Oxford University Hospitals
NHS Foundation Trust

Learning from Patient Feedback:

Delay in getting seen at the Eye Hospital

– A patient's story

Public Trust Board: Wednesday 8 May 2019

TB2019.46

Sam Foster, Chief Nursing Officer

Patient Story - May 2019

Purpose:

Explore the consequences and lessons learnt from the experience of Mr A's daughter, appendix A, who unnecessarily waited longer than the booked appointment time before relevant team was made aware of their arrival at the Eye Hospital.

Highlights the prompt investigation and patient centred approach undertaken by senior members of the team; including contacting the patient's family to acknowledge the feedback and providing them with a written compassionate response to reassure the family that staff take feedback seriously and use them to improve services.

Patient Stories: Learning from Patient Feedback – Delay in getting seen at the Eye Hospital

The normal process is:

- Patients on arrival at the eye hospital report to the front desk. Once their details are confirmed, the receptionist checks the patient in for their first appointment on the electronic patient booking system or Electronic Patient Record (EPR). There are many different speciality clinics running within the eye hospital at any one time. In addition there are other separate lists for orthoptics, primary care and optometry services which all have their separate work lists. Some patients have multiple consecutive appointments dependant on their condition.
- The receptionist will usually identify which clinic appointment a patient has first and will check them in on EPR. They often also use an additional method of notification of arrival for that team. The notification systems that have evolved have been dependent on the services' proximity to the front desk and the availability of dedicated clinical assistants in a given area to support patient flow. Some areas such as optometry have relied mainly on a simple paper slip notification system as they are immediately adjacent to the reception desk. Although this approach has been considered to be least ideal, this has been perpetuated due to the lack of space for a suitable dedicated terminal to present all optometry clinic lists live at one time.

Complaint

- An email feedback was received by the Patient Experience Team about the experience of Mr A when he took his daughter to the Eye Hospital on the 5th December 2018.
- Consent was obtained from the patient for this story to be presented to Quality Committee.
- The Patient Experience Team passed on the feedback to staff at the Eye Hospital who immediately initiated an investigation process.
- This patient story is presented as an account of the impact on the patient experience as a result of the unnecessary delay in being seen as well as the lessons identified and the improvements that could be made as a result.

Background

- This patient story is presented as an account of the impact on the patient experience as a result of the unnecessary delay in being seen as well as the lessons identified and the improvements that could be made as a result.
- It also present the actual concerns and Trust response for reflection.

The concern raised;	The Investigation

- On 5 December 2018, Mr A emailed feedback that he brought his daughter for a 15:30 appointment at the Eye Hospital in the John Radcliffe Hospital site, he experiences a 1 ½ hour wait to be seen.
- Mr A described that on arrival, he was asked by the receptionist to confirm his daughters details and then asked to take a seat and wait for their appointment. After an hour when Mr A noticed that other patients have been seen and gone, he went to enquire with the staff when they would be seen.
- He explained that the receptionist asked him whether the original receptionist that they spoke with on arrival had "put a slip of paper in the tray".
- He then described that the new receptionist informed him that she would "put a new slip of paper in the tray" just in case the first one hadn't gone through! This then caused a further delay of 30 minutes making the waiting time unnecessarily longer.

- The Deputy Matron contacted and spoke with Mr A on the telephone to get further details regarding his daughter's appointment.

- Deputy Matron mentioned that following the telephone conversation , Mr A expressed that he was not 'overly concerned and does not wish to waste any more people's time' and that he was satisfied with the services they received during two subsequent appointments that his daughter had with the Oxford Eye Hospital after their experience in December.

- He agreed with the Deputy Matron that the team would respond to him with the findings of the investigation and the improvements identified via email.

Further Investigation

- The Head of Optometry investigated and found that the day in question, Mr A and his daughter duly checked in for their appointment on time at the reception desk.
- Unfortunately, it seemed that a new team member on reception failed to place a notification slip in the correct tray,
- The Head of Optometry was unable to ascertain who the gentleman was that Mr A spoke to about the delay.
- It took a while again before optometry was alerted that Miss A had actually arrived.
- She then had a full examination by a member of the optometry team.
- The Head of Optometry provided a compassionate and patient centred response to the patients' family sent on the 5th February 2019.

Lessons leant and areas for improvement

The Head of Optometry identified the following areas and actions for improvement:

- As an eye hospital we are working up a business case for a work list driven specialist ophthalmic clinical records system that will bring up a work list from EPR.
- Investment in the eye hospital wide electronic record with planned worklists that functions across all specialities.
- Plan to move to fully electronic system with acquisition of dedicated terminal within department purely for clinic coordination.
- Optometry is meeting with IT advisors to identify a way to configure the checking system to permit live view of our 10+ clinic lists simultaneously.
- Need investment in new staff role, from change of skill mix, to capture arrivals and smooth operations and remove reliance on error prone manual notifications.
- Investment in 'computer on wheels' (COW) for managing localised check-in.
- To work with reception team manager to help reception staff keep track of all patients, in all waiting areas who may have been overlooked for whatever reason.

Lessons learnt and areas for Improvement

- In addition to the list identified, this patient feedback provides an example of the reliance on the receptionist to provide clear information to patients and communicate with them effectively and help manage expectations about waiting times to be seen.
- One of the focuses of the Chief Nurse's Patient Experience Delivery Plan is on delay in appointments and waiting times as this impact on the patient experience.

Conclusion:

- The story reflects an example of how staff and services take patient feedback seriously and using them to continuously improve Trust services.

Recommendations:

- The Board is asked to reflect on the lessons learnt, assurance gained through the investigation processes, as well as areas for improvement and corresponding actions to improve the patient experience .

Appendix A: Patient Feedback:

Dear John Radcliffe Hospital,
I brought my daughter for an appointment at the eye hospital this afternoon, which was booked for 3:45pm.
We arrived at the eye hospital reception at 3:30pm, checked in at reception and were asked to take a seat in the waiting area.
At 4:15pm, (after everybody else in our section of the waiting area had come & gone), I asked reception if we were going to be seen anytime soon.
The receptionist asked me if the original receptionist had "put a piece of paper in the tray"?
I told her that I didn't know what she had done, only that when we had checked in, she had asked us to confirm the name & address, then asked us to wait in the waiting area.
The receptionist then informed me that she would "put a piece of paper in the tray", just in case the first one hadn't gone through!
At 4:45pm, (1 hour after our appointment time), I then stopped one of the eye hospital staff to ask exactly what was going on, having explained our situation.
He said that the "piece of paper" had been put in the wrong tray!
I expressed my frustration to him, in a diplomatic manner, suggesting that it was not acceptable to be kept waiting for 1 hour because somebody had "put the piece of paper" in the wrong tray!
At 5:15pm, we were eventually seen by one of the eye hospital staff, 1 & ½ hours late!
While this may seem a minor issue to such a huge organisation, I felt impelled to let you know how very frustrating this afternoon has been.
Firstly, I'm a self-employed electrician who finished work early today, then arranged for my daughter to finish school early, so we would be in good time for our appointment.
Secondly, I find it absolutely incredible that I can receive an e-mail confirmation from the JR to confirm my daughter's appointment, only to arrive at the hospital where it relies on "a piece of scrap paper" to organise the appointment system?
They have computers at the reception desk, where I'm sure they could create and print off an appointment list for that session/day?
While I thank you and your medical staff for the excellent service & care we received today, I look forward to your comments about the shocking appointment system?

Regards,
…………………..

Appendix B: Feedback response email

Dear Mr ………………,

Thank you for your email of 5th December. It has been forwarded to us from the online patient experience feedback service. I am very sorry that you have had cause to complain, I appreciate you will not have done so lightly and I would like to thank you for bringing your concerns to my attention.

I understand ………………, Deputy Matron for Specialist Surgery was alerted to your email on 29th January and then spoke with you to get a further understanding of your daughter ………. appointment on 5th December. Deputy Matron ascertained that --------- appointment was in the Optometry Department and as such has passed on to me, as head of Optometry to investigate what happened on the day and how we can learn from this to be more efficient and improve patient experience in the future.
As you raised in your email, in Optometry we do not currently use the Electronic Patient Record to monitor when patients attending for appointments arrive in the department and are therefore ready to be seen. Our current paper-based alert system that is used between the eye hospital reception admin team and ourselves, as you experienced, is unreliable and as such we are now looking at how we can utilise or develop the electronic systems available to us within our working processes.
I would like to apologise for ………. (your daughter's) experience and the inconvenience caused and give you my assurance that we have taken your concerns on board and learned from them. If you have any further questions, please do not hesitate to contact me or the Complaints Coordinator,……….on 01865 572427.

Yours sincerely,"
…………
Head of Optometry
Optometry Dept | Oxford Eye Hospital
John Radcliffe Hospital | West Wing | Headley Way | Headington | Oxford | OX3 9DU
Tel: 01865 (2)31143