

### REASON WHY?

The trust currently sees over 593,000 outpatient attendances per year, however, has been facing persistent challenges in managing waiting times for first outpatient appointments. These delays have led to an increasing number of patients breaching the 52 & 65 week wait targets posing a significant risk to patient care and safety. The use of existing capacity is inconsistent.

**S M A R T AIM**

To increase booked utilisation to 83% by 1<sup>st</sup> December 2025.

### PLAN

The patient access team reviewed the current process and engaged teams in idea generation to understand ways to improve the current process.

It was agreed that a focus would be had on increasing the utilisation of clinic slots.

Previous work within the planned care workstream showed that ensuring the booking rules were accurate was effective, alongside the use of a 642 process. This process involves regular meetings where staff declare leave 6 weeks out, lists are planned 4 weeks ahead, and reviewed 2 weeks before, aiming to reduce cancellations by ensuring staff and resources are ready.

### DO

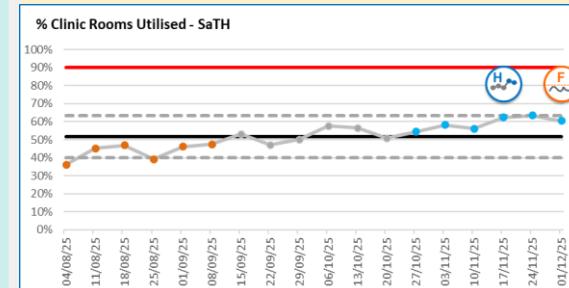
The 642 meetings were set up in July and a clinic template set up for teams to populate. A meeting is held weekly to review the clinic template for each site (alternate weeks).

A template was designed for teams with the clinic codes for population. The template is colour coded by speciality. This template will be reviewed to understand if the clinic has taken place, along with the number of patients that have attended. This will enable the teams to review the clinic templates against the demand.

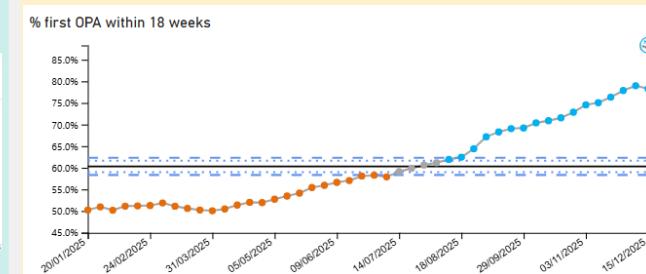


### STUDY

The percentage of clinic rooms utilised has shown statistically significant improvement since implementation in July 2025. The clinic template has been utilised each week. Utilisation is trending in the right direction, increasing above 60% in October 2025.



| SaTH                                      | 03-Nov | 10-Nov | 17-Nov | 24-Nov | 01-Dec |
|---|--------|--------|--------|--------|--------|
| Rooms Booked and Used                     | 905    | 913    | 951    | 1035   | 1002   |
| Cancelled Room                            | 42     | 44     | 66     | 27     | 31     |
| Total Clinic Rooms Booked                 | 947    | 957    | 1017   | 1062   | 1033   |
| Unused Clinic Rooms                       | 683    | 673    | 613    | 568    | 677    |
| % Clinic Rooms Utilised - RSH: Target 90% | 58%    | 56%    | 62%    | 63%    | 60%    |
| Unutilised Clinic Rooms (%)               | 42%    | 41%    | 38%    | 35%    | 40%    |
| Weekday sessions only                     |        |        |        |        |        |



The percentage of patients that receive their first outpatient appointment in 18 weeks shows statistically significant improvement. The increased clinic utilisation will be a contributing factor.

### ACT

The new process of the 642-outpatient estate improvement meeting will continue, and the template will be ADOPTED.

It is recognised that there is still some work to do with the Centre teams with regards to clinic rescheduling as this has not followed the same trend. Additional focus on cancellation themes will enable further focus for improvement.

Currently working with Intouch to redesign Bookwise to facilitate a robust 642 meeting. This work is in development.