

GP Links

Bi-monthly newsletter

November/December 2014

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Camden launches campaign to turn 'Big C' into a 'small c'

The NHS in Camden has launched a public awareness campaign to increase cancer survival in the borough by diagnosing a higher proportion of patients at an early stage, when most people survive the disease.

The objective of the 'small c' campaign is to turn cancer from the 'Big C' into a 'small c', a serious but not fatal disease, for a growing proportion of patients. The campaign is giving people the facts about cancer screening and symptoms, to improve their chances of being diagnosed at an early stage, if they have or develop the disease.

The 'small c' is focusing on people aged 50 and over, as

they are the age group most at risk of getting cancer, accounting for almost nine out of ten cases of the disease.

The campaign may lead more patients to present at their local surgery as Camden residents are being given innovative 'symptom checker' cards with a checklist of the key symptoms to look out for. If they can tick any one of the boxes, they are being asked to show the card to their GP as soon as possible.

Camden practices may have already been visited by Carol Murphy, CRUK Primary Care Facilitator; if not, please contact Carol by email at carol.murphy@cancer.org.uk.

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 vitally 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 9083

Fax: 020 3447 9401

gpqueries@uclh.nhs.uk

www.uclh.nhs.uk/GPs

New surgeon for cochlear implant programme

The cochlear implant programme at the Royal National Throat Nose and Ear Hospital is adding the services of an experienced surgeon to team.

Mr Sherif Khalil joins another three surgeons, Mr Jeremy Lavy, Prof Shak Saeed and Mr Azhar Shaida.

Referrals for both adults and children can be sent to any of the surgeons at the RNTNE Cochlear Implant Programme, 330 Grays Inn Road, London WC1X 8DA, and with the addition of a new surgeon, waiting times should remain short.

Patients will need to have profound bilateral hearing loss in both ears to be eligible. NICE guidance can be read here: <http://www.nice.org.uk/guidance/ta166>

Contact: Wanda Aleksy, service manager, cioffice@uclh.nhs.uk, 020 3456 5001/2.

Weekly community clinics for epilepsy patients

A new service giving Camden adults with epilepsy a weekly community clinic is to be launched by doctors from UCLH's National Hospital for Neurology and Neurosurgery (NHNN) and the Camden Clinical Commissioning Group (CCG).

The consultant neurologist-led multi-disciplinary team will work with a dedicated community-based epilepsy nurse and social work support to promote independent living and better patient care through by bringing services together in one place. The clinic will start in January at Camden CCG's facilities at Stephenson House.

The service will mean that adults with epilepsy will get regular care and prompt referral for diagnosis and treatment where any medical issues are identified. Better integration of health and social care will also mean patients benefit from:

- > Earlier and smoother discharges home after treatment.

- > Better obstetric care for women with epilepsy
- > A better planned approach to hospital admissions, reducing emergency admittance to hospital and lowering costs for hospitals and local health services.

John Duncan, UCLH's divisional clinical director for the NHNN, said: "By bringing together primary and secondary care services into a regular community-based clinic, patients will get the right treatment at the right time.

"We know that multi-discipline teams can achieve better outcomes for patients by planning care in advance and referring promptly for diagnosis and treatment, helping to avoid unplanned emergency hospital admissions."

Camden CCG has agreed to fund two consultants for the clinic, as well as a full time epilepsy specialist nurse.

Contact: Samantha Philpott,
samantha.philpott@uclh.nhs.uk

Avoiding long waits for patients

A concerted drive to tackle a backlog of patients waiting longer than 18 weeks from referral to treatment (RTT) has made good progress but there are challenges ahead, says UCLH's deputy chief executive Neil Griffiths.

An intensive support project team working with the Clinical Boards and reporting to Neil was set up during the summer to address the issue of patients waiting longer than the 18-week target set by the NHS Executive. It has taken a targeted approach to reducing wait time, focusing on:

- > Ensuring all services have an accurate patient tracking list (PTL) and the right mechanisms to map them
- > Having a plan for each patient on the RTT pathway
- > Focusing on patients waiting longest first
- > Training frontline staff
- > Taking a zero tolerance approach to waits of more than 18 weeks.

"However, we need to stay focused in our efforts so that we not only deal with the backlog in hand but embed good practice to avoid a repeat. This will include agreeing the right levels of commissioned activity to keep waiting times low. We would not want these kind of waits for our friends or family and we need to pull together to improve our performance for patients."

UCLH is also working closely with commissioners to communicate about how the issue is being addressed, as well as notifying GPs about any patients with longer waits and establishing what else can be done to assist those patients in the meantime. Work to deal with cases which could be dealt with by a private provider began in September.

Contact: Deborah Sutton,
deb.sutton@uclh.nhs.uk

Neil Griffiths said: "We've made good progress but there are more challenges to come. By the end of November our PTL will be in much better shape, giving us the right visibility of where patients are in their care. We've put in place a range of measures, including some procedures being carried out by a private provider, which will mean that we can be compliant with the target by January. This is challenging, but realistic.

NHS patients getting elite athlete treatment

A post-Olympics collaboration between leading health, academic and sports organisations is giving NHS patients levels of care and expertise previously only available to elite athletes.

Practitioners at the Institute of Sports, Exercise and Health (ISEH) are seeing increasing numbers of NHS patients who are tapping in to the wealth of expertise available.

The ISEH is a collaboration between UCLH, UCL, the British Olympic Association, the English Institute of Sport and private hospital group HCA. It is an integral part of the National Centre for Sport and Exercise Medicine, a major legacy of the 2012 Olympic Games, and opened in June 2013.

As well as treating top-level athletes from across the sporting world, the ISEH's experts are also able to help with injuries suffered by those for whom exercise is a hobby. Andrew Simms from Balham took advantage of the ISEH's facilities after developing an Achilles tendon problem as a result of his passion for running.

Andrew, 49, had an active upbringing but only took up running again a few years ago, and now runs with the Herne Hill Harriers. "I get so much pleasure from running and competing," said Andrew. "When I first went down there it was like opening a door on the world of my 16-year-old self."

However, in Andrew's first year of competing he improved so rapidly that he bought new 'spikes' (running footwear), putting his feet and

legs under a different pressure while increasing the volume and intensity of running. Andrew's Achilles flared up and, after a few physiotherapy sessions didn't solve the problem, he and his GP decided to seek further expert medical help.

After an ultrasound, Andrew met with orthopaedic consultant Aria Ghassemi at the ISEH. There he had an examination and was sent for both X-rays and MRI at the centre before a discussion on next steps.

"We're not here just for elite athletes - we're here for people who want to take part in all sports, from any age group, who are keen to be active," said Aria Ghassemi. "That's a huge number of people who can use our services. Of course we also work with high level sportsmen, but we bring that expertise and experience to bear on the weekend warriors – this is a service for everyone."

The referral process for UCLH has not changed. To refer to the institute, refer to the Orthopaedics and Trauma Service, UCH Referrals Centre, University College London Hospitals, Ground Floor North, 250 Euston Road, London NW1 2PG.

Contact: Chris Webster, assistant general manager, 020 3447 9831, chris.webster@uclh.nhs.uk

Reducing waiting times for endoscopy

The Endoscopy Unit have developed a more streamlined process of arranging patient appointments directly from Outpatients.

This should reduce delays in contacting patients by telephone and letter, and means patients receive their appointment on the same day and eliminates the need to send bowel preparation in the post. The service runs Monday to Friday.

The unit has also developed a straight to test service for Upper GI patients referred via the two-week wait pathway to help reduce delays in diagnosing patients. Through a careful triaging process, appropriate patients referred by GPs are selected to be booked directly for a gastroscopy appointment and therefore avoiding the need to

attend an initial outpatient appointment. The patient is then either followed up in clinic or discharged as appropriate. The department is currently working on a Straight to Test service for Lower GI which will be rolled out in the coming months.

Contact: Dylan Smiley, General Manager for GI Medicine, dylan.smiley@uclh.nhs.uk, 020 3447 9749

Opportunity for involvement in future short stay surgery developments

UCLH is investing in improving surgery and cancer services through the development of a new hospital building.

The new building will house a Proton Beam Therapy centre for patients receiving radiotherapy and a specialist Haematology Unit.

In addition, the new building will also create a state-of-the-art Short Stay Surgery Centre, bringing together existing short stay surgery services from across UCLH.

We are keen to listen to feedback to consider how we can improve our services to ensure we deliver the best patient experience possible. We have recently launched a transformation programme for the surgical pathway, involving structured staff and patient engagement.

A series of transformation workshops have been scheduled for staff in December and we would like to invite colleagues working in primary and community care as well as commissioning to attend.

The sessions are split into the three stages of the surgical journey and all

workshops will be held at the UCLH headquarters on 250 Euston Road on the following dates:

Pre-operative pathway

Thursday 4th December, 13:00 to 16:00

On the day pathway

Friday 12th December, 09:00 to 12:00

Discharge & post-operative care pathway

Friday 19th December, 09:00 to 12:00

To express an interest in attending, or to find out more, please email our administrator Ben Horne on ben.horne@uclh.nhs.uk

Places are limited so please let us know as soon as possible. If you are unable to attend the workshops, we would still value your feedback on how we can improve our current surgical pathways.

Contact: Sarah How, Transformation Lead for Strategic Projects, 020 3447 7024, sarah.how@uclh.nhs.uk

Sign up to safety

UCLH has made a series of pledges to help make the NHS the safest healthcare system in the world, as part of the national Sign Up To Safety campaign.

The NHS England campaign seeks to create a system devoted to continuous learning and improvement, aiming to deliver harm free care for every patient, every time, everywhere. It champions openness and honesty and supports everyone to improve the safety of patients.

The campaign has invited healthcare organisations to make a public commitment to play their part in reducing avoidable harm in the NHS by 50 per cent, saving 6,000 lives.

UCLH has made pledges in the following five areas:

1. Put safety first. Commit to reduce avoidable harm in the NHS by half and make public the goals and plans developed locally.
2. Continually learn. Make organisations more resilient to risks by acting on the feedback from patients and by constantly measuring and monitoring how safe their services are.
3. Honesty. Be transparent with people about their progress to tackle patient safety issues and support staff to be candid with patients and their families if something goes wrong.
4. Collaborate. Take a leading role in supporting local collaborative learning, so that improvements are made across all of the local services that patients use.
5. Support. Help people understand why things go wrong and how to put them right. Give staff the time and support to improve and celebrate the progress.

Accessing cardiovascular services for your patients

As part of NHS England's case for change, UCLH is moving cardiovascular services from the Heart Hospital to the new Barts Heart Centre in Spring 2015. The new centre will be the world's biggest centre of excellence for adults with congenital heart disease and will perform more heart MRI and CT scans than any other centre in the world. Services moving will include all specialist services such as GUCH and Inherited Cardiac Conditions, cardiac surgery and electrophysiology procedures.

Many of the cardiology outpatient clinics provided at UCH will remain, to provide continued cardiology support to Camden and Islington patients.

We want to ensure that all referrers are informed on how to access cardiovascular services for their patients. We are also keen to listen to feedback to consider how we can improve our services to ensure we deliver the best patient experience possible.

This event will be delivered jointly with the new Barts Heart Centre. We would like to invite all colleagues working in primary and secondary care who access these services to attend. The event will be held at UCLH, 250 Euston Road, London NW1 2PG on 15 January 2015 from 6pm to 8.30pm.

To register for the event, contact Alison Basa, project manager at heartmoveenquiries@uclh.nhs.uk, 020 3456 6036.