**RCPCH EQIP Project: Introduction of a Patient Feedback Survey to identify problems with our Epilepsy clinic booking service and strategies for improvement**

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**Aim/purpose:** To obtain feedback from patients and families seen in Tertiary Epilepsy clinics from January to March 2020 regarding their perceived appropriateness of the time interval between follow up appointments.

**Background:** As a team, we noticed that parents were contacting the hospital to chase up appointments as they were not being made at the correct time interval, some clinics were under booked or there were late cancellations. We wanted to obtain baseline data and identify any current problems with our clinic booking service and find strategies for improvement.

### Our Improvement journey-the steps we took

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<th>Task</th>
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<tr>
<td>Dec 19 to Jan 2020</td>
<td>Development of Patient Survey from families and the Patient Experience Team</td>
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<td>Jan to Feb 2020</td>
<td>2 week trial using Pilot Patient Survey</td>
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<td>Feb to March 2020</td>
<td>Continued use of Patient Survey in Epilepsy Clinics</td>
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<tr>
<td>April 2020</td>
<td>Analysis of feedback data and Presentation of Results</td>
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<td>June 2020</td>
<td>Development of a new virtual epilepsy clinic booking pathway and final report submitted</td>
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### Process Map for current Clinic Booking Pathway

1. Patient and family are seen in clinic and clinician decides on interval for follow up
2. Follow up interval recorded on OP consultation form or E-consulting
3. 4-6 weeks before clinic appointment, clinic administrator books the clinic from patients from a waiting list
4. Patient and family are informed of the appointment by letter, phone or text
5. Clinic appointment confirmed by phone or text
6. Patient and family attend the scheduled follow up clinic appointment

### Early Results (22nd Jan to 4th Feb 2020, 15 responses)

- Overall satisfaction with the clinic booking service was good-87% were very satisfied or satisfied
- The majority of patients and families were not getting enough advance notice before their clinic appointment (only 26% got >3 weeks notice)
- **AIMS following results:** To review Step 3-6 of the process map in detail to look for strategies to improve the advance notice before clinic and improve notification of the clinic appointment

### Final Survey Results (April 2020, 46 responses)

- The perceived appropriateness of the time interval between follow up appointments was reasonable (80%) but there is room to improve
- There were inconsistent ways of informing patients and families of appointment and re-confirming appointments
- They wish to have a personal choice when booking date/time of next appointment (58%)
- They wish to verbally agree and book provisionally next appointment with the clinician in clinic (36%)
- **Overall satisfaction with the clinic booking service was good-84%-very satisfied or satisfied**

### Final Survey Results (continued)

**Causes of dis-satisfaction:**
- Difficulty contacting appointments team to chase and change appointments
- They are not receiving enough notice before clinic appointment (only 52% had >3 weeks notice)
- 15% had to contact the hospital themselves to make an appointment

**Action Plan:** To develop a clear and detailed Epilepsy clinic booking pathway with input from the administrative and managerial team

**April 2020:** Due to COVID-19, all face to face clinic appointments were converted to telephone or video consultations. Virtual clinics using the Attend Anywhere platform is going to be the ‘new normal’ for our Epilepsy clinic appointments.

**‘New Normal’ Epilepsy Virtual Clinic Booking Pathway following COVID-19 crisis**

- Patient and family are seen in ‘Attend Anywhere’ virtual clinic
- Clinician can discuss and agree on interval of next follow up appointment
- Appointment confirmed by phone or text
- Follow up interval (outcome) recorded on Outpatient Consultation Form or E-consulting
- Clinician can email the clinic administrator the outcomes
- Outcomes automatically stored on ‘Business Objects’ Database
- 2.4 weeks before clinician’s clinic appointment, clinic administrator identifies patients to be contacted
- Outcome is emailed to patient or telephone call

**THEN:** The clinic administrator books the appointment and the patients and families are contacted by phone and the virtual clinic link is emailed to them

**Next steps**

- This virtual clinic pathway can be audited in the future
- We have developed a short patient survey to obtain feedback on their current experience of video clinic consultations