

VANGUARD: Better Care Together

Case study:

Advice and Guidance

The screenshot displays the 'Advice & Guidance' web interface. At the top, there is a blue header with the 'Advice & Guidance' logo and the 'University Hospitals of Morecambe Bay NHS Foundation Trust' logo. Below the header, the interface shows a conversation window. The patient's name is John Smith, NHS Number is NHS123-456-7890, DOB is 01/01/1970, and Sex is Male. The subject is 'Neurology - Initiated: 14/11/2012 13:54 - Status: Open (Responded)'. The GP's question is: 'Patient is presenting with symptoms of severe migrains sporadically. Patient has a history of migrains and states that three close family members have been diagnosed with brain tumours in the last 5 years. Patient has mentioned they are under a particularly high level of stress at the moment both at work and at home. I've advised the patient to try to reducing their stress levels however given the family history of brain tumours, should I refer to UHMB for further investigation?'. The specialist's response is: 'Given the family history I would advise referring the patient to the neurology department as a routine referral to conduct further investigations'. At the bottom, there are buttons for 'Send Message' and 'Mark Conversation as Closed'. A feedback form is also visible in the bottom right corner, asking for feedback on the service.

Purpose:

Advice and Guidance is a scheme offering GPs advice from hospital specialists when they would like a second opinion as to whether to refer a patient to a hospital specialist (e.g. a hospital consultant).

The Advice and Guidance scheme was introduced as a pilot in Garstang, Lancashire, in 2014 and has now expanded to cover 16 specialties across the Morecambe Bay area, including Cardiology, Care of the Elderly, Diabetes, Ear Nose and Throat, Gastroenterology, Gynaecology, Paediatric, Radiology, Rheumatology, Trauma & Orthopaedics and Urology.

It aims to stop needless travel for patients, keep patient care closer to home where possible and shorten the patient pathway where appropriate.

An additional aim is to improve integrated working and communications between primary and secondary care clinicians.

How it works:

It offers the opportunity for GPs to seek advice via an electronic “conversation” with a hospital consultant when they have a query regarding the best next step.

GPs post their query electronically and can expect to receive guidance from a hospital specialist within five working days.

	<p>The conversation continues, until the GP is satisfied that their question has been answered and the conversation is then closed by the GP, who can then discuss the advice and guidance received from the hospital consultant with the patient.</p>
<p>Success so far:</p>	<ul style="list-style-type: none"> • 16 'Live' Specialities benefitting from this service • Rolled out the scheme across North Lancashire and South Cumbria with only one GP practice left to join. • 2015/16 – 2565 conversations commenced year to date • Of the 1361 patients who would have been directly referred into secondary care 475 outpatient appointments were avoided (35%). • 3 hospital admissions were avoided as a result of the specialist advice received. • Improved patient experience by reducing unnecessary hospital journeys for them • Remote approval for some diagnostic tests means avoiding some unnecessary first appointments • Interest from external organisations on how the system could support the wider health economy is boyant
<p>Lessons learnt:</p>	<ul style="list-style-type: none"> • Advice and Guidance is not suitable for urgent referrals • The system has been well-received and has been developed as a result of feedback received from the early pilots. • The scheme is being evaluated on a monthly basis to continue to gauge the impact. • Now need to replicate this success across all GP practices and all relevant specialties
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