

**Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/
Prif Weithredwr GIG Cymru
Grŵp Iechyd a Gwasanaethau Cymdeithasol**

**Director General Health and Social Services/
NHS Wales Chief Executive
Health and Social Services Group**



**Llywodraeth Cymru
Welsh Government**

Nick Ramsay, MS
Chair Public Accounts Committee
Welsh Parliament
Cardiff Bay
Cardiff
CF99 1NA

28 August 2020

Dear Nick

**Progress Report to the National Assembly for Wales Public Accounts
Committee Report on “Management of follow up outpatients across Wales”**

I have pleasure in enclosing a report as requested outlining the progress made against the recommendations in the above report.

Please do not hesitate to contact me should you require any further information on the points outlined in this report.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Andrew Goodall'. The signature is written in a cursive style with a long, sweeping tail on the final letter.

Dr Andrew Goodall

Enclosure: Annex A

Progress Report to the National Assembly for Wales Public Accounts Committee Report on “Management of follow up outpatients across Wales”

Provided by: Director General Health and Social Services

Date: 28 August 2020

Considerable progress has been made with both the management of follow up outpatients and the outpatient transformation programme as part of the Planned Care Programme.

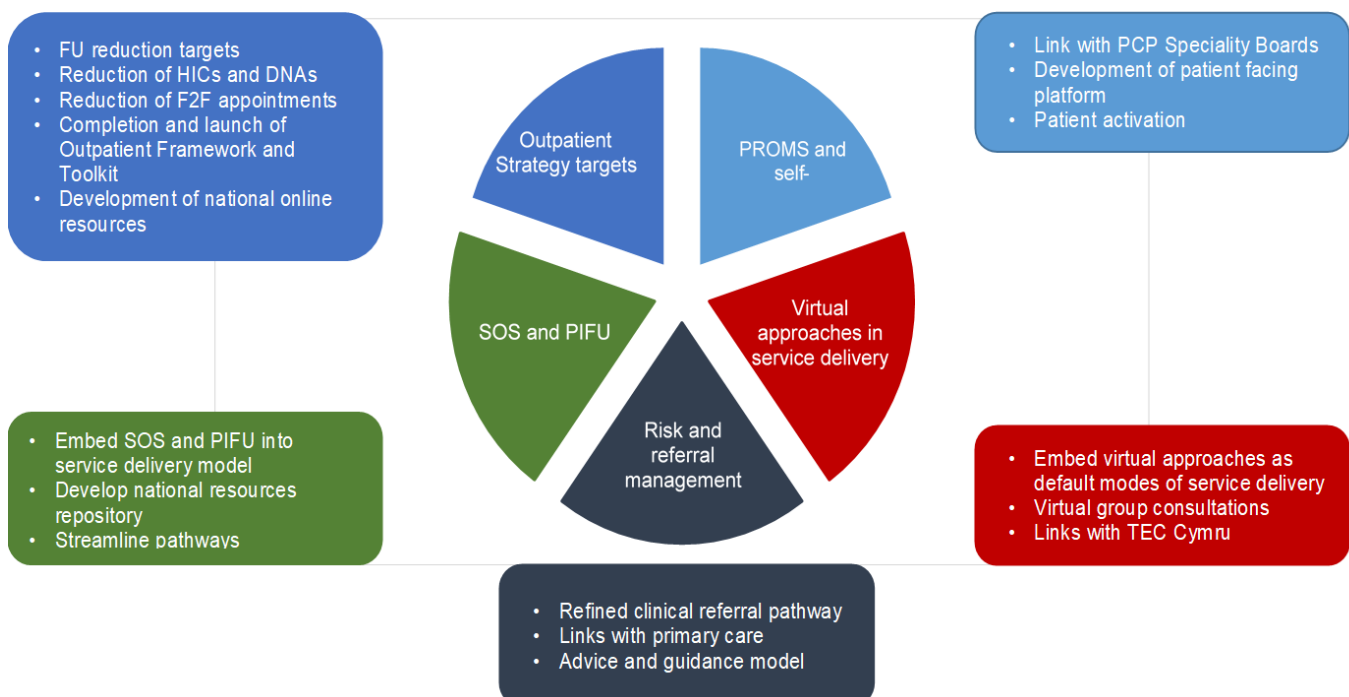
This report provides an update against the 10 recommendations within the National Assembly for Wales Public Accounts Committee Report on “Management of follow up outpatients across Wales” published in August 2019.

Whilst COVID-19 has impacted upon the deliverability of some of the planned actions, it has also been a great enabler and the outpatient service has adapted effectively to the challenges presented by COVID-19.

Recommendation 1. The Committee recommends that the Welsh Government sets out how the National Outpatient plan is based around the principles of prudent health care, and how the health boards will be accountable to the plan. We recommend that an implementation programme is drawn up to which sets out deliverables, which are SMART (Specific, Measurable, Attainable, Realistic/Relevant and Time Bound), against the plans objectives to prevent further deterioration against follow up outpatient targets

Completed – The Outpatient Transformation Strategy and Action Plan was developed in full consultation with health boards and is attached <https://gov.wales/outpatient-services-strategy-and-action-plan-2020-2023>

The following chart summaries the key priorities:



Recommendation 2. The Committee recommends the Welsh Government should review international best practice on performance data to ensure the targets and performance measures for Outpatients do not encourage gaming of the system and measure what clinically matters. The Welsh Government should ensure the new outpatient performance measures can be compared with other nations, are published regularly and have clear standards for what constitutes “good” performance

Completed – The research was completed in house. The table outlining our approach is attached as Annex A.

Following the research the targets and performance measures for outpatients for 2020/21 are as follows (further details are included in the strategy at <https://gov.wales/outpatient-services-strategy-and-action-plan-2020-2023>)

Recommendation 3. The Committee recommends that the Welsh Government provide the Committee with evidence that all health boards are making the required improvements against the new targets for outpatient follow up services by early 2020, and with a clear action plan for improvement for those Health Boards not displaying improvement.

Completed. Health boards have submitted plans for reduction in their follow up waiting lists with an agreed trajectory for March 2020. These are reviewed and monitored at each outpatient steering group and at Welsh Government Quality and Delivery meetings with the health boards.

Measure	Progress	Status
All health boards to have allocated a clinical review date to 95% of all patients on a follow up waiting list by December 2019.	At an All Wales level, in March 2020, 99.5% of patients had a documented review date, exceeding the 95% target.	TARGET ACHIEVED
All health boards to have allocated a clinical risk factor to 98% of patients on the eye care waiting list by December 2019.	98.4% of patients on an ophthalmology waiting list in Wales now have an allocated HRF.	TARGET ACHIEVED
All health boards to report accurately see on symptoms patient pathways by December 2019	All health boards are now reporting SOS activity on a monthly basis.	TARGET ACHIEVED
The follow up waiting list to be reduced by at least 15% by March 2020, a further 20% by March 2021 and a further 20% by March 2022	From an All Wales position, there has been a 14.5% reduction in the number of patients on the follow-up waiting lists, marginally short of the 15% target.	TARGET NARROWLY MISSED However, progress in March 2020 was hampered due to COVID and the postponement of all routine activity.
Reduce the number of patients delayed by over 100% by at least	At the end of March 2020, a 22.4% reduction in the number of	TARGET ACHIEVED

15% by March 2020, a further 20% by March 2021 and a further 20% by March 2022	patients delayed by over 100% of their FU target date has been achieved	
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Recommendation 4. The Committee recommends that the Welsh Government clarifies with the Committee what the consequence will be for health boards which fail to meet the new outpatients' targets will be.

Completed – The Welsh Government wrote to the Chair of the Committee with the requested information in November 2019.

In summary the process outlined was as follows:

Progress against these targets are reviewed monthly by Welsh Government, supported by the Delivery Unit, in line with the performance management framework as follows:

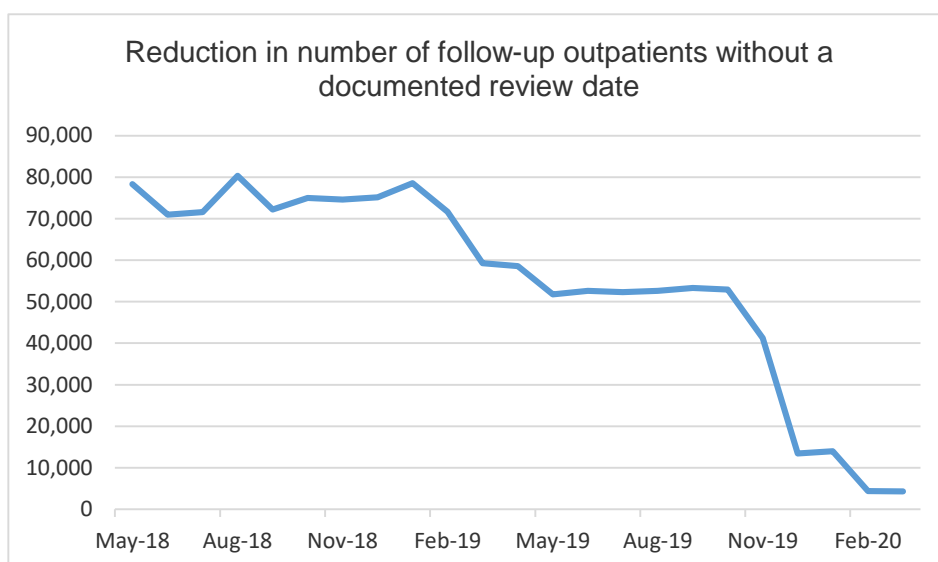
- Health boards completed a monthly report highlighting progress against the targets, implementation of the planned care follow up priorities, and the current position with regard to funded activity. The report required details of corrective action where progress is not being made.
- These reports are reviewed by Welsh Government who queried any issues and sought assurances when required. They were then reviewed by the outpatients steering group through effective peer review and support. Progress against the outpatient targets are discussed at health board Quality and Delivery meetings chaired by the Deputy Chief Executive of the NHS and Programme Delivery Director.
- Quarterly performance reviews with the health boards and Welsh Government against the progress being made.

This level of scrutiny provided a clear focus on achievement of the targets.

Recommendation 5. The Committee recommends that the Welsh Government provides the Committee with an update in early 2020 on progress made by all NHS bodies to ensure all patients in the follow up lists have an agreed review date, and sets out the actions to prevent large numbers being on the waiting list without agreed review dates.

Completed – Changes have been made to the patient administration system that mean that it is no longer possible to add a patient to the follow up waiting list without entering an agreed review date.

Health boards have also validated all patients without a target review date and at the end of March 2020, 99.5% of patients had a documented review date.



Recommendation 6. The Committee recommends the Welsh Government clarifies whether each health board has appropriately robust mechanisms to monitor and manage the clinical risks to patients waiting for a follow up outpatient appointment.

Completed - A full survey was undertaken to monitor and manage the clinical risks to all patients waiting for a follow up appointment in each health board. This revealed both good and bad practices and a number of sessions were held to standardise the approach.

The COVID-19 pandemic however has highlighted that more needs to be done to balance the risks to patients who are waiting on a follow up list. As a result the See on Symptoms pathway and Patient Initiated Follow up pathways have been developed and introduced with clear guidance as to how follow-up patients can access consultant review as necessary. These pathways are now in place and health boards are reviewing their follow up lists to ensure that patients are on the correct pathway.

Proposals to risk stratify the new referrals and those on the waiting list have been developed and are being discussed clinically. If accepted could commence in October 2020.

New clinically led guidelines for patients on the see on symptoms and patient initiated follow ups pathways have been introduced. This ensures that all that patients will be clinically reviewed before being discharged to these pathways from the follow up waiting with information on how to access services if clinically required.

Recommendation 7. The Committee recommends that the Welsh Government bring forward proposals for recording occasions when patients have come to harm as a result of waiting for a follow up outpatient appointment or treatment more generally. The information needs to be collated centrally on a Wales basis and published in an open and accessible format.

Completed - The existing serious incident reporting process requires all NHS organisations to report incidents of direct and avoidable patient harm during NHS treatment irrespective of specialty or where in the patient pathway they may be. This includes any harm incurred as a

result of an outpatient wait and should be reported, investigated and any learning shared as appropriate in line with any other form of patient harm, which could have been avoided.

The Welsh Government is currently refreshing its policy and processes around incident management and reporting to ensure immediate 'make safes' are put in place; more comprehensive coverage of incident reporting across specialties and settings; and greater focus is placed on the learning from these incidents, and how this learning is better disseminated on an all Wales basis to support patient safety improvements across Wales. This review will include ensuring information about incidents is published in an open and accessible format. This will be supported by recent legislation around duty of candour and quality.

Recommendation 8. The Committee recommends that the Welsh Government issues guidance to the health boards about sharing information with consultants on the numbers of patients on follow up outpatient lists without appointments booked.

Completed – As part of the survey carried out under recommendation 6 - all health boards through their directorate teams do have a process of making lists visible to their consultants. Although it was confirmed this was not done on a regular and consistent basis, and identified room for improvement.

NHS Wales Informatics Service (NWIS) are currently testing a process that will allow clinicians to directly view the Follow up Not Booked (FUNB) list via the clinical healthcare record system under Welsh Clinical Portal (WCP). This allows direct access to the patient's digital health record and functionality within WCP thus supporting workflow.

It is anticipated that this will be available to clinicians in October 2020

Recommendation 9. The Committee recommends the Welsh Government establishes mechanisms that enables good practice to be shared more consistently across NHS bodies and which hold NHS bodies to account for the adoption of that good practice.

Completed – The Welsh Government, the Planned Care Programme and Improvement Cymru have worked together to encourage the spread of good practice. The Planned Care Programme and the Outpatient Steering Group have held three best practice collaboration events, and published an on-line compendium of good practice.

A best practice carousel session has been established. At this session each health board presents a case study for other health boards to adapt (where applicable). Five of these sessions were held in 2019.

Health boards are sharing both examples of good practice and resources to be used in the new implementation handbooks for virtual activity which will all be incorporated into a national repository.

Due to COVID-19 the carousel has not carried on in the current financial year, however at each meeting of the Outpatient Steering Group (monthly) a health board will present an innovative approach. National support and guidance has been developed as part of the COVID-19 response and shared with the service to ensure a consistent approach to outpatients redesign. The guidance has been developed and shared with health boards across both primary care and secondary care.

Health boards are expected to incorporate best practice models within their service planning.

Recommendation 10. The Committee recommends that the Welsh Government should evaluate the approach undertaken in the development of the eye care services and consider adopting similar approaches across other specialisms, The Committee would welcome an update on this by July 2020.

Completed – The Delivery Unit has undertaken two implementation/evaluation reviews concerning the eye-care measure - resulting in changes of practices, data collection and data standards. Performance against the measures continued to improve prior to COVID-19 as highlighted in the review. The prioritisation undertaken on this cohort of patients has proved very helpful in understanding which patients needed to be seen during COVID-19 and those who were able to wait slightly longer.

This approach is now being considered across the system as its appropriateness for other conditions commencing with new and follow up outpatients. However this is not appropriate for all conditions and work is underway with the cancer community to switch to the single cancer pathway and with the cardiac community to re-consider component waits.

ANNEX A

Developing a conceptual framework for performance management of outpatients in Wales		
Alignment to strategic objectives	What are we doing	What we need to do
<p>Transforming the way we deliver outpatients across Wales sets out the Welsh Government’s strategic vision for modernising the outpatient service delivery model. The document provides clear data to demonstrate how capacity is not keeping up with increasing demand leading to longer waits for outpatient services, poor patient experience and the potential for irreversible harm. The document further identifies targets for service improvement over the next 3 years and provides a high level action plan on how these will be achieved. The programme is strategically aligned to and/or driven by:</p> <ul style="list-style-type: none"> ▪ WAO: Management of follow up outpatients across Wales (2018) ▪ A Healthier Wales (2018) ▪ Prudent health care principles ▪ Value-based healthcare principles ▪ National Planned Care Programme ▪ The Well-being of Future Generations Act (2015) ▪ The forthcoming National Clinical Plan 	<ul style="list-style-type: none"> ▪ Taking an all-Wales approach to transforming and improving outpatient service delivery across Wales via the Outpatient Transformation Steering Group 	<ul style="list-style-type: none"> ▪ To continue with monthly Outpatient Transformation Steering Group meetings serving as a forum for communication, collaboration and sharing good practice. ▪ Relevant sub-groups to drive individual work streams.
High priority areas	What we are doing	What we need to do
<p>High priority areas have been identified within the outpatient strategy and action plan for 2020 to 2023 which include but are not limited to:</p> <p><u>Quantitative</u></p> <ul style="list-style-type: none"> ▪ Reduction of patients waiting for a follow up appointment ▪ Reduction of patients waiting for a follow up appointment delayed past their review date ▪ Reduction of avoidable routine follow ups ▪ Reduction of appointments delivered face-to-face ▪ Increase number of patients discharged to SOS and PIFU pathways where clinically appropriate ▪ Increase the number virtual 	<p><u>Management of follow-ups</u> Remain a priority. Funding allocated to implement approaches to reduce follow ups and provide alternative ways of service delivery that contribute to achieving identified targets.</p> <p><u>SOS & PIFU</u> WPAS 20.1 has been rolled out with additional functionalities to support the implementation of the SOS and PIFU models from 1st July 2020. The SOS implementation handbook is being updated to incorporate PIFU.</p>	<p><u>Self-management platform</u> Work is ongoing in health boards to introduce a patient facing platform to facilitate self-management of conditions. A national approach is being explored to provide a core platform to integrate health board systems to promote information sharing and continuity of care for patients receiving care from more than one health board.</p> <p><u>Risk stratification</u> Sub group commencing July 2020 to explore development of a risk stratification model</p>

<p>consultations and reviews</p> <ul style="list-style-type: none"> Decrease DNAs and HICs <p><u>Qualitative</u></p> <ul style="list-style-type: none"> Develop a risk stratification model to manage the risk of harm to patients associated with long waits and to prioritise follow up appointments based on clinical need Improved referral management Empower patients to self-manage their conditions Improve the patient experience 	<p><u>Virtual activity</u></p> <ul style="list-style-type: none"> As with SOS & PIFU, WPAS 20.1 will support the implementation of the model from 1st July 2020. The handbook is being developed to support standardised implementation of the model. Attend Anywhere is being rolled out across secondary care in Wales to provide a digital platform for video consultations. <p><u>Referral management</u> Consultant Connect has been rolled out across primary and secondary care to facilitate clinical advice and guidance for practitioners.</p>	<p>for follow up management.</p> <p><u>Referral management</u> Model to be developed to manage referrals into secondary care to ensure referrals are appropriate and cannot be managed in primary or community care:</p> <ul style="list-style-type: none"> Development of a robust series of specialty specific referral criteria Development of advice and guidance models for patients.
<p>Alignment to the organisation's objectives</p>	<p>What we are doing</p>	<p>What we need to do</p>
<p>Clear delivery plans to meet organisational objectives and aligned to strategic objectives submitted:</p> <ul style="list-style-type: none"> As part of the IMTP process As part of the Outpatient Transformation Fund performance management process 	<p>Health boards are currently submitting bids against the outpatient transformation fund to plan and deliver outcomes aligned to the strategic objectives.</p>	<ul style="list-style-type: none"> Develop robust conceptual performance management framework underpinned by theory Undertake quarterly performance management reviews with health boards based on the framework
<p>Integration with IT and routine data collection</p>	<p>What we are doing</p>	<p>What we need to do</p>
<p>Robust data collection and reporting processes supported by integrated IT systems.</p>	<p><u>IT systems</u> WPAS 20.1 has been rolled out with functionalities that support delivery of outpatient models aligned with strategic objectives:</p> <ul style="list-style-type: none"> SOS and PIFU as indicated above Virtual activity as indicated above <p>Work has also been completed with health boards on PIMS.</p> <p><u>Routine data collection</u></p> <ul style="list-style-type: none"> The monthly health board reporting template (Planned Care Programme and Outpatient Transformation) is being 	<p>Complete current pieces of work.</p>

	<p>reviewed to ensure alignment to strategic and organisational objectives and the outpatient transformation fund.</p> <ul style="list-style-type: none"> • Work is ongoing with NWIS to review the Outpatient Data Set to ensure relevance and accuracy of data. 	
Financial accountability	What we are doing	What we need to do
<p>The Outpatient Transformation Fund 2020/21 provides financial support to health boards and trusts in Wales to improve outpatient service delivery. In accordance with the evidence, financial management forms part of the performance management process. Prior to awarding funding, organisations are required to provide financial plans on how funding will be spent to achieve identified outcomes. CI</p>	<p><u>Outpatient Transformation Fund</u> Bids are currently being submitted and considered.</p> <p>Financial governance arrangements in place.</p>	<p>Incorporate financial performance into the framework:</p> <ul style="list-style-type: none"> • Clear outcomes aligned to financial expenditure • Clear milestones aligned to financial governance arrangements: health boards must provide evidence of meeting quarterly milestones prior to release of subsequent quarter's funding
International comparability	What are we doing	What we need to do
<p>Sharing best practice nationally and internationally.</p>	<p>Exploration of international models in outpatient service delivery and performance management.</p>	<p>Incorporate into practice where relevant and appropriate.</p>