

Reducing the Proportional Delay For Return Patients With Glaucoma

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Aim

The Ophthalmology department recognised that capacity challenges and competing priorities had led to an increased wait for return patients with Glaucoma.

More specifically there was no mechanism to identify proportionately how long people were waiting beyond their target date set in accordance with clinical need. The delay in seeing patients at the appropriate time represented a potential risk to patient safety, increased the risk of blindness and ultimately could lead to an increase in the number of interventions as the patient was not receiving the right care and support at the right time.

The aim of this initiative was to identify a way to measure proportional waits and to reduce the percentage delay a patient waits as a proportion of their anticipated wait to be within 50% by March 2019.



Method

Monthly data was gathered from our current referral management system of every Glaucoma patient who was still waiting for an appointment beyond their clinical target date.

This data identified the percentage delay as a proportion of their individual target wait. Data was further analysed to highlight the number of patients with greater than a 50% delay as a proportion of the overall number of patients on the waiting list.

Initial results demonstrated a wide distribution of percentage delay (see chart 2) with some patients experiencing over a 100% delay as a proportion of their original target date to be seen.

In order to improve this, the department has established a process whereby booking staff ensure priority is given to every patient who has exceeded the 50% target.

Chart 2 – Data as at 6 July 2018

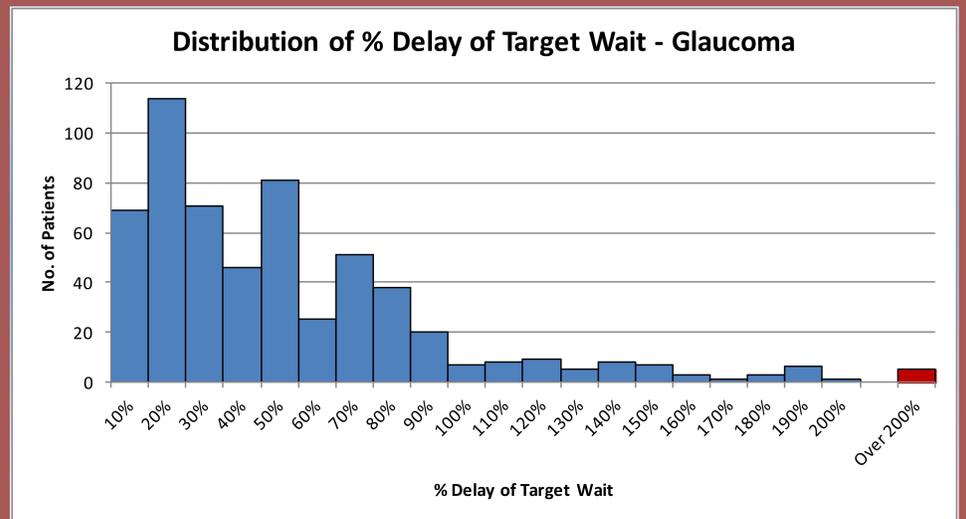


Chart 3 – Data as at 6 March 2019

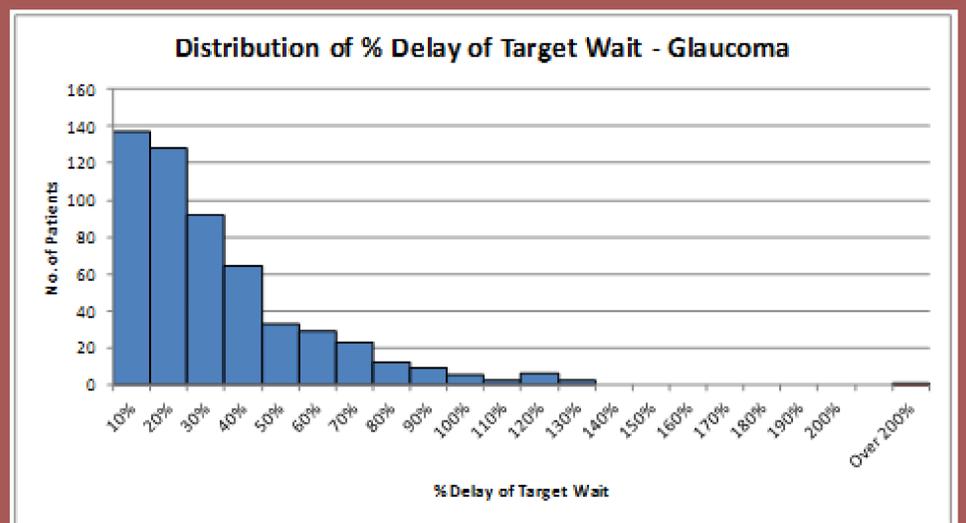
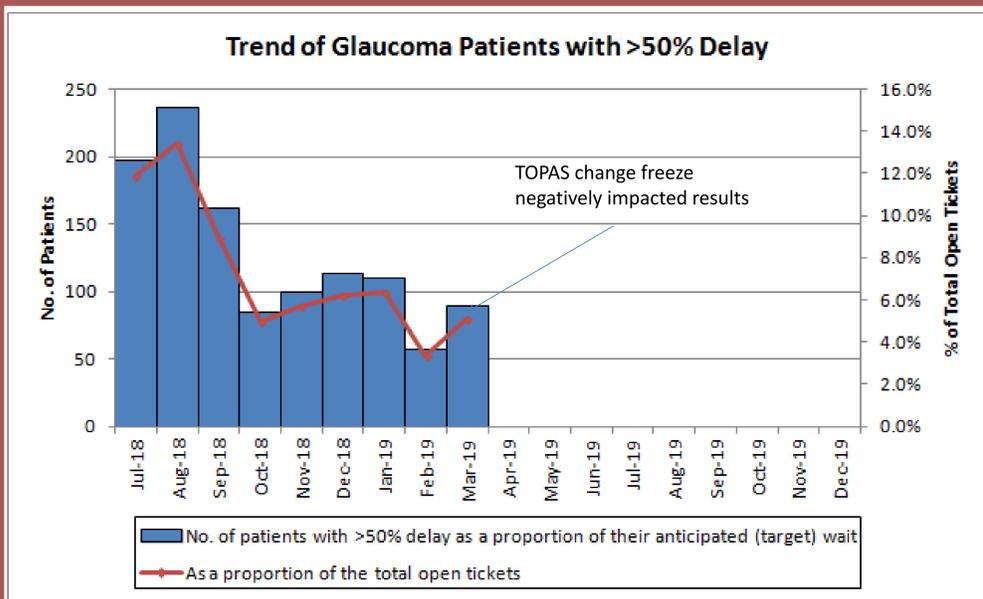


Chart 2 demonstrates the distribution of % delay as at the baseline 6 July 2018. Whilst Chart 3 shows the distribution at 6 March 2019.

Outcome / Results

- Since data collection started in July 2018 there has been a reduction from baseline of 11.9% [n=197 patients] to 5.1% [n=89 patients] of patients with over 50% delay as a proportion of total open tickets. See Chart 1.
- The methodology has enabled long waiting patients to be identified and processes developed which support a reducing trend in percentage delay and its resultant risks.
- This approach has been shared with a number of other specialties who have expressed an interest and are now considering adoption.

Chart 1 – Trend data



Conclusions

- Initial data showed that some patients were experiencing significant waits beyond their anticipated wait.
- New booking processes were introduced so that these proportional long waiters could be identified and seen with priority.
- The charts show how the wide distribution on earlier charts has now significantly reduced.
- The department's intention is to reduce the delay still further by March 2020.
- This methodology could be used to scale up across other conditions and other specialties. There has already been some interest to this effect.

References

Acknowledgements – Donald Cumming, Information Analyst

Definition - Proportional wait is defined as the length of wait as a proportion of the anticipated wait. For example a wait of 6 months against an anticipated wait of 3 months is 100%, whereas a wait of 13 months against an anticipated wait of 12 months is only 8%.

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