

ACCESS POLICY

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CONSULTATION AND DISTRIBUTION RECORD	
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Distribution:	<ul style="list-style-type: none"> • Corporate Management Team • Operational Management Committee • Planned Care Programme Board

CHANGE RECORD			
Date	Author	Change	Version No.
August 2013	C Dunn		1
Jan 2018	J Park	Reviewed for accuracy against additional new policy document by review team. Policy document added to paragraph 10- (Will be further reviewed once Guidance documentation is received from the Scottish Government)	2
May 2018	Risk Dept.	GDPR statement added into section 3 and updated name of Current Data Protection legislation Act	3
Nov 2019	J Park	Update to communication and References	4
Sept 2023	J Park	Reviewed for accuracy, amendment to contributing authors	5

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1. **INTRODUCTION**

NHS Lanarkshire is required by Scottish Government to deliver a consistent, safe, equitable and patient centred service to Lanarkshire patients within national waiting time standards.

The current waiting time standards are:

- 12 weeks for new outpatient appointment
- 6 weeks for the eight diagnostic tests and investigations
- 18 weeks Referral to Treatment for 90% of patients
- The legal 12 week Treatment Time Guarantee
- 62 day – treatment for all patients referred urgently with a suspicion of cancer
- 31 day – from decision to treat to first treatment

NHS Lanarkshire has complied with the Patient Rights (Scotland) Act 2011 since 1 October 2012. This places a legal responsibility on the NHS Board to ensure that all patients due to receive planned treatment on a day case or inpatient basis receive treatment within 12 weeks of the patient agreeing to the treatment.

2. **AIM, PURPOSE AND OUTCOMES**

The Patient Access Policy sets out the approach that NHS Lanarkshire will follow to book outpatient, day case, inpatient and diagnostic appointments, what patients can expect in terms of advance notification and the number and type of offers of appointment they can expect to receive. It describes the locations from which services are routinely delivered by NHS Lanarkshire. The Patient Access Policy also sets out the implications to the patient of cancelled appointments and also non-attendance at clinic and /or treatment. In addition, it describes actions available to patients when they are dissatisfied with the service that they receive.

NHS Lanarkshire is committed to improving the patient journey and patient experience through improved process, effective use of new technology and through maximising available capacity. Effective communication with patients is essential to achieving that and NHS Lanarkshire will use all available options including letter, email and text to keep in contact with patients. NHS Lanarkshire is therefore committed to communicating effectively with patients, managing referrals and waiting lists effectively and providing information to support improvements in service delivery and service quality

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3. SCOPE

3.1 Who is the Policy intended to Benefit or Affect?

This policy is intended to benefit all patients who are cared for in or receiving services commissioned by NHS Lanarkshire and relates to the Patient Rights (Scotland) Act 2011 and associated documentation contained in the Policy

It also provides NHS Lanarkshire's staff with key principles and actions required to deliver a consistent, safe, equitable and patient centred service to Lanarkshire patients within national waiting time standards.

3.2 Who are the Stakeholders?

The stakeholders are all staff in Lanarkshire involved in all of the elements of the delivery of waiting times across the Acute Services Division, North Health and Social Care Partnership and South Health and Social Care Partnership.

"NHS Lanarkshire take care to ensure your personal information is only accessible to authorised people. Our staff have a legal and contractual duty to keep personal health information secure, and confidential. In order to find out more about current Data Protection legislation and how we process your information, please visit the Current Data Protection legislation Notice on our website at www.nhslanarkshire.scot.nhs.uk or ask a member of staff for a copy of our Current Data Protection legislation Notice."

4. PRINCIPAL CONTENT

4.1 KEY PRINCIPALS OF PATIENT ACCESS POLICY

NHS Lanarkshire has agreed a number of key principles that underpin delivery of the Patient Access Policy and delivery of waiting time standards:

- The patients' interests are paramount.
- Patients will be offered care according to clinical priority and within agreed waiting time standards.
- Patients will be referred to a clinical service and not to a named clinician.
- Patients will be added to a waiting list only if they are available and medically fit for their procedure.
- Patients will be made a reasonable offer. A reasonable offer is a 'package' of at least two dates for all new outpatient appointments and admissions for day case/inpatient treatment.

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- Patients will receive an offer of appointment or admission a minimum of seven days prior to their proposed appointment or admission date. Notice of offers will be made to ensure that no patient is disadvantaged due to their circumstances. E.g. patient with carer responsibilities.
- Where a patient declines two reasonable offers of appointment, the patient will be removed from the waiting list and returned to the referring clinician (normally the General Practitioner), if a clinician has not indicated that a further offer should be made. At least one further offer will be made to urgent cases and children. If the patient remains on the waiting list their waiting time clock will be reset to zero.
- A reasonable offer is viewed as any health service location within the boundary of NHS Lanarkshire, other adjacent NHS Boards, the Golden Jubilee National Hospital in Clydebank and any West of Scotland Independent Sector facility.
- Where a patient does not attend their accepted appointment or admission date, they will be removed from the waiting list if a clinician has not indicated a further appointment is required. At least one further offer will be made to urgent cases and children. If the patient remains on the waiting list their waiting time clock will be reset to zero.
- Where a patient has accepted and cancelled an appointment or admission date on three occasions the patient will be removed from the waiting list.
- Where a patient has been removed from the waiting list the patient and the referring clinician will be notified of the removal and reason for removal.
- All individual periods of unavailability will be documented on the Patient Management System (PMS).
- Patient Advised Unavailability will be applied only where a patient notifies the service of periods of unavailability relating to e.g. work, educational commitments and where a patient requests to be seen in a particular location and/or by a particular consultant.
- Medical Unavailability will be applied where a clinician or member of extended team determines the patient is unavailable for clinical reasons.
- All periods of unavailability will be recorded with a start date, end date and supporting comments. There will be no periods of indefinite unavailability recorded.
- All patients who have unavailability attached will be clinically reviewed within a maximum of twelve weeks with outcome recorded on PMS.

4.2 OFFER OF APPOINTMENT / TREATMENT

NHS Lanarkshire interprets a reasonable offer to be any health service location in Lanarkshire. In addition, a reasonable offer applies to adjacent NHS Boards, the Golden Jubilee National Hospital and to any West of Scotland Independent Sector facility. The vast majority of Lanarkshire patients will receive treatment at their local hospital. However it is not possible for NHS Lanarkshire to provide access locally for all patients and for all services. Patients may therefore be asked to attend for their appointment at other hospital sites and occasionally at sites external to Lanarkshire.

A patient will be considered to have accepted an offer where

- The patient agrees a date offered verbally during a telephone conversation
- The patient phones to confirm a date offered in a written letter
- The patient does not make contact to decline and rearrange a date offered in a written letter within 7 days of the date on the letter. The patient also receives an automated reminder. The reminder service gives the patient an opportunity to confirm or rearrange their appointment.

The service will aim to send a written offer letter 14 days in advance of the proposed appointment / admission date however a minimum of 7 days notice will be given.

4.3 UNAVAILABILITY

Unavailability is the period of time when a patient is considered to be unavailable for appointment or treatment. There are four types of patient unavailability:

- Medical
- Patient Advised
- Patient Requested
- Where a patient does not respond to an invitation to contact the service as part of the patient focused booking process

Where unavailability of any type is applied, the reason will be recorded on the patient management system (PMS).

For a patient with a Treatment Time Guarantee, a communication will be provided that advises the patient that unavailability has been applied and the implications for their in respect of the waiting time guarantee.

4.3.1 Medical Unavailability

Medical unavailability indicates that the patient is unavailable for the appointment or treatment for a known period of time because a clinician has advised that the patient has another medical condition which prevents the agreed treatment from proceeding for that period of time.

4.3.2 Patient Advised Unavailability

Patient advised unavailability indicates that the patient has advised they are unavailable for a period of time. The application of patient advised unavailability can only be made at the request of the patient. Reasons for patient advised unavailability are:-

- Academic Commitment
- Carer Commitment
- Jury Duty
- On Holiday
- Minor Ailment
- Personal Commitment
- Work Commitment

4.3.3 Patient Requested Unavailability

The application of patient requested unavailability can only be made at the request of the patient. Reasons for patient requested unavailability are:-

- Request for named consultant
- Request for a specific treatment location

4.4 Patient Focussed Booking (PFB)

Patient Focused Booking involves a letter to patients inviting them to contact the booking centre for an appointment suitable to them. A patient receives two written invitations to contact the booking centre with a gap of seven days between letters. Where the patient does not respond to the first PFB letter, unavailability (no response to PFB) will be applied from day eight to the date of response to the second / reminder PFB letter.

4.5 EFFECTIVE COMMUNICATIONS WITH PATIENTS

NHS Lanarkshire is responsible for providing patients with clear and accurate information to enable them to make considered decisions in relation to their wait and the Treatment Time Guarantee. This will include a responsibility to advise the patient when a patient is eligible for the Treatment Time Guarantee and if periods of unavailability are applied.

At point of referral, the General Practitioner will advise the patient that they are being referred to a specific specialty and that they will receive a communication from NHS Lanarkshire with details of the outpatient appointment date, time and location. In situations where patients will receive their care external to Lanarkshire, the patient will be contacted directly by the provider. This will be another NHS Board, the Golden Jubilee National Hospital and/or a West of Scotland Independent Sector provider.

The patient should also be asked if they are prepared to accept a short notice appointment and in such circumstances to indicate the most appropriate method of contacting the patient. This is to utilise all available capacity in event of short notice outpatient cancellations. Acceptance of a short notice appointment will be deemed a reasonable offer of appointment. The patient will not be disadvantaged if they refuse an offer of a short notice appointment.

Patients will be responsible for:

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- Informing their General Practitioner and the hospital contact number if their condition improves and that their appointment is no longer required. This will apply to both new and return patient appointments.
- Contacting the hospital contact number timeously if they are unable to attend their agreed appointment. This will include holiday and/or work commitments.
- Contacting the hospital contact number to advise of any periods of unavailability. This could be provided at point of GP referral to enable that to be factored into the patient booking process. This information will in time be captured as part of electronic referral process subject to all General Practitioners asking the question of patients.
- Providing details of mobile phone and email address to improve future patient communication options.
- Advising their General Practitioner and hospital contact number of any changes to name, address, postcode, telephone number or General Practitioner.

NHS Lanarkshire responsibilities:

All General Practitioners should refer electronically, using available clinical protocols, for new outpatient appointments. NHS Lanarkshire will extend the facility to other referring sources as required.

NHS Lanarkshire has a telephone and text service that reminds patients of their appointment and can advise them of the action that they should take if no longer able to attend their appointment. This will be in line with the Patient Access Policy for cancellation. It is designed to minimise lost capacity due to patients not attending for appointment with no advance notification of their non-attendance.

Clinical staff will provide written communication to the patients at the outpatient appointment outlining the next steps in their clinical process and informing them of Treatment Time Guarantee where treatment has been agreed.

The patient will receive, in writing, notice, that unavailability has been applied and inform them of the impact on the Treatment Time Guarantee.

4.6 EFFECTIVE MANAGEMENT OF REFERRALS

4.6.1 Outpatients

The majority of new outpatient referrals are received by and booked by the Referral Management Service (RMS).

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General Practitioners are asked to refer to a clinical service and not named consultant unless there is a clear clinical reason for so doing (to be recorded). General Practitioners will take regard of the NHS Lanarkshire aesthetic policy and only refer appropriate patients to Secondary Care. In addition, they will take regard of agreed patient pathways/protocols where patients are in the first instance referred to a specialist nurse and/or physiotherapy or other Allied Health Professional service. This will also include referral of patients for diagnostic test prior to referral for first out-patient appointment.

General Practitioners have the opportunity to attach urgent or routine status to a new patient referral. In addition, General Practitioners will use the pathway referral for 'suspicion of cancer' that ensure patients are seen quickly and are channelled to the most appropriate path and seen by the most appropriate clinician. This will ensure that patients are treated within the 31 and 62 day national cancer waiting time standards. General Practitioners will have electronic access to patient details where referrals have not been accepted by Secondary Care. This will also apply to patients who do not keep their appointments.

All referrals will include the following details:

- CHI identifier
- Name/Address/Postcode/Ethnicity
- Home and Mobile Telephone Number
- Email address
- Patient Periods of Unavailability
- Armed Services Veteran Status
- Any Support Needs (e.g. disabled/interpreter)
- Status of referral (routine/urgent/suspicion of cancer)

All outpatient referrals received by RMS are processed within three working days and placed on the vetting list for each specialty. This captures patient details on the Patient Management System (PMS). The consultant (or nominated deputy) will electronically vet all referrals placed on the vetting list within seven working days. They will select the most appropriate vetting option to inform out-patient booking.

When a member of the UK armed forces or a member of their family moves into a new location in Lanarkshire, NHS Lanarkshire will take into account any previous waiting time. NHS Lanarkshire will ensure that treatment is delivered within the waiting time standards and treatment time guarantee (according to their clinical need). This is dependent on NHS Lanarkshire being advised of previous waits for appointment/procedure. In addition, all veterans (including those who have served as reservists) will receive priority access to NHS primary, secondary and tertiary care for any conditions that are likely to be related to their armed forces service and according to their clinical need.

The standard is that all new outpatients will be booked within twelve weeks. Urgent referrals will be seen within a maximum wait of six weeks (42 days) with 'suspicion of cancer' referrals seen within two weeks (14 days).

RMS will contact patients to advise them of the date/time/location of their appointment. Where the patient contacts RMS indicating that the appointment is unsuitable, the patient will be offered a new appointment within the guarantee date.

The consultant or appropriate clinician will capture the outcome of each outpatient appointment on Trakcare. Patients will only receive a return review appointment if there is a clinical need. Patients returning for treatment will receive a return appointment on their day of first appointment. A Planned Review list has been established in a few specialties where patients will not receive a return appointment on the day of their first appointment but will be contacted at a later date to agree an appointment date. This will be done in advance of the time period for a review appointment (as determined by the consultant).

A daily check will be undertaken to ensure that outcomes are captured for all patients who attend an outpatient appointment. This will apply also to the arriving of patients. Where patients do not attend (DNA) their appointment and no prior notification has been provided, and there is no clinical reason for a further offer to be made, the patient will be taken off the waiting list and returned to their General Practitioner.

4.6.2 Day Cases/Inpatients

The decision to treat the patient will normally be taken at first outpatient appointment. Initial consent to treatment will be sought at this time. An agreement that a day case or inpatient procedure is required will result in the patient being automatically placed on the day case waiting list. This will only be done if the patient is medically fit and available for treatment. The consultant will advise the patient of their decision and, if required, ask them to agree a date for pre assessment. This will be done on the same day and the patient will attend outpatient reception for a pre assessment appointment. At pre assessment a decision will routinely be taken whether the patient is fit for the procedure and whether it will be undertaken as a day case or inpatient procedure. Any exception to that will be agreed with the individual specialty.

The patient will also be advised of the offer process and that the procedure might be undertaken external to Lanarkshire. They will also be reminded of the waiting time guarantee and their legal right to receive treatment within twelve weeks (84 days) of agreeing to treatment. A patient should receive an offer 14 days in advance and no less than 7 days prior to the treatment date. If the date is unsuitable, the patient will be offered a further date. Where two reasonable offers are not accepted, the patients' clock will return to zero, with the exception of clinical urgent patients and children. The process of two reasonable offers will recommence or the patient may be removed from the waiting list and returned to referring clinician.

There will be visibility of waiting lists by specialty and consultant with a requirement for patients to be seen, where appropriate, in sequence. It is acknowledged that some patients will be taken out of sequence due to clinical need and maximisation of available capacity.

4.7 USE OF EXTERNAL CAPACITY

NHS Lanarkshire considers an appointment to the Golden Jubilee National Hospital and the West of Scotland Independent Sector as representing a reasonable offer. Where patients are referred to these locations, a minimum data set will be agreed and provided to the receiving hospital. Where patients are referred externally on a 'see and treat' basis, patients will be advised of the communication arrangements operated by the receiving hospital. The receiving hospital will be asked to deal directly with the patient on all appointment transactions with patient updates provided to NHS Lanarkshire at agreed intervals. Details of those arrangements will be captured as part of a Service Level Agreement with the Golden Jubilee National Hospital and contract documentation with the West of Scotland Independent Sector. Where patients are referred to the Golden Jubilee National Hospital or West of Scotland Independent Sector for treatment only, similar arrangements will apply. Details will form part of Service Level Agreement and/or contract documentation.

Where the patient is treated out with the NHS Lanarkshire Board area, the patient may claim for costs reasonably incurred. This would represent costs additional to those had treatment been delivered in NHS Lanarkshire. Claims by patients to recover costs reasonably incurred will be channelled to the Head of Finance, NHS Lanarkshire, Kirklands Hospital, Bothwell G71 8BB.

4.8 BREACH OF THE TREATMENT TIME GUARANTEE

Where the NHS Lanarkshire breaches the guarantee, they will offer the patient the next available appointment having regard to the patient's availability. This offer of appointment will not be detrimental to another patient with a greater clinical need for treatment. The patient will be provided with a letter explaining of why the NHS Board did not deliver the treatment time guarantee. At this point the patient will be provided with details of the advice and support available including the Patient Advice and Support Service and on how to give feedback or raise a complaint.

4.9 FEEDBACK FROM PATIENTS AND THE WIDER COMMUNITY

Patients have the opportunity to raise issues associated with the services that they receive. If they are dissatisfied they should in the first instance raise the issue with those staff with whom they have been involved or been in contact. If they remain dissatisfied, details on how they can make a complaint can be found at www.nhslanarkshire.org.uk/contactus/feedback or in the information leaflet 'Making a Complaint about the NHS' available in wards and departments.

4.10 OTHER DOCUMENTATION

The NHSL Patient Access Policy should be read in conjunction with the following documents:

- NHS Scotland National Access Policy – July 2012
- NHS Scotland Waiting Time Guidance – Delivering Waiting Times (CEL 33 August 2012)
- Patient Rights (Scotland) Act 2011 - Treatment Time Guarantee Guidance (CEL32 August 2012)
- NHS Lanarkshire Policy and Procedures on Feedback, Comments and Complaints
- The Patient Rights (Treatment Time Guarantee) (Scotland) Regulation 2012
- Effective Patient Booking Guidance
- Armed Force CEL 8 (2008), Armed Forces CEL 3 (2009), Armed Forces CEL 39 (2010) Adult Exceptional Aesthetic Protocol CEL 27 (2011)
- The Patient Rights (Treatment Time Guarantee) (Scotland) Amendment Regulations 2014
- The Patient Rights (Treatment Time Guarantee) (Scotland) Directions 2019

4.11 EXCEPTIONS TO THE TREATMENT TIME GUARANTEE

There are exceptions to the Treatment Time Guarantee. These are:

- Assisted Reproduction
- Obstetric Services.
- Organ, tissue or cell transplantation whether from living or deceased donor.

4.12 PATIENT ACCESS POLICY REVIEW

The Patient Access Policy will be reviewed at regular intervals or when further National Amendments Direction Guidance become available and updated as appropriate.

5. ROLES AND RESPONSIBILITIES

Roles and responsibilities are outlined through their existing Job description for NHS Lanarkshire staff including clinical, managerial and administration from a whole system perspective from referral to treatment..

This is supported by training material e.g. learnpro modules and business rules developed within the patient management system.

6. RESOURCE IMPLICATIONS

The application of the policy is through existing operational management structures and staff roles and responsibilities.

7. COMMUNICATION PLAN

Formal communication through the Corporate Management Team and cascaded to all staff disciplines through the operational management teams for Acute Services Division, North and South Health and Social Care Partnerships

Medical and Nursing Directors to cascade to Divisional Medical Directors and Deputy Nursing Directors too disseminated to all clinicians

Policy will be available to all staff and members of the public through MHS Lanarkshire external and internal websites.

8. QUALITY IMPROVEMENT – Monitoring and Review

In Lanarkshire Capacity Planning and Waiting Times Meetings are under taken across Acute Division and the Joint Integration Boards.

In the North and South performance around waiting times will be looked at in the Performance and Scrutiny sub committee of the Joint Integration Board and will also report to NHS Lanarkshire Board via the Planning Performance Resource Committee (PPRC)

9. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

This policy meets NHS Lanarkshire's EDIA. A completed copy has been sent to hina.sheikh@lanarkshire.scot.nhs.uk

(tick box)

10. Summary or Frequently Asked Questions (FAQs)

Please ensure you send a summary of your policy or a frequently asked questions with your completed policy

11. REFERENCES

The NHSL Patient Access Policy should be read in conjunction with the following documents:

- NHS Scotland National Access Policy – July 2012
- NHS Scotland Waiting Time Guidance – Delivering Waiting Times (CEL 33 August 2012)
- Patient Rights (Scotland) Act 2011 - Treatment Time Guarantee Guidance (CEL32 August 2012)
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- The Patient Rights (Treatment Time Guarantee) (Scotland) Regulation 2012
- Effective Patient Booking Guidance
- Armed Force CEL 8 (2008), Armed Forces CEL 3 (2009), Armed Forces
- CEL 39 (2010) Adult Exceptional Aesthetic Protocol CEL 27 (2011)
- The Patient Rights (Treatment Time Guarantee) (Scotland) Amendment Regulations 2014
- The Patient Rights (Treatment Time Guarantee) (Scotland) Directions 2019

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