Improving Access in City and Hackney Adult Mental Health
Andrew Horobin, Maria Lee, Amrus Ali, Andrew Haynes, Charles Kennedy-Scott, Dr Priscilla Kent, Kumar Birch
QI Leads & coaches – Auzewell Chitewe & Jen Taylor-Watt, QI Sponsor – Dr David Bridle

Aims

The project initially focused on reducing waiting times, so that:
- 95% of patients to be given an appointment for face-to-face contact with any HCP within non-specialist services in City & Hackney within 28 days by April 2017.

We are now focusing our testing on reducing DNAs, so that:
- We reduce 1st appointment DNAs of referrals to CHAMHRAS to 20% by September 2017

Why is this important to service users and carers?

We chose this project because we were concerned that patients in City and Hackney were waiting too long for their first assessment by our adult mental health service. This meant there was an overly long delay in getting people into the services they needed, resulting in poor patient experience. In December 2014 only 30% of patients were seen within 28 days.

90% of service users referred by GPs should be seen within 28 days. Reducing DNAs specifically is a key means by which we can reduce the waiting time for services, by reducing this inefficiency of appointment slots that are not used to treat and support people. As it is a complex area, in the second stage of this project, we have moved to focus on this as a new area for testing.

Commissioners also expected progress in this area, introducing a target that

Drivers Diagram – Waiting Times

Summary of results

- The % of people referred by GPs, who are seen within the 28 day target has increased from 30% in 2014 to 93% now (Chart 1).
- As well as looking at the % of people seen within 28 days we also look at average wait time (Chart 2). This has halved from over 36.6 days in 2015 to 18.5 days now.
- The above results have been achieved during a period in which referrals have increased significantly (Chart 3). Whilst in 2014 we received on average 105 referrals from GPs per month, in 2015 this increased to 200 and in 2016 225.
- Please note, we also look at all of this data for ALL referrals, as well as GP referrals, for which we have seen a similar level of improvement.
- DNAs have also reduced over this period from 46% in 2014/15 to 29.6% since March 2015 (Chart 4).

Current Focus

Since October 2016 we have been particularly focusing on DNAs in our PDSA testing, with primary drivers and change ideas shown below. We have also developed a survey to enhance our understanding of the issue from service user’s perspective and to try to see if we can find a service user who is interested to become involved in the project.

Primary Drivers and Change Ideas - DNAs

- Effective communication
- Service accessibility
- Hard to engage patients
- Quality of Referrals
- Administration issues

Please note, since November Op Def in this chart has changed so that cancellations are included in the denominator, as per Trust definition change. This accounts for some of the DNA drop in this period.