

Outpatient Transformation Programme – Case Study



Change Platform Consulting

Client

St. George's University Hospitals NHS Foundation Trust was the client for this piece of work. The Trust is a Specialist Centre in Tooting, SW London. The Trust provides roughly 730,000 outpatient appointments per year from two main hospital sites and a number of community premises.

The Challenge

In June 2016, following a review of the situation by Change Platform, a range of significant issues were identified with outpatient services. Problems with processes, efficiency, communication, performance, environment, data quality, patient experience, and reputation with GPs. In response a large number of change initiatives had been initiated, however the leadership and governance of these was fragmented. With the scale of the issues, it was clear that a multi year programme of change would be required.

Our Approach

Working closely and engaging with key stakeholders, Change Platform established a programme with an agreed vision, clear outcomes for the first year, a single leadership and governance structure, and prioritised the existing initiatives. The new programme enabled a twin track approach to achieving outpatient service sustainability through:

- short term tactical changes initiated in priority areas driven through iterative change approaches,
- strategic solutions that impact on the medium term sustainability of outpatient services, for example, design of a support service Target Operating Model.

To support this twin approach of tactical and strategic changes, the approach taken to leading and managing the programme included:

- gaining Trust Board support for the programme and approach,
- being clear and realistic about what could be achieved,
- significant engagement and collaboration with a wide range of stakeholders,
- patient involvement in design and elements of implementation,
- focused delivery on key metrics rather than achieving milestones,
- regular communication through many channels to a wider range of stakeholders,
- communication of short term wins and longer term attractive vision,
- use of simple agile tools/techniques to initiate work and involve people,
- team events to celebrate progress and focus on priorities,
- changed the environment to suit changes, rather than embracing the performance culture that existed across much of the organisation,
- gained leadership support that enabled through delegated responsibilities,
- built vision and design 'bottom up',
- lots of regular informal communication with organisation leadership,
- when learning suggested that initiatives weren't likely to deliver the benefits we originally thought, action was taken and in some cases initiatives closed early.



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Change Platform provided advice and leadership to the programme during the refresh, setup and initial 11 months of the programme.

What happened?

Significant progress was made within the initial 11 months of the programme, followed by a successful transfer of the programme and leadership to substantive staff. Some of the main changes driven by the programme, are outlined:

- Improvement in clinic efficiency resulting in 2000 more patients being seen per month.
- Improvement in Booking Centre performance, with calls answered within 60 seconds rising from 13% to around 90%, resulting in 7000 fewer abandoned calls each month.
- Improvement in Clinic Templates, by rebuilding 60% of all templates, deleting around 5000 redundant templates and eliminating the 6 month template build backlog.
- Increase in activity by over 50% at one of the community premises, resulting in 500 additional people per month being seen at this modern purpose built facility.
- Expansion of the Advice and Guidance service to over 100 specialists providing advice to GPs and around 6000 messages going through the system.
- Codesigned, with a wider range of stakeholders, a Target Operating Model for Outpatient support services, from referral receipt through to final clinic letter. This identified a 34% reduction in operating costs (~£5.5m), achievable over a 2-3 year implementation.
- Reduced footfall in the main outpatient area to respond to a regulator warning regarding congestion and fire safety, resulting in 3700 fewer patients per month circulating in this area.
- Moved roughly 70,000 (per annum) clinic appointments to improved environments, with most of these being relocated into a community setting.
- Reduced the number of face to face follow up appointments by around 4000 per annum, some being replaced by virtual appointments, whilst most were removed as being unnecessary.
- Transferred from 'partial' to 'full' booking to address commissioner safety concerns.
- Achieved the cost improvement target for outpatients (£2.1m), slightly over delivering.