

Improving experience and reducing non attendance on the Pain Management Programme



NHS Lothian

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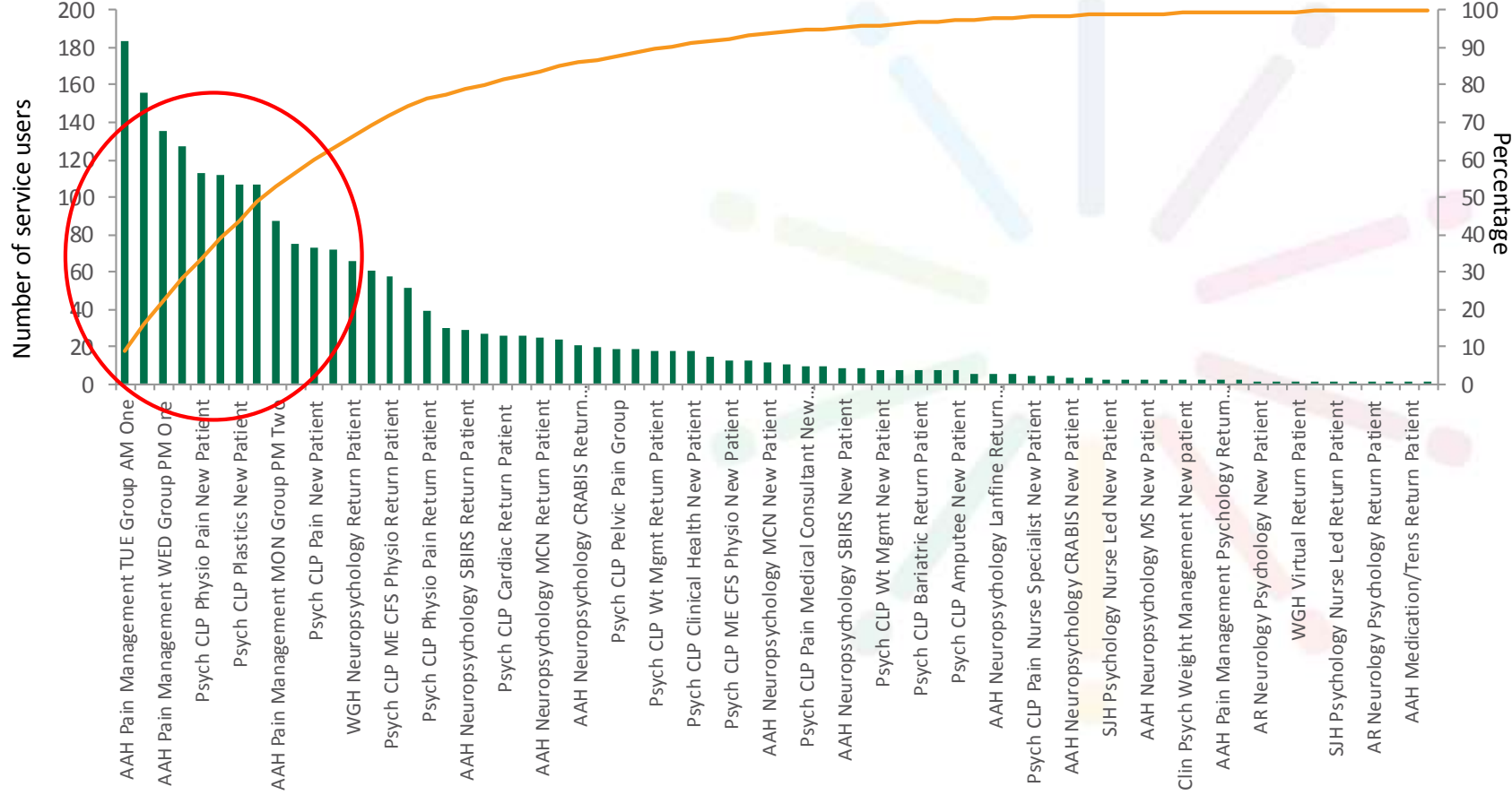
Project team



Background to the project

- NHS Lothian investing in QI approaches – mental health and psychological therapies.
- Increasing access to psychological therapies: not only ensuring services sufficiently resourced but are also efficient and productive.
- How can a QI approach help?

Where is the most non attendance?



Engaging the team – what matters to you





What are we trying to accomplish?

To improve experience in the pain management service and to reduce non attendance rates by 10 percentage points.



Pain Management Service

**We would like to hear your
experience of our service!**

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Calling all patients who are attending the Pain
Management Service!

We would like to hear about your experiences of our
service so that we can identify ways to improve our
Pain Management Programme.

We would like to have a short conversation with you to
find out about your experiences. If you agree to share
your experiences we think this will take a maximum of
30 minutes. We can do this either face to face or over
the phone.

What is your general experience of the pain management service?

Prompts:

How were the letters/information we sent you about the service?

Why did you think you were coming and what did you know about what we could offer you?

How was your experience of your first appointment here?

*Have you had to re-arrange any appointments with the Pain Management Service?
What was that experience like? What were the reasons why?*

What was your experience of the staff you came in contact with like either over the phone or face-to-face?

How did you feel when coming to this service?

Any further comments of what went well and what could have been better?

Pain Management Service

What has gone well

Good communication during first appointments and clear information of what group can offer

"With the initial interview I had – very clear about what was going on & the intention of where you would go" *Female, 80s*

" I thought it was quite clear and from the get go I knew who I was talking to & they explained that I would be with different people than I'd initially met – physio and psychologists. So at no point did I turn up and not know what was going on or feel that things had been changed." *Male, 20s*

"...everything gets explained to you & it's no' as if they're trying to dumb it down – they gage what knowledge you've got." *Male, 40s*

Good information/explanation in treatment sessions

"I have understood everything - didn't feel it was too technical" *Female, 80s*

Once in the service the process happened quickly

"Letters from initial confirmation that you'd been accepted onto the your books basically to getting an appointment was really quick" *Male, 40s*

"I thought it was quite a quick process, introductory session & then I started quite quickly after that" *Female, 50s*

Helpful & approachable staff

Staff going the extra mile & finding a specific piece of equipment for a patient:
"Fantastic" "chuffed about this"
"found out what was what for you" *Female, 80s*

"They were really understanding of that (life changes) and they kept in touch to see how I was." *Female, 30s*

Friendly reception staff

"Friendly voice on the phone so you don't feel like you're bothering anyone..." *Male, 40s*

"Anyone I spoke to on the phone or dealt with at reception had been superb, really good" *Male, 40s*

Pain Management Service

What we can improve

Better information before people come here, so they know what to expect

Making sure people have access to what they need after the group finishes

Better phone access to reception & clearer information about when we will call you back

More time to talk to other people in the group

Improvements to rooms & signs in the building

Easier access to location

"I need to look at after-care support. Probably the worst thing for me was not having the extra support I needed while going through the PMP. Medication wise I have no support. Going to be changing GPs" *Female, 20s*

"they said you would see a psychologist & I was like, right ok, but again there was no explanation as to why it would be a psychologist. What the relevance of that was...?" *Male, 40s*

"It was more along the lines of, oh well, there's this pain management course that I could send you on – do you want to go on it? That was basically all I got asked. I didn't get any information regarding it from my GP." *Female, 40s*

"I left a message but I didn't know if anyone had got the message – 2/3 days before anyone got in contact – difficult" *Female, 50s*

"I've asked to be referred to Midlothian Active Choices to look at suitable exercise classes in Midlothian – however not available in other areas of Lothian – don't know why?" *Female, 60s*

"If I dinnae (have a lift) it would be two maybe three buses & that would just be by the time I got here I wouldn't be in any frame of mind – I would just be agitated & sore & pretty irate – not at you guys but just at potholes & people in Edinburgh in general" *Male, 40s*

"For us anyway we could have done with a wee bit more time to chat." *Female, 60s*

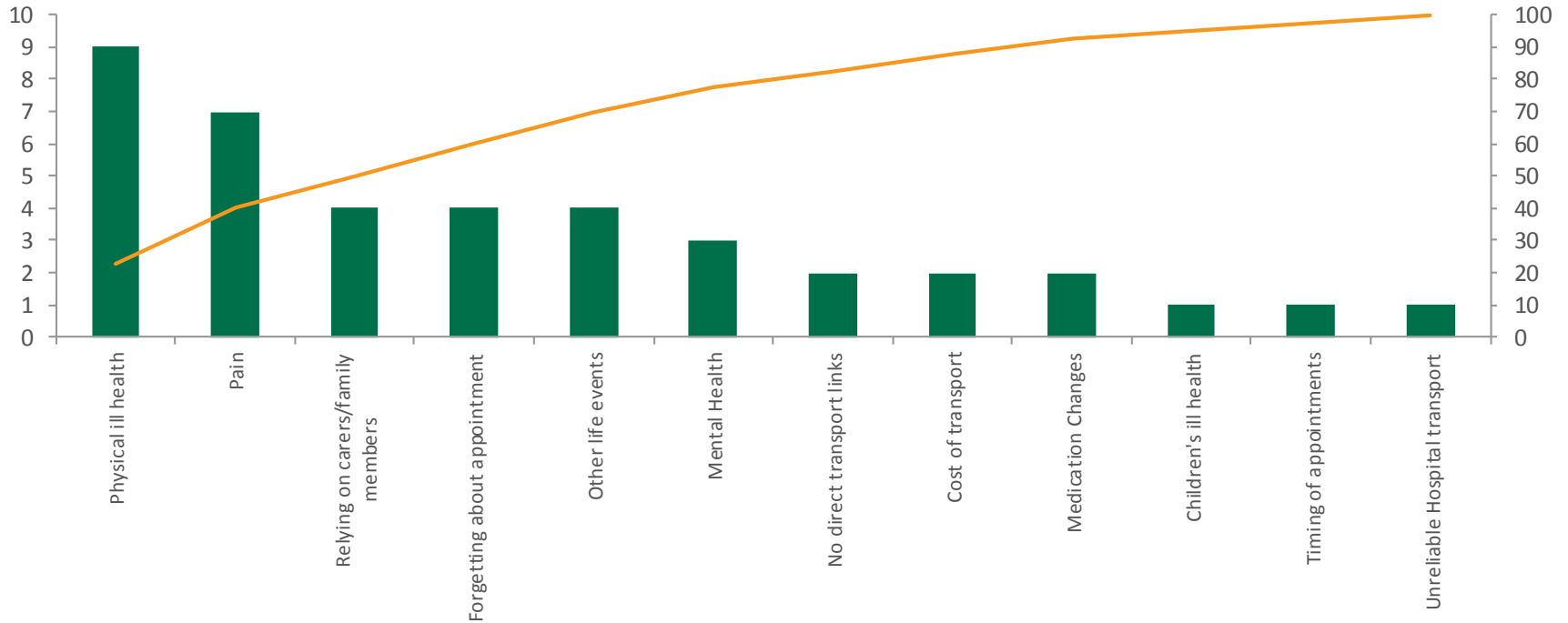
"Could have had longer break...time for coffee & toilet & of course people want to have a wee chat" *Female, 60s*

"trying to read the slides, weren't very clear – slides were fine probably in the dark but it had coloured writing – very difficult to read. The whole screen could have been bigger" *Female, 60s*

"Toilets were very hard – walking sticks – toilets too low – needed handles" Unaware there was a disabled toilet *Female, 60s*

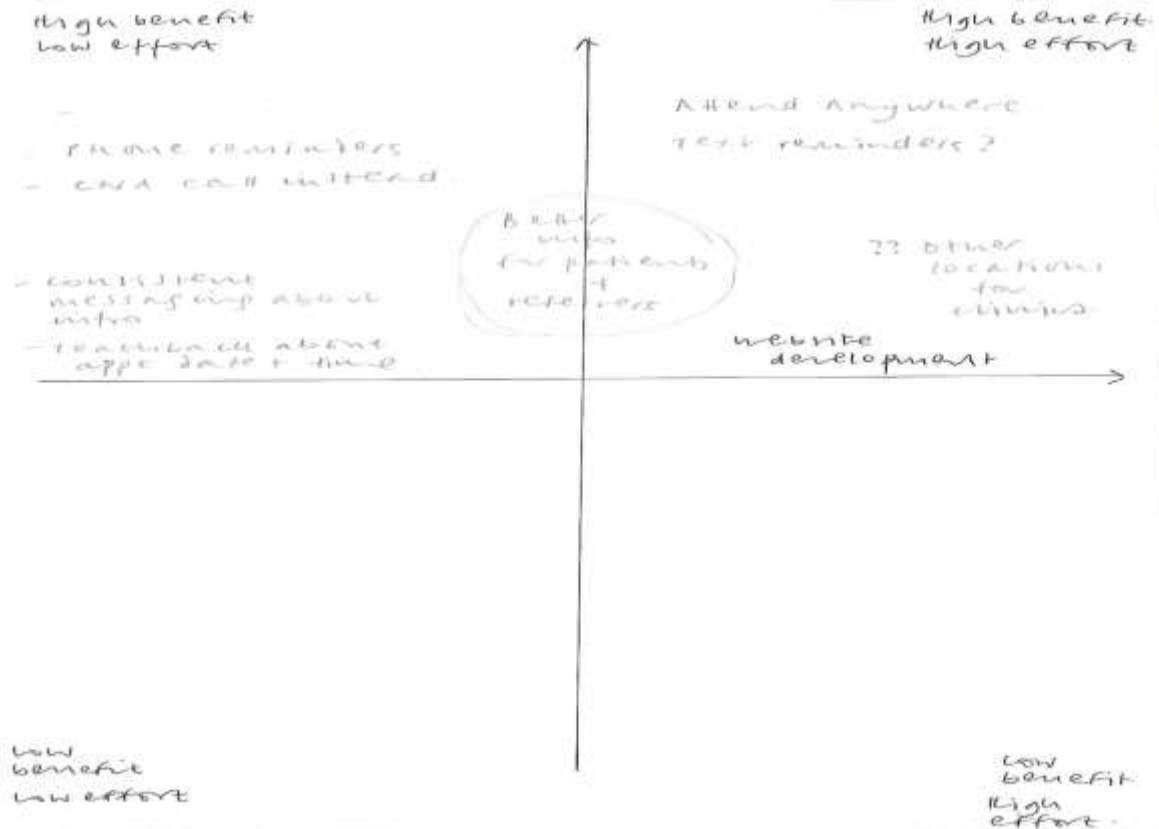
"The only thing is the travelling because I'm through in West Lothian it's putting another 2 hours onto the already 3 hrs long course so that makes it a very long day. If you're not having a good day that sometimes can, I mean I've thought about 'oh I really couldn't face this today'" *Female, 40s*

Why don't people come? Pareto analysis of patient reasons for non attendance.

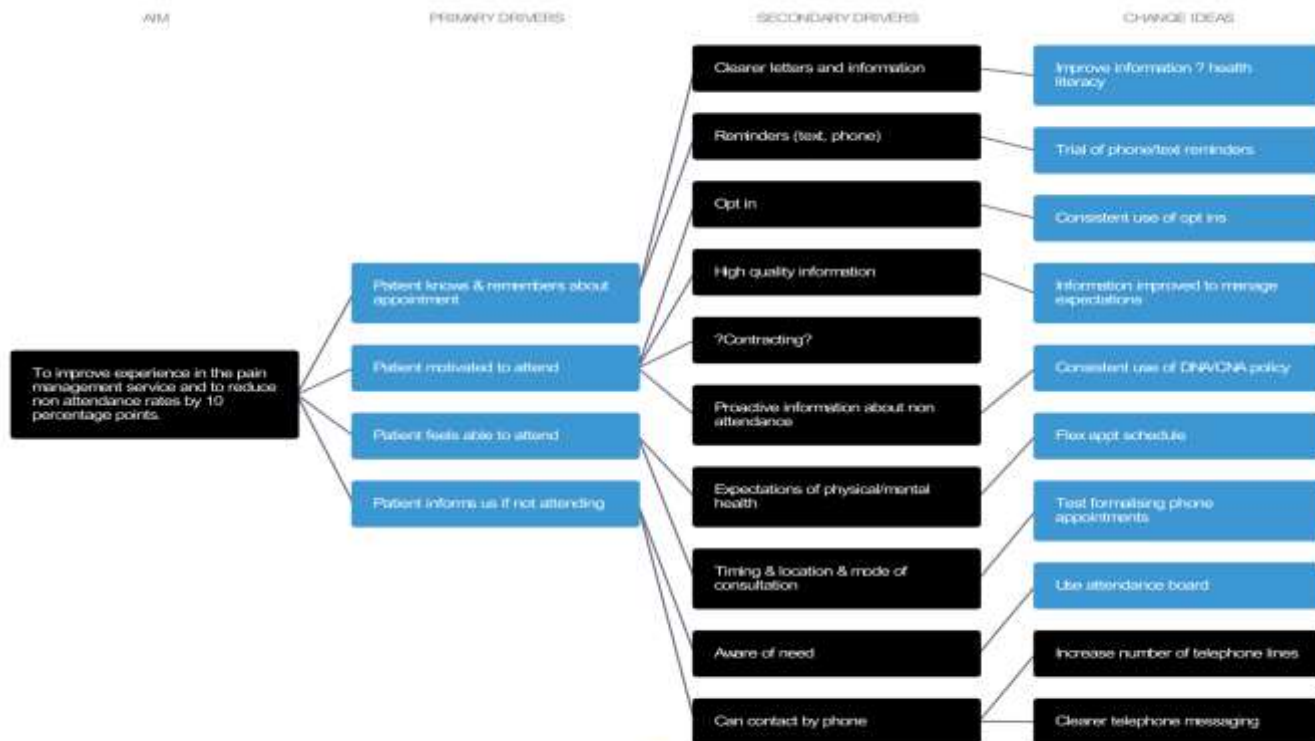


N=22, reasons = 40

What change can we make that will result in an improvement?



Driver diagram



Blue



Primary drivers

Patient knows and remembers about appointment

Patient motivated to attend

Patient feels able to attend

Patient informs us if not attending



How will we know that a change is an improvement?

Improved attendance rates

Reduction in non attendance rates

Patient feedback and satisfaction - monitoring patient feedback

PDSA cycles for improving attendance

- Phone reminder for introduction to group
- Phone reminder for first of 11 session pain management group
- Offer of a telephone consultation for patients phoning to say they are unable to attend in person for their scheduled psychology return appointment.



PDSA for Group reminders



PLAN:

Questions: Will phone reminders increase attendance at Week 1 of Pain Management Programme?

Predictions: Increased attendance for people who we have spoken to or received a reminder

Plan for test: Who, what, when, where: Lucy (physio) will phone patients 1 week before they start group. If required other physios will support this.

Plan for collecting data/information: Lucy will leave a note next to patient's appointment on TRAK to detail who they had direct contact with, who they'd left a message with & who they were unable to contact.

DO: Carry out the test, collect and analyse data

Carry this out on at least 7 groups

STUDY: What happened? Complete data analysis, summarise learning

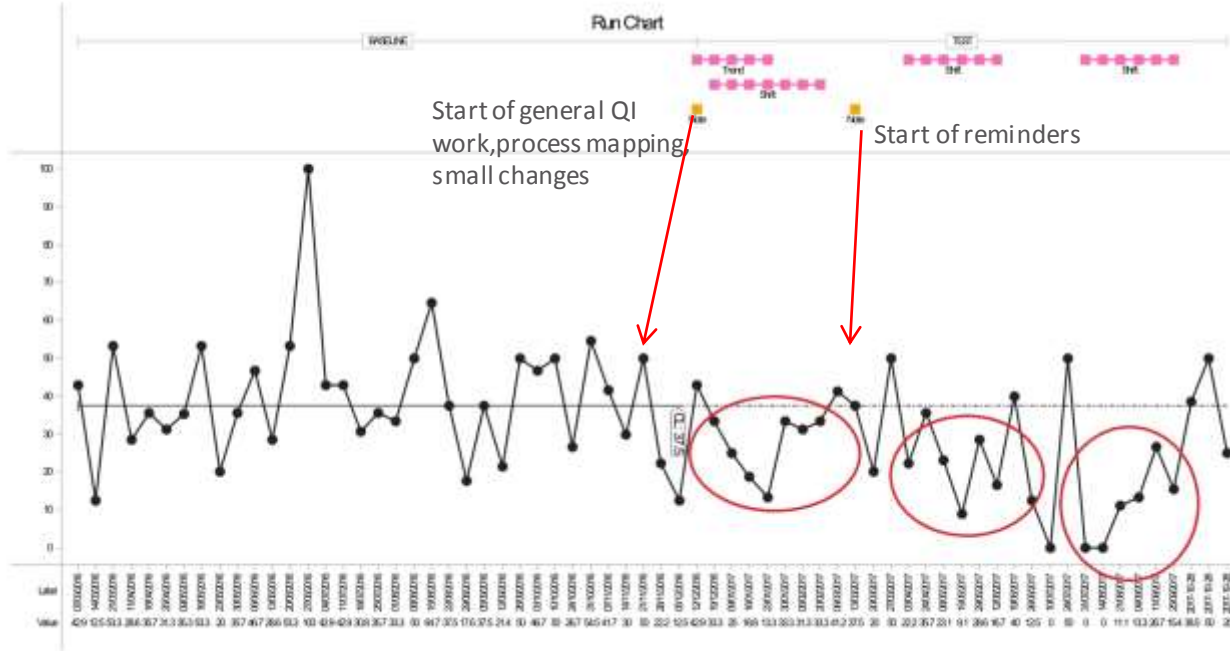
Data was compiled into table format by Kate to show results – to be discussed at team meeting

ACT: Are we ready to make the change permanent? Plan for next test

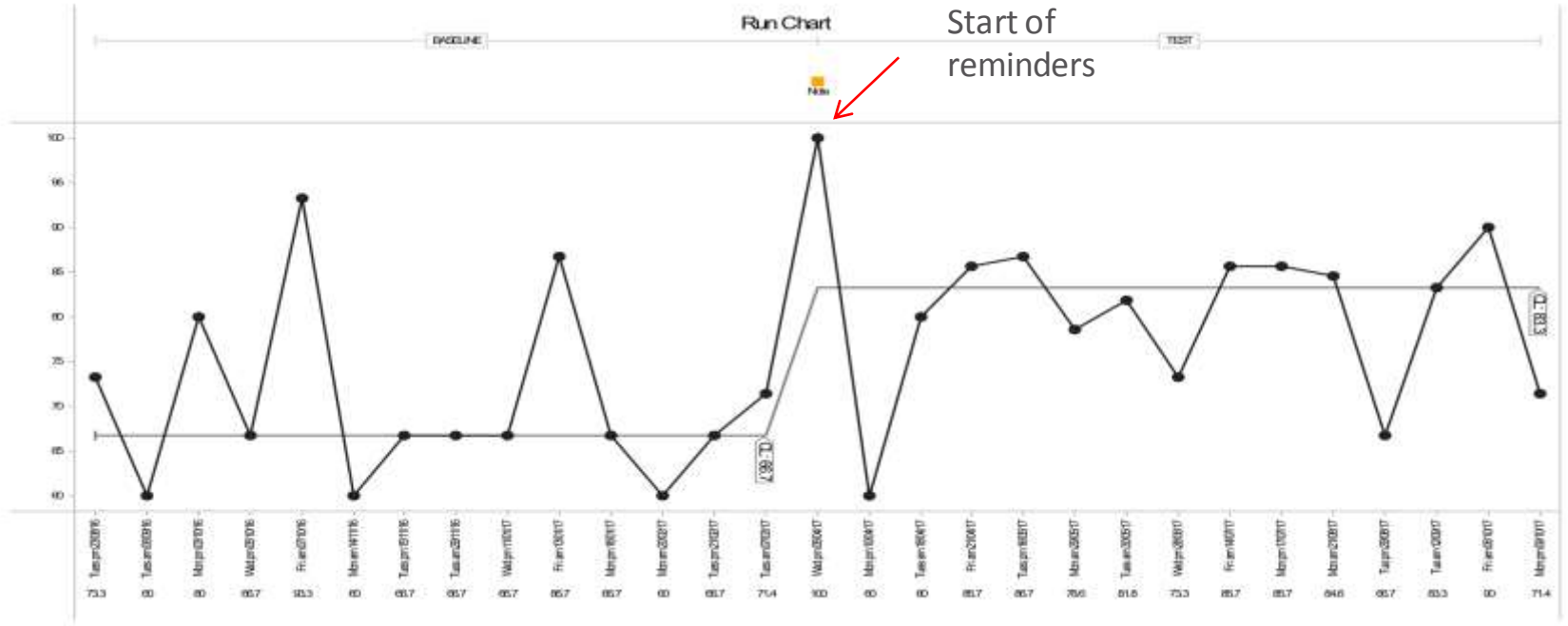
It was decided at the team meeting for phone reminders to continue so we can gather more data to analyse the overall impact.

Results

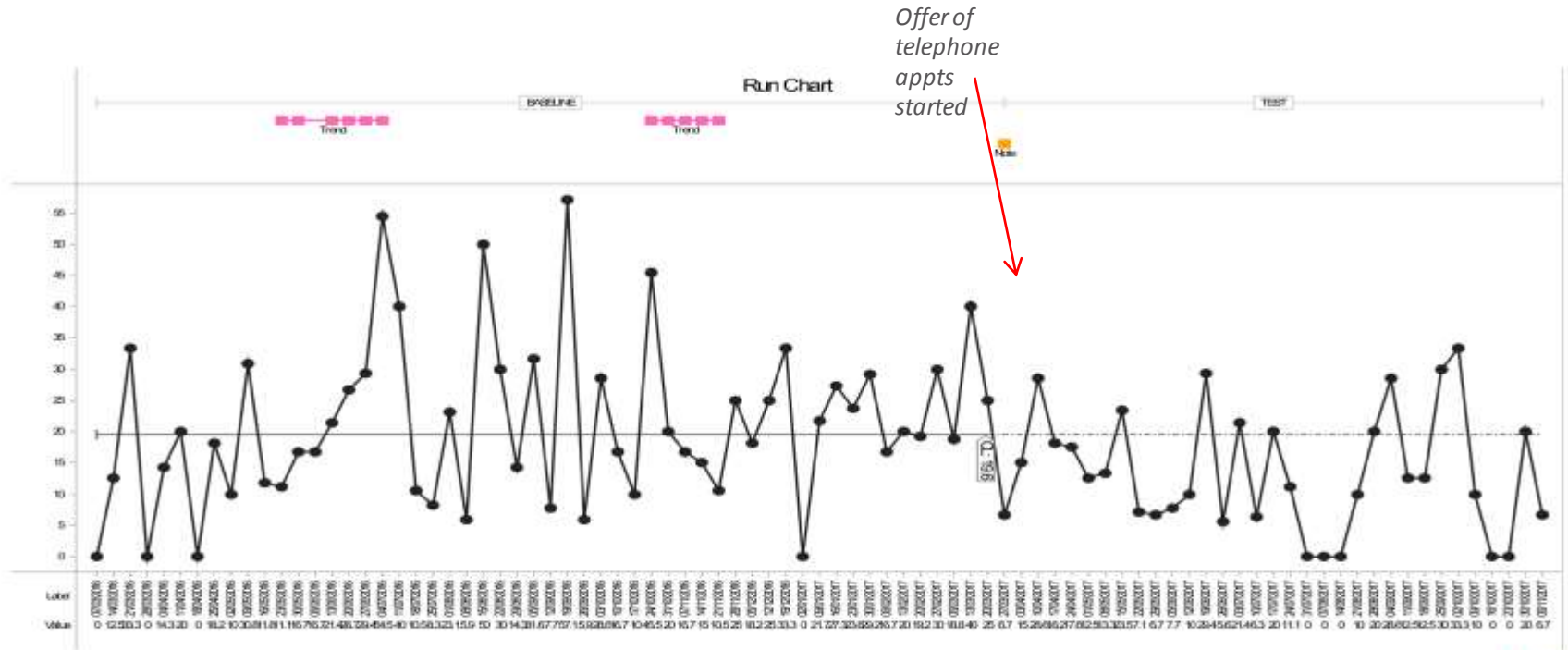
Combined non attendance-Intro to group 03/16-10/17



Run chart- % attendance at first group session 03/16-10/17



Run Chart – CNA Rate (%) for Return Psychology Appointments





Better phone access to reception & clearer information about when we will call you back

Phone lines were changed so all admin staff could easily answer

Patients are able to leave a message if admin are engaged on another line

Clearer answer machine message about response time



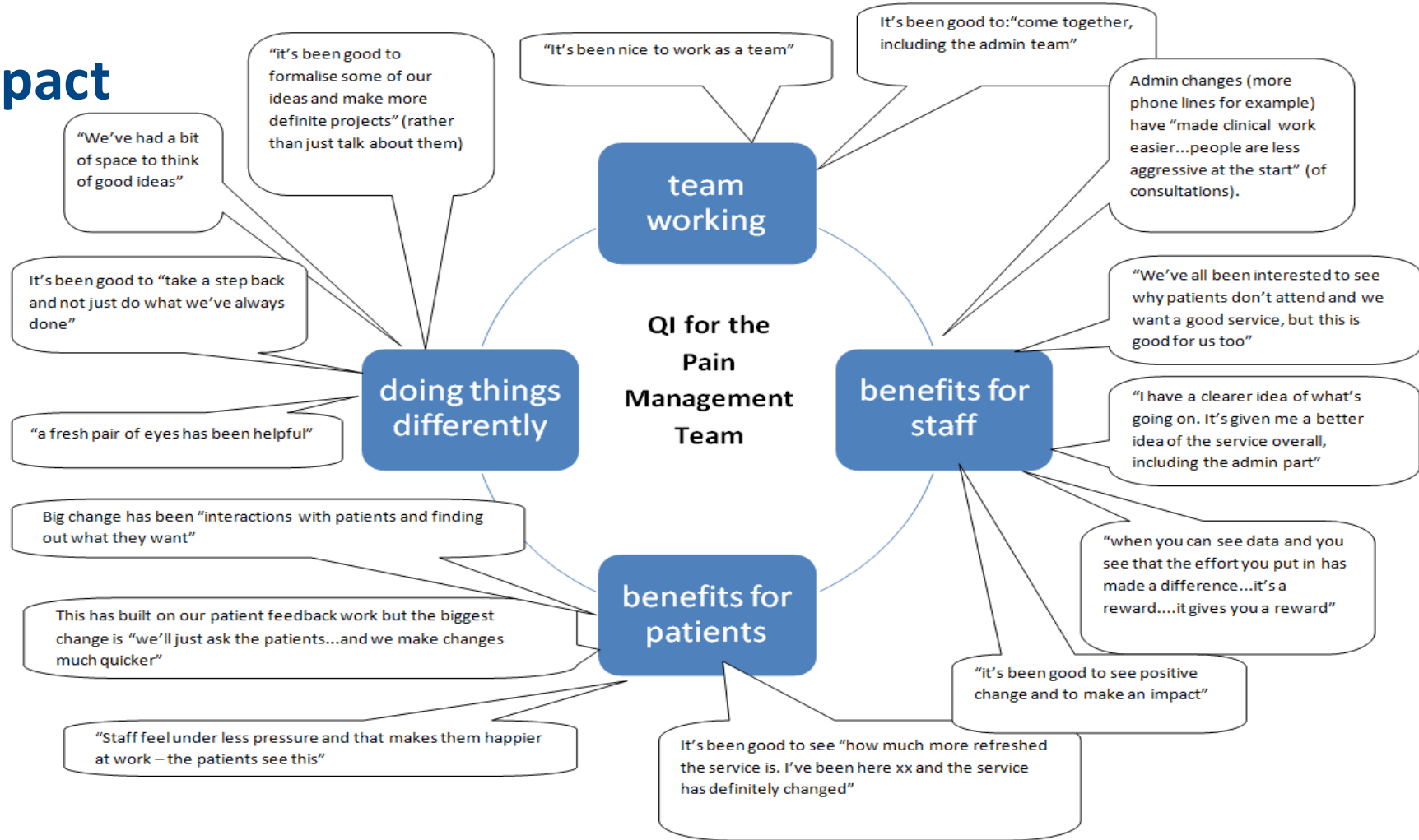
Better information
before people
attend, so they
know what to
expect

Information sheet
about our service
adapted to give to
GPs and other
referrers

Meeting with a GP
surgery to get their
feedback on their
understanding of
our service

Speaking to Pain
Clinic about the
confusion patients
have with our
service

Impact



Psychological Therapies

Pain management project - ROI

Pain management ROI

Improving the use of clinical capacity in pain management services

	Quality Dimension	Indicator / Metric	Description of consequence/other observation
1	Safe	Reduced DNA/CNA rate	
2	Effective	Reduced DNA/CNA rate	The sooner a patient is seen the more effective the intervention is likely to be
3	Person-Centred	Reduced DNA/CNA rate	Offer of telephone appointment.
4	Equitable		
5	Efficient	Reduced DNA/CNA rate	There will be a reduction in wasted clinical capacity
6	Timely	Reduced DNA/CNA rate	More patients should be seen in a timely manner

Pain management services either see patients on a 1:1 basis or in group sessions.

1:1 basis

The table below sets out the level of waste due to non-attendance of 1:1 sessions with psychologists of physiotherapists.

Appointment type	No of wasted sessions per year based on Apr/May 2016 data	Cost per session £	Total wastage £
Psychology first appointment	144	47	6,768
Psychology return appointment	306	47	14,382
Physiotherapy first appointment	192	40	7,680
Physiotherapy return appointment	84	40	3,360
Total	726		32,190

Group sessions

Group sessions involve attendance at a 1:1 psychology appointment, an introduction to the group session and 11 group sessions

If a patient does not attend the first of the group sessions then the entire value of the costs of the pathway are wasted.

The table below sets out the cost of the total pathway per patient, assuming sessions are run for 12 patients

Pathway step	Cost per person £
1 psychology appointment	47
Introduction to group session	14
Group sessions	236
Cost of total pathway per patient	297

Sustainability and spread

- QI projects – what can be integrated into ongoing practice and development of new projects
- More training and sharing QI experience
- Writing up projects and participating in wider QI events

Key learning points

- QI training for team in different ways

****Access to useful data and analytics****

- Measure, measure, measure!
- Time in job plans to do things differently



Thank you

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