

Reference:	FOI.8536.22
Subject:	Patient Initiated-Follow Up (PIFU)
Date of Request:	21 March 2022

Request and response:

Please could I make a Freedom of Information Request regarding your organisation's use of Patient Initiated Follow-Up (PIFU), which gives patients and their carers the flexibility to arrange their follow-up appointments as and when they need them. PIFU is sometimes also referred to as open-access follow-up, patient led follow-up, patient triggered follow-up, see on symptom, open appointments, open-self referral appointments or patient-activated care.

1. Please complete the below table, providing figures in relation to the number of patients waiting to start consultant-led Referral to Treatment (RTT), outpatients and Patient Initiated Follow-up (PIFU), which gives patients and their carers the flexibility to arrange their follow-up appointments as and when they need them.

Please could I clarify that regarding question Q1 (outpatient numbers) I can confirm I am asking for the total number of outpatients waiting at the end of February 2022, inclusive of those waiting for treatment or a follow-up.

Hywel Dda University Health Board (UHB) is unable to provide you with all of the information requested for question 1, as it is estimated that the cost of answering your request would exceed the "appropriate limit" as stated in the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004. The "appropriate limit" represents the estimated cost of one person spending 18 hours (or 2 ½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with the number of outpatients eligible and offered to go on a PIFU pathway, the UHB would need to undertake a manual search of approximately 66,000 patients' follow up records, to identify the information requested, as it is not recorded centrally.

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (FoIA), which provides an exemption from a public authority's obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under Section 16 of the FoIA, we are required as a public authority, to provide advice and assistance so far as it is reasonable, to individuals who have made a request under FoIA and therefore, the UHB provides the available accessible data it holds.

The UHB provides, within the table below, as requested, the number of patients waiting to start consultant-led Referral to Treatment (RTT), outpatients and Patient Initiated Follow-up (PIFU), as at 28 February 2022.

As at February 2022	Total Number of Patients
Total number of RTT patients waiting to start treatment	57,564
Total number of outpatients	123,984

Of those outpatients, how many are eligible to go on a PIFU pathway	Section 12 exemption applied
Of those eligible, how many have been offered to go on a PIFU pathway	Section 12 exemption applied
Of those offered, how many are currently placed on a PIFU pathway	Since Seen On Symptoms (SOS)/PIFU pathways were introduced in September 2020, a total of 6,942 patients have been put onto a SOS pathway and 3,698 have been put onto a PIFU pathway. Of those, 242 (2%) have returned for a further review.

2. Are all outpatients included in the RTT patient numbers? Yes/no

The UHB confirms that yes, all outpatients are included in the RTT patient numbers.

3. Does your organisation currently have technology in place to accommodate PIFU pathways? For example, a patient engagement tool for booking PIFU appointments etc.

- Who is the supplier of the system?
- Please provide further detail on how the technology supports PIFU

The UHB confirms that it does not have specific technology in place, as no technology will be able to undertake clinical risk assessments effectively. However, when a patient is put on a SOS or PIFU pathway, they are provided with a telephone number and if the patient makes contact, the clinician will triage the patient and decide on the course of treatment required. Depending on clinical risk, a patient will be added to an urgent or follow up clinic or a future appointment is issued utilising the UHB's Welsh Patient Administration System (WPAS).

4. Does your organisation have a clinical task management tool to support PIFU which aids escalation and intervention for patients that could be lost to follow-up or their circumstances have changed

- Who is the supplier of the system?
- Please provide further detail on how the technology supports PIFU
- What job role is responsible for making purchasing decisions around task management software at your organisations? E.g. Chief Operating Officer, Chief Information Officer

The UHB confirms that it does not have a specific clinical task management tool to support PIFU, as no electronic system will be able to clinically validate whether a patient should or should not remain on a PIFU. However, patients are recorded as discharged to a SOS or PIFU on the UHB's WPAS and patients on a follow up list are tracked by their target date. Patients on a PIFU are kept on the system for two (2) years and if they have not made contact, then they are clinically reviewed and removed, if requested by the clinician. These processes are built into staff job plans.

5. Does your organisation have an employee or team whose role is involved in administering/co-ordinating PIFU? If yes, please state the number of FTEs involved in PIFU.

The UHB confirms that yes, it does have a 37.5 hours' Full Time Equivalent Digital Design Project Manager that leads on all SOS/PIFU work streams.

6. Please complete the table for each of the specialties listed:

The UHB has completed the table below as requested.

Specialty	How many days a month were outpatient clinics run in February 2022?	What specialties are PIFU currently implemented in? (tick for yes)
Mental Health	20	
Cardiology	20	√
Dermatology	28	√
Diabetes	20	
Endocrinology	19	√
Gastroenterology	21	√
Geriatric Medicine	20	√
Gynaecology	21	√
Hepatology	0	
Neurology	22	√
Oncology	21	√
Ophthalmology	22	√
Palliative medicine	4	
Paediatrics services	23	√
Physiotherapy	28	
Rehabilitation	20	
Renal medicine	0	
Respiratory	20	√
Rheumatology	20	√
Colorectal surgery	21	√
Breast Surgery Service	20	√
Ear, Nose and Throat	22	√
General Surgery	20	√
Orthopaedics and Trauma	20	√
Orthoptics	20	
Pain management	16	√
Plastic surgery	0	
Thoracic medicine	0	
Urology	20	√
Vascular surgery	13	√
Audiology Service	0	
Other	0	

7. How is your organisation measuring the impact of PIFU in these specialties? e.g., size of waiting list, number of weeks patients are waiting for treatment, number of outpatient attendances.

The UHB confirms that the numbers are reported monthly to Welsh Government (WG) as per the WG Outpatient Transformation Key Milestone. The numbers are also monitored at the UHB's bi-monthly Outpatient Department (OPD) Delivery Board, with weekly performance meetings held with all services, and waiting list volumes are monitored daily via the Patient Tracking list for both RTT and follow up.

8. Has the implementation of PIFU reduced the operating hours of outpatient clinics? if so, by what percentage since implementation.

The UHB confirms that the implementation of PIFU has not reduced the operating hours of outpatient clinics; this is due to the high demand. PIFU is a useful tool in reducing unnecessary appointments and maximising limited capacity within OPD.