

Board of Directors Meeting in Public - Cover Sheet

Subject:	Outpatient Transformation Program Update		Date: 25/09/2019	
Prepared By:	Helen Hendley, Deputy COO (Elective Care)			
Approved By:	Simon Barton, COO			
Presented By:	Simon Barton			
Purpose				
To provide the Trust Board with an update on the Outpatient Transformation Program for 19/20			Approval	
			Assurance	
			Update	X
			Consider	
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
X	X	X	X	X
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
		X		
Risks/Issues				
Financial	<ul style="list-style-type: none"> Activity levels remain significantly above plan and do not generate additional income. The forecast savings do not align to the original set of assumptions made within the project initiation document. 			
Patient Impact				
Staff Impact				
Services				
Reputational				
Committees/groups where this item has been presented before				
The Outpatient transformation program report to the Outpatient transformation Board chaired by the Deputy COO (Elective care) with representation from the CCG and ICS.				
Executive Summary				
<p>In 2019/20 the Integrated Care Partnership (ICP) embarked on a program of outpatient transformation which over the next 5 years will mean that patients will receive their outpatient care in a hospital setting when necessary, closer to home in a community setting or in a “virtual” setting such as over the telephone, by letter or other digital method. Our clinicians and GPs are working together to re-design the best setting and the best way for our patients to receive advice and guidance about their care which if appropriate may also include supporting self-management.</p> <p>By responding to our patient needs and delivering outpatient care in a different way, we will release capacity for those patients who absolutely need to be seen in a hospital setting with a specialist face to face appointment. This will support shorter waiting times and will reduce the burden of travel for many our patients who will be able to access their care, at home or in a community setting.</p> <p>Our vision which aligns to the NHS Long Term Plan aims to reduce face to face outpatients (new and follow up) by 33% by 2023/24. For the ICP this is in the region of 125,000 face to face appointments provided in a different way over the next 5 years.</p> <p>For 2019/20 our aim is to re-design or negate the need for up to 35,000 appointments by building on best practice that is already developed locally but also learn from other areas who have</p>				

successfully implemented different ways of delivering outpatient care. For context in 2018/19 we delivered over 380,000 outpatient appointments in many settings.

In the very early stages of the program a series of assumptions were made about the costs that may be released by providing care in a different setting, the expectation was this would be in the region of £3m. However as we have worked through the assumptions and tested them in more detail it is evident there remains a cost to providing services in a different way either at the Trust or in the community, or that capacity that is released by changing practice is being utilised for patients who are already waiting for a 1st or follow up appointment. Whilst we continue to identify opportunities for savings the revised expectation of any reduction in costs is in the region of £1m.

The main focus of the program is on 2 key areas:

1. Delivering transactional change which means effectively utilising all of our capacity both in the Trust and in the Community to ensure that appointments do not go unused which in turn will drive shorter waiting times.
2. Delivering transformational change to ensure that our patients are seen by the right clinician (Consultant, GP or Nurse) in the right setting or are well-supported to self-care. To do this we will learn from best practice in other systems, expanding our use of technology and build on the ideas that are generated by our clinicians, staff, GPs and patients