and Health Miles by Redesigning Orthotics Outpatient Pathways

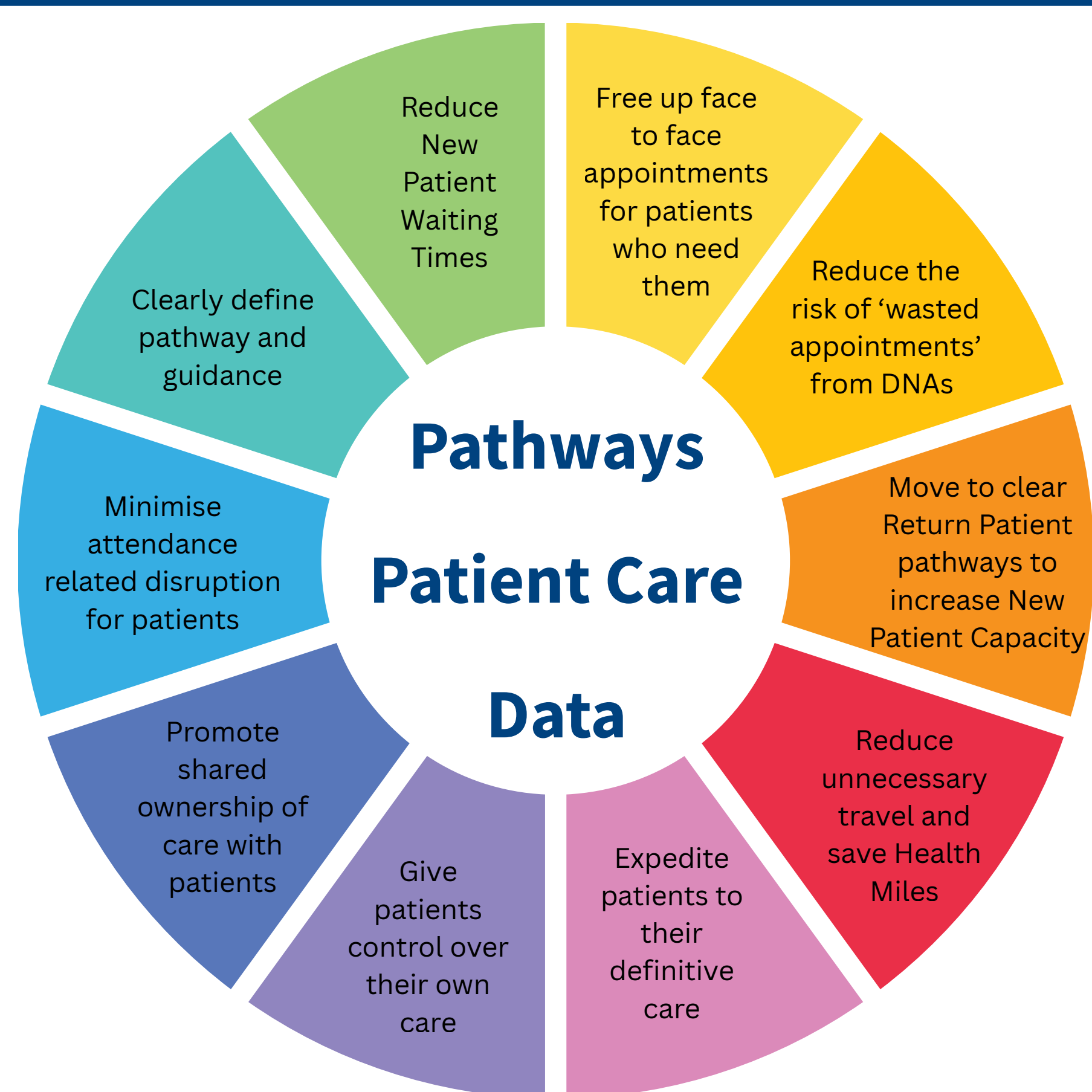
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BACKGROUND

Patients who require provision of an orthosis are usually referred to help manage a long-term condition, deformity or mobility issue. As such, once patients are referred to the Orthotic Service, they are very likely to require access to the service on a long term or lifelong basis.

In September 2021, the waiting time for an Orthotics Routine New Patient was over 78 weeks with approximately 1900 patients on the list. The team agreed to undertake pathway redesign work as part of The NHS Lothian Outpatient Redesign Programme, which aligned to The Scottish Collaborative and Modernising Patient Pathways Programme.

AIMS



METHOD

The team engaged with NHS Lothian TRAK redesign team and agreed its requirements. Every member of the clinical and admin teams were allocated to a working group. All work was lead and overseen by the Orthotics Team Lead, and staff were empowered to make decisions on behalf of the wider team and service. Staff were allocated time every week to undertake the work required.

Each working group updated and fed back to the wider team monthly.

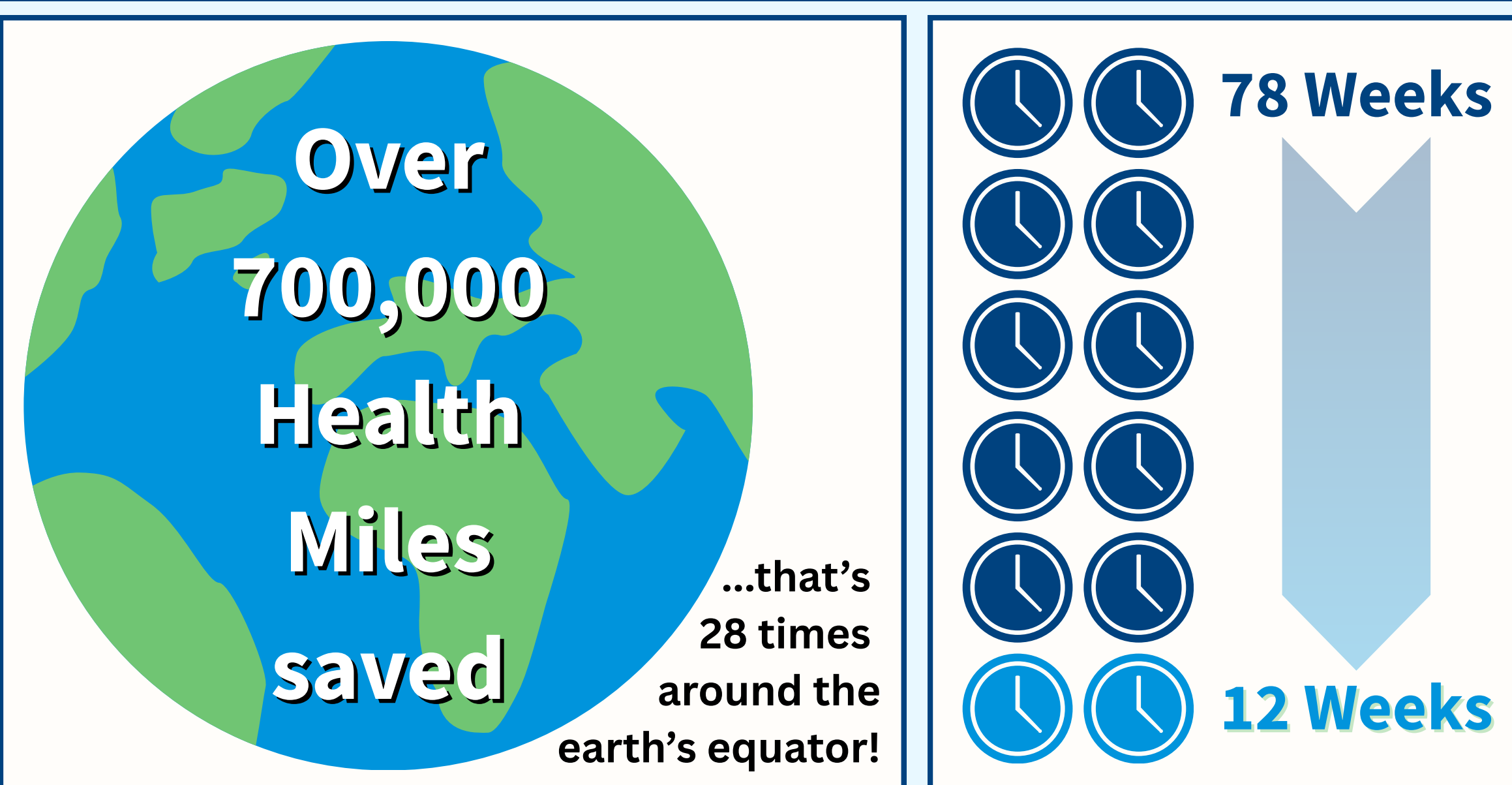
The service introduced clearly defined Patient Initiated Follow Up (PIFU) allowing patients to re-engage directly with the service when required by either completing an online or paper form.

Planned Repeat Pathways were clearly defined so that only patients with a clear clinical reason or who lacked robust support to re-engage were given follow up review appointments.

Remote Appointments were trialed to establish what patients were appropriate for remote clinics. This fed directly into Active Clinical Referral Triage (ACRT) Pathways that were being implemented.

RESULTS

- Waiting times were reduced to from 78 weeks to 12 weeks.
- 1200 Virtual appointments were offered over a 15-month period.
- DNAs were reduced for return patients from 9.1% to 6.9 %.
- The team produced ACRT documentation with clearly defined guidance to ensure consistency in triage and allocated fixed time for senior clinical staff to triage daily to ensure timely management for clinically urgent patients.
- Remote consultations resulted in over 700,000 miles saved in travelling to face-to-face appointments since January 2021.



CONCLUSION

Robust ACRT and Outpatient Pathways enabled the Orthotics Service to redirect some patients to remote appointments and free up capacity for New Patient Face-to-face Appointments where indicated.

Consistent use of the pathways reduced Health Miles significantly, reduced the requirement of unnecessary face-to-face appointments and reduced overall waiting times by over a year.

REFERENCE

