

GP Links

Bi-monthly newsletter

January 2016

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Health partners join forces to improve frailty services

A partnership between UCLH, The Whittington and primary care providers in Islington is helping to improve integrated frailty services for older people.

Around 40 per cent of older patients attending UCLH come from the Islington area, with a larger proportion of older Islington patients attending The Whittington. Since 2014 UCLH and Whittington Health have been working more closely together after Islington CCG commissioned an integrated care service for older people in the community.

The service is a multidisciplinary, integrated community ageing team (ICAT), whose key goal is to develop a frailty service for Islington residents with the aim of improving patient experience, outcomes and a shift of care from acute settings into the community.

Dr Nadia Raja, UCLH's lead clinician for medicine for the elderly provides consultant input into the team which involves working closely with geriatricians from Whittington Health and a GP with a special interest in frailty.

Dr Raja said: "With older patients in the area attending either UCLH or The Whittington, it makes sense for us to have a shared strategy to provide coordinated patient care which delivers good outcomes.

"We've been able to provide specialist support to nursing homes in Islington - there's evidence nationally that we need to support those services more, with the aim of improving advance care planning in these settings."

Dr Ruth Law, ICAT clinical lead, said: "We now have the resources to actively help and manage care for frail older people in the community, with much greater interaction between hospital and community teams. If patients do need to come in to hospital those links with community colleagues means we're benefiting from greater awareness and knowledge of patients, and assurance around how their care is continued after discharge."

Islington CCG operates regular multi-disciplinary team (MDT) conferences to bring together clinicians from community, mental health and hospital teams, along with social services and the third sector. The MDTs mean local health services can identify which patients need to be prioritised and how the teams will jointly meet patients' needs.

Contact: Nadia Raja, lead consultant, nadia.raja@uclh.nhs.uk, 020 3447 9910.

Phone numbers reminder:

UCLH's dedicated GP switchboard number is **020 3447 9000**.

University College Hospital Referral Contact Centre:

Tel: 020 3447 9393

Fax: 020 3447 9354

uch.appointments@uclh.nhs.uk

GP web app

Call UCLH services direct from your smart phone or tablet: www.uclh.nhs.uk/mobile

Written referrals for University College Hospital

For written referrals please address your letter to:

University College Hospital (Name of consultant/specialty) Referrals Contact Centre

Ground Floor North
250 Euston Road
London NW1 2PG

Please remember to include patient contact details in ALL written referrals to the hospital.

This is important under our booking system as we need to be able to contact the patient.

If you have queries about any of the articles in GP Links, contact Communications Unit
2nd Floor Central
250 Euston Road
London NW1 2PG

Tel: 020 3447 7542

UCLH.gpqueries@nhs.net

www.uclh.nhs.uk/GPs

Severe Asthma Service at UCLH

UCLH is running a severe asthma service for patients who need extra help to manage their condition.

Around five percent of the nearly five million asthmatics in the UK have symptoms that are not controlled by standard inhaled treatments.

These patients are at risk of asthma attacks requiring steroid tablets, hospital admissions, or in over 1000 cases every year of death from asthma. Many run into side effects from long term use of oral steroids including osteoporosis, diabetes, hypertension and weight gain.

Excitingly we now have monoclonal antibody treatment that can greatly reduce the morbidity suffered by these patients, and can reduce their need for oral steroids.

Currently we have Omalizumab, an antibody that blocks the allergic cascade and can reduce the frequency of asthma attacks and requirement for steroids by more than 50%.

Soon we will have other biologics. Clearly it is important to confirm diagnosis and adherence with inhalers

before using these new agents.

We now know that different asthma patients have different patterns of airway inflammation, so it is important to fully characterise these before selecting who to treat with potentially expensive biologics in order to optimise outcomes.

For example only those with allergic asthma and a certain blood level of allergic antibodies might benefit from omalizumab (anti-IgE), whereas others might benefit from intervention in a different pathway such as Mepolizumab for eosinophilic disease which should be later this year.

The UCLH team includes two consultant physicians, a dedicated clinical nurse specialist, a physiotherapist, a dietician, a psychologist and a pathway coordinator.

The team works closely with the allergy and rhinology department at the Royal National Throat Nose and Ear Hospital and the senior respiratory pharmacist at UCLH as well as key related specialties including

rheumatology, gastroenterology and bariatrics.

After outpatient review selected patients are invited to attend for two day case visits: one to the RNTNEH for CNS, psychology, allergy and ENT assessment, the other at UCLH for CT scan, lung function and physiotherapy input. Results are discussed at our MDT, where a treatment plan is suggested for later discussion with the patient.

We are happy to assess:

- > adults (16 and over)
- > uncontrolled asthma (2 or more courses of prednisolone in the last year)
- > the diagnosis is in doubt after spirometry and assessment of bronchodilator reversibility
- > after hospital admission or two or more A&E visits.

Contact: Rachel Parratt, asthma service pathway coordinator, rachel.parratt@uclh.nhs.uk, 020 3447 8067, 020 3447 9476 (fax).

You said...	... we did
A GP contacted the liaison team to say they had not received a discharge summary.	Patient's details were taken and discharge summary sent to practice via an nhs.net account. This was resolved on the same day.
A GP contacted the liaison team to set up access for the GP Portal system as they were having trouble using the online form.	The liaison team took their details and set up access for the GP. In addition we asked the practice manager if they wanted other GPs to have access and a list of further GPs was sent to us so we could process access on their behalf.
A GP phoned to request information regarding their patient's management plan. The consultant had initially phoned the patient to explain this but was cut off half way through the conversation. The patient was then unable to contact the consultant so the GP phoned on the patient's behalf.	The liaison team sent the latest correspondence to the GP who was able to relay the management plan back to the patient.
A GP emailed the liaison team as they had forgotten their password to their GP Portal account and access was blocked after three unsuccessful tries.	The liaison team unblocked the GP's account on the same day and explained that in future they could either reset their password themselves or change their password to a more memorable one after logging in.
Several GPs asked if we could change our query email to a nhs.net email.	We have set up UCLH.gpqueries@nhs.net and for the next six months we will continue to monitor the previous gpqueries@uclh.nhs.uk email to help the transition.
A GP contacted the liaison team chasing an imaging report for their patient.	Patient's details were taken and latest imaging correspondence was sent via an nhs.net account. This was resolved on the same day. GPs should expect a 14 day turnaround time.

Contact: Renato Celani, GP liaison coordinator, renato.celani@uclh.nhs.uk, 020 3447 5522.

Waiting times for autonomic service reduced

Waiting times for the autonomic service at the National Hospital for Neurology and Neurosurgery are back to normal, with new patient clinic appointments scheduled within four to six weeks and diagnostic assessments within two to four weeks.

The reduction in waiting times is due to reconfiguration and investment in the service which has seen the appointment of new consultants, nurses and clinical autonomic scientists and autonomic clinics being held daily.

The consultants working in the Autonomic Unit are Dr Gordon Ingle, Dr Valeria Iodice and Dr Ellen Merete Hagen. The unit offers a team service and care of patients will pass to another team member when a consultant leaves the service.

Autonomic symptoms are common, either as part of primary autonomic disorders, or as a feature of other illnesses. Multidisciplinary assessment in the unit can be useful in making clear diagnoses and putting together treatment plans.

The unit provides a comprehensive clinical service (combining both investigation and management) for a

wide variety of autonomic conditions, with symptoms such as collapses, light headedness, fatigue, palpitations, sweating disorders, bowel and bladder symptoms, including:

- > Pure Autonomic Failure
- > Autonomic dysfunction complicating Parkinson's disease
- > Multiple System Atrophy (MSA)
- > Autonomic neuropathies (e.g. amyloidosis and diabetes)
- > Autoimmune autonomic ganglionopathies
- > Autonomic dysfunction in spinal cord injury
- > Neurally-mediated syncope (vasovagal, carotid sinus hypersensitivity and situational e.g. swallow, micturition syncope)
- > Postural tachycardia syndrome (PoTS)
- > Sweating dysfunction (including hyperhidrosis, compensatory hyperhidrosis and anhidrosis)
- > Holmes-Adie Syndrome, Harlequins Syndrome, Ross' Syndrome
- > Familial Dysautonomia

A typical patient journey through our services might include:

- > A consultant-led outpatient clinic –

we assess up to 20 new patients per week with suspected intermittent and chronic autonomic dysfunction.

- > Specialist autonomic investigations – up to 35 patients per week are assessed in our dedicated autonomic laboratory (as outpatients, day cases or inpatients).
- > Consultant and nurse specialist led follow up autonomic clinic – there is clinical review of up to 40 patients per week.

For chronic conditions we look to share care with GPs and other specialists to enable patients to manage their conditions themselves within the community.

Referrals should be in writing, addressed either to a specific consultant or to the team at the Autonomic Unit, The National Hospital for Neurology and Neurosurgery, Queen Square, London WC1N 3BG.
Contact: Katharine Bleasdale-Barr, Principal Clinical Autonomic Scientist, katharine.bleasdale-barr@uclh.nhs.uk, 020 3448 3737.

Care of Surgical Patients Survey

Are you a GP who has referred patients to UCLH for surgery? One of our anaesthetists wants to hear from you. James Wight is conducting research into GPs' experiences of caring for surgical patients before and after planned operations.

The researcher is particularly interested in the care of "high risk" patients. Currently, high risk surgical patients account for 15% of surgical procedures, but over 80% of postoperative deaths in the UK.

He would like to hear from any GP who refers patients to UCLH to hear their experiences of how the system operates, and whether there is anything UCLH can do to improve care of this group. The discussion is likely to last around 30 minutes, and can be conducted over the telephone or face-to-face at a convenient time and place.

The information will be used to inform service provision at UCLH, to write a research paper, and will form the basis of a Masters dissertation. All responses will be confidential, and no personally identifiable information will be published.

Contact: James Wight, james.wight.15@ucl.ac.uk, 07941 657 483.

Access to GP Portal

The GP portal is a web-based solution that allows GPs to access information about patients they have referred to UCLH.

Features include being able to check admissions, waiting lists, discharges, A&E attendances, outpatients and results for the previous week.

If you don't already have access, go to <http://www.uclh.nhs.uk/GPPortal> and click 'request new user'.

Alternatively, practice managers can email a list of the surgery staff requiring access to UCLH.gpqueries@nhs.net and we can set them up for you.

Information we would require from new users includes:

- > Practice code number
- > First Name / Last name
- > Role Request (eg 'Clinician' or 'Non clinician')
- > NHS.net Email
- > NHS Smartcard No.

Contact: Renato Celani, GP Liaison coordinator, Renato.celani@uclh.nhs.uk, 020 3447 5522.

Arrangements during Junior Doctors' strike

The BMA (British Medical Association) has now notified NHS Trusts of its intention to take industrial action as a result of its dispute with the government over a proposed new contract for junior doctors-in-training.

The forthcoming BMA action is as follows:

- > Provision of emergency care only - from 8am, Tuesday 26 January to 8am Thursday 28 January
- > Full withdrawal of labour— from 8am to 5pm, Wednesday 10 February

UCLH has a duty of care to its patients to ensure patient safety while services are maintained as much as possible. We have detailed plans to manage any impact that this industrial action will have on our services and to ensure that patient safety is maintained throughout this action.

If there are any changes to your patient's appointment, they will be contacted. If they do not hear from

us, please ask them to assume their appointment remains unchanged and to come in as planned. There may be fewer staff than usual available so more time should be allowed for a clinic appointment.

There may be reduced services as a result of this action and people should avoid coming to our A&E department unless it is an emergency. Please encourage patients to use other available services such as their GP practice, walk-in centres or pharmacies as alternative options for advice and treatment.

Contact: Jonathan Fielden, medical director, medicine board, jonathan.fielden@uclh.nhs.uk, 020 3447 9613.

New patient information on UCLH website

People with blood diseases and their carers can now find expert information and advice on a new section of the UCLH website – www.uclh.nhs.uk/blooddiseases

The content has been developed to meet the needs of people with a variety of cancerous and non-cancerous blood disorders on their journey. This ranges from advice on our services, for those who are newly diagnosed, to a section on real patient experience stories and information about clinical research trials and how to access them.

Patients with learning disabilities can also learn more about what to expect if they present to the Emergency Department or are admitted to the Acute Medical Unit. youtu.be/ZtkRGbEPO8c and youtu.be/F2PtqwzZfek

The films have been produced by UCLH in conjunction with The Advocacy Project, a service run by people with learning disabilities, and draw on patient feedback. More films are planned over the next year featuring various departments and hospitals across UCLH.

And the diabetes team have added five new clips to a series of video guides for children and young people with diabetes. www.uclh.nhs.uk/t1videos

The video guides have been prepared at the request of the families and carers of young diabetes patients who need to learn the skills to help young people manage their condition.

The creation of these "how to" videos has meant that the knowledge is accurate and at everyone's fingertips, and the feedback from patients and their relatives and carers has been positive.

Contact: Sharon Spiteri, GP communications lead, sharon.spiteri@uclh.nhs.uk, 020 3447 7542.

GP education

The list of dates for the 2016 evening seminars has been published. The seminars will be held at the UCH Education Centre, 250 Euston Road, London NW1 2PG from 6.30pm on the following dates:

- > Wed 17 Feb – ISEH: Quick access to world class services
- > Thu 14 Apr – Women's Health
- > Thu 23 Jun – Musculoskeletal medicine
- > Thu 15 Sep – Dermatology
- > Wed 19 Oct – Frailty
- > Thu 1 Dec – Diabetes

To book for any of these seminars email GPeducation@uclh.nhs.uk More details at www.uclh.nhs.uk/GPseminars

Sleep course

The UCLH Sleep Medicine Course, an intensive one-day course for hospital doctors, GPs and trainees is being held at UCLH, Junior Doctors' Training Room, Fourth Floor East, 250 Euston Road, London NW1 2PG, on Thu 3 March. The course costs £125.

For information email donna.basire@uclh.nhs.uk and to register go to www.uclhcharitycourses.com/courses/respiratory-medicine/uclh-sleep-course-3316

GP engagement

The GP liaison team is holding an engagement event at the Ambassadors Bloomsbury Hotel, 12 Upper Woburn Place, London WC1H 0HX on Wed 2 March at 6.30pm

To reserve a place at this event email UCLH.gpqueries@nhs.net