

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

Trust Board Bulletin – 1 March 2012

The following reports are attached to this Bulletin as items for noting, and are circulated to UHL Trust Board members and recipients of public Trust Board papers accordingly:-

- **Briefing on appointment booking systems.** Lead contact point – Mrs S Hinchliffe, Chief Operating Officer/Chief Nurse (0116 258 5488) – **paper 1.**

It is intended that these papers will not be discussed at the formal Trust Board meeting on 1 March 2012, unless members wish to raise specific points on the reports.

This approach was agreed by the Trust Board on 10 June 2004 (point 7 of paper Q). Any queries should be directed to the specified lead contact point in the first instance. In the event of any further outstanding issues, these may be raised at the Trust Board meeting with the prior agreement of the Chairman.

To:	Trust Board
From:	Head of Performance Improvement
Date:	1 March 2012
CQC regulation:	N/A

**Trust Board Bulletin –
paper 1**

Title:	Choose and Book						
Author: Head of Performance Improvement / Responsible Director: Chief Operating Officer							
Purpose of the Report: To update the Trust Board on recent developments re Choose and Book							
The Report is provided to the Board for:							
<table border="1"> <tr> <td>Decision</td> <td></td> </tr> </table>		Decision		<table border="1"> <tr> <td>Discussion</td> <td></td> </tr> </table>		Discussion	
Decision							
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Endorsement							
Summary / Key Points:							
<ul style="list-style-type: none"> Choose and Book is a national system that is managed locally UHL has approximately 250 services on the system There is a PCT target of 90% utilisation, LLR is currently at circa 60% Provider organisations must ensure that a minimum of 96% of 1st attempts to book an appointment are successful. UHL met this requirement during January 2012 							
Recommendations:							
The Trust Board is invited to receive and note this report.							
Strategic Risk Register		Performance KPIs year to date					
N/A		N/A					
Resource Implications (eg Financial, HR)							
N/A							
Patient and Public Involvement (PPI) Implications							
N/A							
Equality Impact							
N/A							
Information exempt from Disclosure							
N/A							
Requirement for further review ? Monthly report of C&B issues is already within the Divisional Heatmaps.							

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: MARCH 2012

REPORT BY: HEAD OF PERFORMANCE IMPROVEMENT

SUBJECT: CHOOSE AND BOOK RECENT UPDATES

1. BACKGROUND

Choose and Book (C&B) is a national IT system that enables referrers (principally GPs) to choose where to refer their patients to. Booking of 1st outpatient appointments can be made in a variety of ways. The GP can do this with the patient in surgery. Alternatively the patient can do it themselves either via the national appointment line or over the internet. The system enables patients to cancel and rebook their initial appointment should they choose to do so. The choice of provider(s) available to the patient is selected by the referring GP. This system has been in place since approximately 2005.

2. ORGANISATIONAL REQUIREMENTS

2.1 PCTs have a utilisation target of 90% of C&B, this means that they are required to ensure that a minimum of 90% of all referrals for 1st outpatient appointment are booked via C&B. Within LLR utilisation is currently circa 60% and has increased by approximately 10% since the introduction of a locally enhanced service for GP practices during 2011-12.

2.2 Provider organisations are required to ensure that:-

- they represent their service on C&B in what is termed the Directory of Services. UHL has approximately 250 such services across the three hospital sites.
- they enable referrals and bookings into named consultant led outpatient services, where it is appropriate to do so.
- they always provide adequate volumes of new outpatient appointments to enable a minimum of 96% of all 1st bookings to be successful.
- where a booking is not successful at 1st attempt, provider organisations receive electronic notification the following day and are required to implement the nationally prescribed Appointment Slot Issue (ASI) process. This requires the organisation to initiate contact with the patient to arrange an appropriate appointment.

3. CHALLENGE FOR UHL

During the latter part of quarter 3 2011-12 there were capacity issues in a handful of specialities, this resulted in a reduction in the number of outpatient slots being available to patients via the C&B system. Following some targeted work with these specialities, performance in January 2012 had improved to 96%.

However the provision of timely outpatient appointments on the C&B system remains the main on going challenge for UHL and with the drive by PCT's to increase C&B use up to 90% as a minimum, the Trust must remain responsive to ensuring that patients receive the right appointment booking 1st time.

4. RECOMMENDATIONS

The Trust Board is invited to receive and note this report for information.

Charlie Carr
Head of Performance Improvement
March 2012