Clinic Cancellation Escalation Procedure

<table>
<thead>
<tr>
<th>Issue Date</th>
<th>Review Date</th>
<th>Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2019</td>
<td>November 2021</td>
<td>6</td>
</tr>
</tbody>
</table>

Purpose

To ensure consistency across Service Lines in escalation of non exceptional circumstance clinic cancellation requests.

Who should read this document?

This procedure is applicable to all employees within the Trust involved in the booking and cancellation of Outpatient Clinics.

Key Messages

- Consistent escalation process for Outpatient Cancellations outside of Policy.
- Documented process flow to follow when required.

Core accountabilities

Owner: Outpatient Performance Manager

Review: OPDG

Ratification: Chief Operating Officer

Dissemination: OPDG

Compliance: Chief Operating Officer

Links to other policies and procedures

Trust Access Policy - Effective management of Capacity and Rotas
Staffnet>TrustDocs>HealthCareGovernance>AccessPolicyforPlannedCareServices

Leave Policy for Medical & Dental Consultants on the new 2003 contract & SAS Doctors
http://staffnet.plymouth.nhs.uk/LinkClick.aspx?fileticket=4kgf_copoQQ%3d&portalid=1

Version History

1. March 2017 Reviewed and approved by OPDG
2. March 2017 Reviewed and approved by OPDG
3. March 2018 Minor amendment
4. September 2018 Minor amendment – added Change of Purpose to exceptional circumstances – Section 5
5. March 2019 Minor Amendment
6. November 2019 No Updates needed

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless
of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents on StaffNET. Larger text, Braille and Audio versions can be made available upon request.

Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Definitions</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Regulatory Background</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Key Duties</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>Procedure to Follow</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>Document Ratification Process</td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>Dissemination and Implementation</td>
<td>5</td>
</tr>
<tr>
<td>8</td>
<td>Monitoring and Assurance</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>Reference Material</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Appendices</td>
<td>6</td>
</tr>
</tbody>
</table>
Standard Operating Procedure (SOP)
Clinic Cancellation Escalation Process

1 Introduction
The CQC have noted that the Trust currently cancel a significant amount of clinics for the reasons of Annual Leave (within 6 weeks), Study Leave (within 6 weeks) or ‘no reason’, amongst others. Leading to an action for the Trust to reduce the number of cancelled clinics and record the reasons why. The Performance team have developed a report and frequently update service lines on clinics that have been cancelled, in particular those with ‘no reason’ or an incorrect ‘Theatre’ reason selected to ensure the Trust has accurate information to understand rationale and areas of best and worst practice for clinic management. From this, the Performance team have reviewed the clinic cancellation reasons and process for which cancellations of clinics outside of policy should adopt.

2 Definitions
The purpose of this procedure is to strengthen and formalise the escalation process for clinics that are to be cancelled outside of exceptional circumstances in less than the required notice periods (dependant on clinic type).

This procedure has been produced and agreed in partnership between Care Group Managers and representatives of the Executive Team.

3 Regulatory Background
OAC - Outpatient Appointment Centre.
Booking teams – Any area within the Service Line that is responsible for processing booking requests.
APN – Administrative Procedure Note.
OPDG - Operational, Performance and Delivery Group

4 Key Duties
Managers have a duty to ensure that Capacity Plans, Reconciliation of Job Plans and Clinical Rotas are prepared, reviewed and monitored frequently to ensure that clinics run as necessary to meet Patient needs and minimise the disruption to clinical, administration and patient time wherever possible. Cancellation of clinics outside of exceptional circumstances is a last resort.

Care Group Managers have a duty to ensure that support is provided to Managers and appropriate escalation availability and awareness is provided.

OAC/Booking Teams have a duty to ensure that all requests are processed in sufficient timescales and Service Lines are informed of when clinics have been cancelled and escalate non adherence to the respective Cluster Manager and Care Group Manager.
Procedure to Follow

The Trust's Access Policy refers to effective management of Capacity and Rotas and also refers to the Leave Policy for Medical & Dental Consultants on the new 2003 contract & SAS Doctors – section 4.2 refers to notice periods for requesting leave and in particular Section 4.5 refers to Service Line Director Approval for non-compliant requests. The process flow confirms the exact process to adopt when deciding whether to cancel an Outpatient clinic and is appropriate to all areas of the Trust that book Outpatient appointments whether through the OAC (Outpatient Appointment Centre) or within their own booking teams:

* Exceptional circumstances are defined as:
  - Capacity not required
  - Change of Purpose
  - Unplanned Sickness
  - Bereavement
  - Short notice military deployment
  - Attendance at court
  - Short notice paternity leave
  - Junior Doctor Interview commitments
  - Industrial Action

Service Line receive a request/have a requirement to cancel an Outpatient Clinic

Service Line refer to APN and Access Policy for leave/cancellation request and review existing capacity and rotas to establish if clinic(s) can be covered.

If established that Clinic needs to be cancelled in less than suitable notice period according to APN and is not an exceptional circumstance*, complete Clinic Cancellation form and submit to Cluster Manager via Service Line Manager with rationale for review and sign off.

If declined, Cluster Manager confirms to Service Line Manager and alternative arrangements are put in place to ensure Clinic proceeds.

If established that clinic needs to be cancelled and exceptional circumstance* criteria met or more than suitable notice period according to APN, Service Line sends cancellation form to OAC/Booking team.

OAC/booking team receive clinic cancellation request form from Service Line

OAC/booking team to ensure given suitable notice or, if less than suitable notice in exceptional circumstances or appropriate sign off is received. If not appropriately signed off, OAC TL to forward direct to Cluster Manager and cc Care Group Manager to ensure correct process is followed. If appropriately signed off, OAC/booking team to place clinic on hold and cancel or reschedule the patients within the clinic/session as instructed. Cancel the clinics/sessions on IPM via Clinic Diary ensuring the appropriate reason has been selected.

OAC/booking team notify Service Line that the clinic cancellation request form has been completed.
6 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of one year from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by the OPDG and ratified by the Chief Operating Officer.

Non-significant amendments to this document may be made, under delegated authority from the Chief Operating Officer, by the nominated owner. These must be ratified by the Chief Operating Officer.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades that are directly affected by the proposed changes.

7 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust’s formal documents library and all staff will be notified through the Trust’s normal notification process, currently the ‘Vital Signs’ electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Director and for working with the Trust’s training function, if required, to arrange for the required training to be delivered.

8 Monitoring and Assurance

- The Performance and Information team will monitor the amount of clinics that have been cancelled within and outside the respective notice periods and work with the respective Service Lines to understand and help improve overall Outpatient Clinic delivery and provision.

- Monthly reports will be submitted to Service Lines confirming cancellation reasons and appropriate action taken by Service Lines will be requested to ensure this is reviewed.

- Where there are shortfalls in performance, these will be escalated to the relevant Care Group Manager.

It is anticipated that as a result of adherence to this procedure the number of Outpatient Clinics being cancelled outside of exceptional circumstances will reduce and support improvements in Service Lines on how to manage Clinic demand and provision.
9 Reference Material

- Trust Access Policy - Effective management of Capacity and Rotas
- Leave Policy for Medical & Dental Consultants on the new 2003 contract & SAS Doctors Key legislation

Appendix

Required documentation

Clinic Cancellation Form:

G:\ClinicalAdminOMC\OAC clinic cancellation form.xlsx