

## REASON WHY?

Orthodontic patients are required to be seen over a longer term within planned appointment schedules. Adhering to these dates is key to the effective treatment of the patient and helps reduce risk. It was felt that on the orthodontic clinic high numbers of patients were failing to attend appointments as well as there being unacceptable levels of inappropriate bookings and empty slots. The model for improvement<sup>1</sup> was used as a basis for seeking an improvement to clinic utilisation.

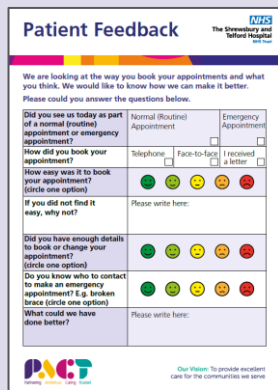


- To decrease the number of minutes lost by clinicians by 50% by April 2024
- To decrease the amount of inappropriate bookings by 50% by April 2024
- To decrease the number of DNAs/SNCs by 50% by April 2024

The overall aim is to improve the flow of patients, to ensure that clinics are utilised to their full potential and challenge organisational culture surrounding patient processing and bookings

## PLAN

The project began by establishing a working group with the key stakeholders: Departmental clinicians, reception and secretaries, coordination management team, patient access management and the central bookings team. The service improvement project was registered with the Trust audit department prior to data collection. Clinic utilisation data was collected between June and July 2023 (Cycle 1) across all orthodontic clinics running at Royal Shrewsbury Hospital and Princess Royal Hospital, Telford. Patient experience feedback of the booking process was also gathered during cycle 1 using a questionnaire designed with the patient experience team.



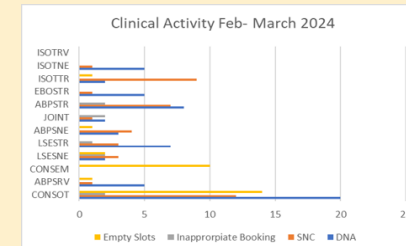
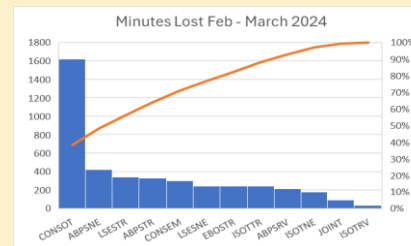
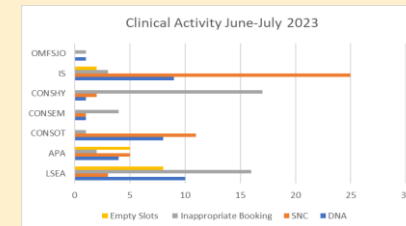
## DO

Cycle 1 data confirmed the scale of the problem with over 2000 clinical minutes being lost and 52 inappropriate bookings being recorded. It also indicated that a large proportion of patients were unable to leave with their next appointment due to reception not being staffed appropriately. The data was presented at Clinical Governance in July 2023 and a process mapping and brainstorming session was held with representation from all stakeholder groups. Patient feedback was generally positive (87%), although free-text comments regarding difficulty in contacting the department and appointments being cancelled or changed without communication from the Trust were frequent.

Actions agreed following cycle 1 at a "future state" mapping meeting included the creation of a dedicated orthodontics booking guide and this was completed and disseminated to the central bookings team and stakeholders by October 2023. Certain desirable changes such as alteration of the clinical outcome form were found not to be possible at this time due to impending implementation of a new bookings system (Careflow). However, the patient access team were able to assist by providing more consistent reception cover and a communication meeting helped their understanding of the orthodontic clinic requirements.

## STUDY

- Further data was collected between 8<sup>th</sup> Feb and 26<sup>th</sup> March 2024
- Clinic utilisation improved in cycle 2, with most clinic codes reporting a reduction in clinical time lost.
- There was however no improvement in overall clinic utilisation due to an increase in time lost reported from the Therapist clinic
- There was an 82% reduction in inappropriate bookings during cycle 2
- No statistically significant difference was seen in the rate of DNAs/SNCs
- More patients were able to book their next appointment in the department due to more consistent reception cover



## ACT

Following 2<sup>nd</sup> cycle data collection, a request was made for the Patient Access Team to check that text message reminders were being sent to patients. This revealed that Therapist patients were not being sent text reminders and this has now been rectified. A deep-dive into this specific clinic in terms of its effective utilisation is planned. The bookings guide now requires updating since Careflow implementation across the Trust and yearly updating is likely to be required to keep the document current. Delegation of this Task has been made to the Coordination management team with clinician input remaining. Now that Careflow has been implemented a new Clinic Outcome Form has also been designed, approved and is in use. Communication between all stakeholders will require continual improvement and bookings/clinic utilisation is now part of departmental meeting agenda which takes place bi-monthly as well as the daily morning huddle. Further discussion utilising the 6 thinking hats improvement tool is planned to discuss DNAs/SNCs rates and how to improve this. A third cycle of data collection, is planned due to a perceived rise in booking errors occurring since the implementation of Careflow in May 2024.