Service improvement: Reducing physiotherapy outpatient waiting times

Helen McGahon

CITATION
Responses also indicated that some staff still felt that they lacked the right skills to search for information (20%) or were unsure where to find the information they needed (30%). This still compares favourably with a survey by the Royal College of Nursing (Bertulis & Cheeseborough, 2008) which found 44% stated they lacked search skills, but is higher than a similar survey in another local NHS Trust (Thornton, 2010) where the ratio was 16% and 13% respectively.

Conclusion and recommendations

From the results of this survey it can be seen that access to and effective use of information is extremely important to the day-to-day working practice and continuing personal and professional education and development of staff. It also showed that electronic access to information has become increasingly important, but that sharing and learning with colleagues is also still valued and needs to be supported. While many respondents had received some information skills training, there was an interest amongst staff for refreshing these skills, especially in how to access electronic journals, as well as developing new skills using new tools such as blogs and Wikis.

According to survey respondents, however, the biggest barrier to finding information was a lack of time. While many used a wide range of information, including the library service, some were unsure how to access the service, or aware of how it could save them time.

These responses highlight the need to communicate to all staff some key messages about library services. These messages include:

- You usually do not need to visit the library to use our services.
- Library staff can save you time by searching for information for you.
- Journal contents pages can be delivered direct to your PC.
- You can access full text journals from your PC.
- Our services are for all NHS staff.
- Library staff can help with assignment support and referencing skills.
- Most library services are available electronically using a computer.

- All staff who join the library as members are eligible for out-of-hours access.
- Library staff can help staff get more out of the internet and Google.

The themes which emerged highlighted key areas in which the library needs to improve staff experience and satisfaction:

1. Continue to promote and improve remote access to all library services.
2. Identify and promote new and existing time saving services.
3. Continue to improve desktop access to library services.
4. Increase awareness of library services.
5. Develop a wider range of support materials.
6. Continue to develop and improve the range of electronic resources.
7. Build on the insights from the survey by establishing focus groups to gather further feedback and test new approaches and services.

It was encouraging that 194 respondents gave us their contact information to be involved in follow-up focus group work or interviews. The focus group work has been taken forward as a separate project and we have started to implement the survey recommendations. Look in the ‘news’ section on the library website homepage (Library and Knowledge Services, 2013), where information is posted about resource trials, new ways of accessing healthcare information (e.g., apps, blogs, and Wikis available), service developments, support materials, new publications, and much more.

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Abstract

This paper describes a project that reduced waiting times for outpatient physiotherapy in the Eden Locality of Cumbria from six weeks to a maximum wait of two weeks whilst maintaining high-quality service outcomes.

Keywords

waiting times; musculoskeletal physiotherapy; efficiency

Background

Historically patients referred to the locality Physiotherapy Department by their General Practitioner (GP) for a musculoskeletal physiotherapy appointment waited a minimum of six weeks for an appointment. The physiotherapy staff found this frustrating as patients’ conditions often became more chronic during the wait and they often needed to take prolonged periods off work. Physiotherapists felt that in order to provide a better quality service they should see the patients sooner. Local GPs had approached the Physiotherapy Department informally to enquire if improvement in patient waiting times could be made. Two patient user group engagement meetings were carried out to obtain views on how patients would like to access physiotherapy. These meetings highlighted that the users of the service wanted fast access to a physiotherapist within a maximum one- or two-week waiting period.

Rationale for the project

The project aligns with North West Quality, Innovation, Productivity and Prevention (QIPP) agenda (NHS
Northwest, 2013). Specifically:
- Evidence from a pilot project at the locality Physiotherapy Department that gave patients access to physiotherapy with a two-week maximum wait demonstrated that when patients are seen when they initially seek help they are more engaged in their treatment, require fewer visits to a therapist, and have an improved patient experience.
- Faster access to treatment reduces the impact of illness on people's quality of life and will reduce lifestyle-related illness.
- Faster access will see quicker resolution of conditions reducing days lost at work.
- The Cochrane Library's February 2012 issue special collection covering exercise for musculoskeletal conditions (Cochrane Library, 2012) supports increasing the volume of group work as this gives best outcomes thus increasing capacity and capability of physiotherapy departments.

Objectives for the project
The project had the following objectives:
1. To change how first appointments are delivered.
2. To change the follow-up (F/U) treatment regime.
3. To ensure that the patient's condition resolves in fewer contacts and therefore less time. In order to achieve this the department carried out a pilot study assessing patients who accessed the service in a maximum wait of two weeks and demonstrated that when conditions were treated in this timescale they resolved more quickly and patients took more ownership of their own treatment and exercise.
4. To consider how the Choose and Book service affected productivity. GP referrals to the locality physiotherapy service are 100% by Choose and Book. The service believed that an expansion in referral appointment capacity could lead to a large increase in referrals (demand) from outside the locality leading to lack of perceived benefits for local commissioners/patients. The commissioners therefore agreed to limit the Choose and Book service for Eden Physiotherapy to Eden-based referrers only in order to properly understand the effect the proposal had on waiting times. GPs outside the Eden locality (Cumbria) could still access the service if they sent referrals by letter. This ensured patients who needed the treatment in the Eden area could still access the service.

Service change
From 14 May 2012, all staff commenced new patient sessions of Choose and Book referrals and orthopaedic referrals. During this time, a patient satisfaction survey was administered to assess the effect the change in referrals had on patient experience at the Physiotherapy Department; the data from this are presented in the results. In order to establish the effect of the service change, comparisons were made between service data from 2011 (before the service changes) and 2012 (after the service changes). All data for the analysis of changes in productivity were taken from the existing Community Patient Administration System.

Results
Data from 14 May to 30 September for both 2011 and 2012 are shown in Table 1; staffing levels over the 2011 and 2012 were comparable. The waiting time by the end of the project was eight working days.

Table 1

<table>
<thead>
<tr>
<th>Outcome</th>
<th>2011</th>
<th>2012</th>
<th>Percentage change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of new patients seen</td>
<td>737</td>
<td>927</td>
<td>Increase 26%</td>
</tr>
<tr>
<td>Number of patients seen once</td>
<td>320</td>
<td>428</td>
<td>Increase 33%</td>
</tr>
<tr>
<td>Number of patients assessed and given advice with option to self-refer back (SOS)</td>
<td>70</td>
<td>114</td>
<td>Increase 62%</td>
</tr>
<tr>
<td>Number of new patient DNAs</td>
<td>79</td>
<td>60</td>
<td>Decrease 24%</td>
</tr>
<tr>
<td>Total contacts</td>
<td>3048</td>
<td>3571</td>
<td>Increase 17%</td>
</tr>
<tr>
<td>Average number of contacts</td>
<td>3.13</td>
<td>2.92</td>
<td>Minimal change</td>
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The results indicate a significant increase in productivity for the service, it is important to demonstrate that this was not achieved at the expense of a positive patient experience. In order to demonstrate this, data are presented here from the patient satisfaction survey. The patient satisfaction survey was designed to establish if the new way of working had an impact on the patient experience. Figures 1, 2 and 3 show the results from the specific questions in the satisfaction survey. Figure 4 shows the results of a 'wordle' (Feinberg, 2011). A ‘wordle’ is a ‘word cloud’ created to give greater prominence to words that appear more frequently in the source text; in this case, the words used by patients to describe the service. This can be seen as a graphical representation of features of the service valued by patients.

The patient satisfaction questionnaire also used a ‘friends and family’ question. This question has since been introduced to the NHS and identifies whether patients would recommend a particular NHS service to their friends and family. In the wider NHS, the results of the test will be used to improve the experience of patients by providing timely feedback alongside other sources of patient feedback. In this evaluation, 100% of patients said they would recommend the service to friends and family.

Figure 1: Results from the patient satisfaction questionnaire

![Figure 1](image1.png)

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Figure 3: Results from the patient satisfaction questionnaire

![Graph showing patient satisfaction results.]

Figure 4 is a wordle showing the words that patients used to describe what they ‘liked best about the physiotherapy department’. Words that are larger are words that were used more frequently.

Figure 4: What do you like best about our Physiotherapy Department?

**Conclusion**

Changing to a system of specific new patient sessions has increased the capacity of the locality physiotherapy service. Providing a wider range of treatment options i.e., group work and technical instructor treatment packages frees up physiotherapist time to be able to see more new patients for assessment. By increasing capacity in this way, patients’ waiting time to access the service is significantly reduced. As a result, the number of patients needing only one appointment to provide assessment and advice to manage their condition increased. Physiotherapists were concerned patients seen only once may need to return for follow-up appointments. To ensure patients had this opportunity to access physiotherapy without having to visit their GP for a second referral, patients were given details to directly access the service should they need to. This study has not measured the number of patients who took up the opportunity to return to the service but it is evident that offering this facility has not impacted on waiting times.

This way of working has reduced the number of did-not-attends thereby improving service efficiency. The new way of working has become embedded in the department with waits remaining less than two weeks. The staff feel they give excellent evidence-based treatments when patients are presenting for treatment. They feel that because patients are engaged early in treatment they get more involved and take greater ownership of their recovery. Following the introduction of this system, the average number of contacts per patient has not changed significantly. Physiotherapists report that they do not compromise their clinical decision-making and they have the capacity to offer treatment they feel is appropriate to the patient and their condition. The patients report satisfaction with the service they receive, with 100% stating they would recommend the service to family and friends.

This report has demonstrated that it is possible to improve the efficiency and effectiveness of a service without a detrimental effect on the patients’ experience.

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**References**

