

GP Links

Bi-monthly newsletter

October 2014

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eMessaging rolled out at UCLH

An eMessaging system has been introduced to replace the process of posting patient letters to GP practices.

eMessaging is the UCLH solution for the electronic transmission of inpatient discharge summaries and outpatient clinic letters from the Clinical Data Repository (CDR) directly into enabled GP practices in Camden, Westminster and a handful of practices in Islington. The plan is to go live across all practices in Islington this Autumn. UCLH's strategy is to work with all London CCGs to roll out eMessaging to all London GP practices in the next year.

The system was developed to meet the target of delivering Inpatient Discharge Summaries to GPs within 24 hours and outpatient clinic letters to GPs within five days.

Camden and Westminster practices went live early last year but some paper copies of letters were still being sent by post. The e-messaging process is now sufficiently reliable to run without sending backup print copies.

eMessaging will enable

timely clinical communication to a patient's GP about their hospital stay or outpatient appointment. This is vital to ensure all care providers are aware of current status of a patient, and to know what follow up care has been put in place or is to be followed up by the GP.

UCLH is aware that letters are occasionally sent to the wrong practices (or addresses), as the most up-to-date registered GP for a patient has not been updated on the hospital's patient master index. Current process for highlighting these errors can take days, and thus delays clinical communication getting to the correct patient's GP. eMessaging into DocMan will allow the practice to immediately feedback and electronically reject letters that have been eMessaged to the wrong practice. This enables UCLH to take immediate corrective action, update their patient master index with the correct GP, and redirect the letter to the correct practice.

Contact: Alison Clements, Head of Operations, Medicine Board, 07739 298 950.

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

Induction of labour at 40 weeks

Current guidelines recommend that a woman who is pregnant for the first time and is aged over 40 should be referred to an obstetrician so that an offer of induction of labour at 40 weeks can be made.

This is due to the slightly increased risk of intrauterine death with advancing maternal age.

In a recent case, a woman was seen routinely by her GP at 40 weeks. An abdominal measurement of symphysis-fundal height (SFH) of 34.5 cm was recorded. This indicated a 5.5cm difference to actual gestation of 40 weeks. Although fetal movements were present, a referral should have been made to the Maternal Fetal Assessment Unit (MFAU) for a growth ultrasound scan within 48 hours.

The women's health safety team at UCLH would like to share the lessons learnt from this case.

- > The investigation findings indicate that the intrauterine death might have been avoided if earlier induction of labour was offered.
- > A woman over the age of 40 should be offered induction of labour at 40 weeks. Women may choose to decline, however we would like to ask GPs to be vigilant and ensure that women aged 40 and above have had a discussion about the risks and benefits of induction of labour documented in maternity notes and that they are referred back to hospital if they are at 40 weeks gestation or above.
- > NICE guidelines state that if the SFH is > 2cm smaller than gestation in weeks, a referral should be made to the obstetric service. Please do not hesitate to refer women to MFAU if you have concerns. A telephone call to the MFAU doctor (07939 135 448) will enable correct prioritisation and reduce long waits for women.

Contact: Belinda Green, consultant midwife, belinda.green@uclh.nhs.uk, 020 3447 2655.

Launch of the UCLH Cancer Programme

UCLH have set up a formal cancer programme to achieve the aims of London Cancer's "Case for Change". The project will see UCLH become a centre for the specialist treatment of five types of cancer – brain, prostate and bladder, head and neck, oesophago-gastric and blood cancers.

To achieve this, UCLH will work within a system of hospitals including The Royal London, St Bartholomew's, The Royal Free and Queen's in Romford. The Royal Free Hospital will become a centre for the specialist treatment of kidney cancer. The vast majority of other cancer services, including radiotherapy and chemotherapy for these and other cancers, will still be available in local hospitals, as they are at present.

We expect the first changes to impact on patients in mid-2015. To smooth the transition, UCLH has appointed a cancer programme director to oversee the process.

Cancer services will also be working with stakeholders, and in partnership with other providers across the area, to develop innovative service models to improve care for patients. This would include providing cancer care at home as well as enhancing early diagnosis, straight to test services, and of course improving waiting times.

Contact: Jonathan Gardner, cancer programme director, jonathan.gardner@uclh.nhs.uk, 07961 122869.

UCLH opens first paediatric FGM clinic

London's first specialist clinic for child victims of female genital mutilation (FGM) has opened at UCLH.

The clinic will give medical treatment and psychological help to girls aged up to 18 years who have suffered mutilation/genital cutting or who may be at risk, either in the UK or overseas. It will also provide expert advice to help girls who are at risk, as well as management of the physical and psychological health implications of FGM.

The service offers sensitive treatment, examinations and advice with appropriate care for affected children and young people and will contribute to the prevention of FGM in London working closely with community groups.

Assessment is made of whether FGM has been performed, along with appropriate documentation, including witness statements and availability for court. The service has a commitment to accurate data collection and audit. Practitioners will work closely with local community groups, social care, and police.

In cases where FGM is confirmed, then other children within the victim's family will be assessed. The clinic will provide clear referral routes for victim counselling and, should surgery be required, will ensure it is undertaken in an age appropriate setting.

The clinic will be run jointly by consultant community paediatrician Deborah Hodes and consultant gynaecologist Sarah Creighton.

Dr Hodes said: "We're determined to work closely with our partners in local community, social care and the police to help end FGM. We can't put back what's been done, but we can improve girls' lives and prevent FGM happening to others by spreading greater awareness of it. The physical and psychological suffering caused by FGM can be considerable with both short and long-term health implications."

To refer, please call the clinic on 020 3447 5241 or fax 020 3447 9064.

Cardiovascular services based at the Heart Hospital in 2015

The Heart Hospital is talking to Barts Health NHS Trust about creating a brand new cardiovascular centre at St Bartholomew's Hospital.

The centre will be called Barts Heart Centre. It will have the very latest equipment and facilities for treating cardiovascular conditions including heart attacks.

From spring 2015, UCLH is planning to move cardiovascular services from the Heart Hospital to the new Barts Heart Centre in Spring 2015. The final move date is to be confirmed. Until then, all services will continue as usual.

Why are we planning a move?

- > We want to continue to improve our patient care by combining the best of the cardiac services at the Heart Hospital and St Bartholomew's Hospital into one centre.
- > We believe that a larger dedicated specialist centre has the potential to improve care, reduce complications and save even more lives every year by providing world-class care at every stage - from prevention and diagnosis, through to treatment and beyond.
- > The current high quality services at UCLH and Barts need to come together to achieve this goal. Seeing more patients with the same condition will allow our expert dedicated teams to develop and improve their skills, which will save even more lives – especially where treatments and techniques change quickly.

What will happen when services transfer?

To ensure continued patient safety and the quality of patient care, the transfer of services would be staged over a number of weeks. This means that during this time, there may need to be a double running of services at the Heart Hospital and the new Barts Heart Centre. We will let you know ahead of time which services may be affected and how it may affect your referrals to

the Heart Hospital. Once all services have moved, the Heart Hospital site would no longer provide cardiovascular services.

Would all services move?

No, some services such as thoracic surgery would remain at UCLH. This may not necessarily be at the Heart Hospital but at one of our central London locations. Many of the cardiology services currently provided at University College Hospital will continue to be provided there – what these will be is still under discussion. These cardiology services will be in line with University College Hospital's role as a local district general hospital for Camden residents. We will let you know well in advance what these will be.

What will this mean for patients?

The move will mean even better care for patients. In the interim, patient leaflets will be available to provide information about the move, and details on whom to ask for more information. We will also contact all active patients individually to ensure they are clear about where to go for their follow up appointment.

What will this mean for GPs?

Until services move in spring 2015, nothing will change regarding your access to cardiovascular services at the Heart Hospital. We will let you know in advance of any potential changes. We anticipate the following changes to services:

- > New GP referral pathways (including new referral forms and methods of referrals), about which you will be consulted.
- > Location of cardiology services. A small range of cardiology services will be provided at UCLH, with most being provided for at the new Barts Heart Centre.
- > The staff at the Heart Hospital (consultants, nurses and allied health professionals) and relevant patient medical records would transfer to the Barts Heart Centre.

This means that there should be no change to the team providing care to your patients upon transfer.

What kind of GP engagement can we expect before spring 2015?

We want to ensure that you are kept well informed through:

- > Regular updates through this newsletter on what will happen to services
- > Regular updates on our websites and through posters at the Heart Hospital
- > Emails to communicate the new referral pathway and referral forms well in advance
- > A clinical engagement event closer to the time

Contact: Alison Basa, project manager, heartmoveenquiries@uclh.nhs.uk, 020 3456 6036. www.uclh.nhs.uk, www.bartshealth.nhs.uk

GP survey 2014

We really want to hear from you so we've put together 12 questions for our annual GP survey at www.uclh.nhs.uk/gpsurvey

The short survey will take no longer than five minutes of your time to complete. Please help us improve the services we provide by completing the survey, which covers all our hospitals.

Give us your feedback about what we are doing well, and what we could do better. The more replies we get, the

more responsive we can be

Over the last 12 months plans were put in place to improve areas you raised as concerns, such as improving access to clinical teams by telephone and email, and our A&E Discharge summaries.

Closing date is 31st October 2014.

**Contact: Annette Cobham,
GP Liaison Officer, 020 3447 5522,
annette.cobham@uclh.nhs.uk**

Date for your diary

You are invited to our popular annual UCLH Festive Open Event on Thursday 4 December from 3 to 6pm at University College Hospital, Euston Road, London NW1 2BU. Talk to senior doctors and nurses on more than 40 interactive display stands to find out about new services, treatments and plans for the future. It's an excellent opportunity to feedback your views! There will also be mince pies, carol singing and other live entertainment to mark the festive season. More information from www.uclh.nhs.uk/openevent available mid November.

Sarcoma services in London

Sarcomas are a rare and diverse group of cancers that can develop at any site in the body. They affect all ages, have great clinical heterogeneity and need to be managed by a specialist centre. Evidence from patient surveys and advocacy groups highlights the problem of early recognition of a possible sarcoma in primary care.

There are two specialist centres in London: The London Sarcoma Service which diagnoses and treats bone and soft tissue sarcomas and the Royal Marsden Hospital which diagnoses and treats soft tissue sarcomas only.

The proforma for GPs to refer suspected sarcomas has recently been updated. The new form and additional information about the services provided by the two centres can be found on www.lsesn.nhs.uk

In March 2013 the Sarcoma Advisory Group of the London and South East Sarcoma Network (www.lsesn.nhs.uk) sent a survey to 162 GPs in London and the South East who had referred patients who were subsequently diagnosed with sarcoma. We received 93 completed responses which identified that there are still problems in the referral pathway. We are keen to understand how to provide better support to primary care to achieve more timely diagnosis.

We want to hear from GPs about any experiences you have had with sarcoma services in London and any suggestions on how we can improve.

Contact: Gemma French, project manager, 07931 176 757, gemma.french@uclh.nhs.uk

UCLH@Home launched to give patients care in comfort of home

UCLH has launched a new patient service called UCLH@Home. This service supports our strategic direction to improve the care for our patients, by treating them in the right place, at the right time. Our aim is to provide a high-quality, cost effective recovery service which will enable selected, clinically stable patients to complete their acute care pathway in their own home at an earlier point than current services allow.

While on the service, patients will remain under the care of their hospital consultant and will be discharged from the service at the end of their acute care pathway, as normal. We will send GPs an interim letter letting you know your patient has transferred on to the UCLH@Home service and a full discharge summary will be sent to you as normal when the patient is discharged from the service.

The aim of the UCLH@Home service is not to replicate or duplicate existing community based services but to enable clinically stable patients who are suitable to leave hospital earlier in their care pathway, to complete their acute pathway in their own home.

The service will be provided by UCLH in partnership with Healthcare at Home Ltd.

The staff employed to provide this service are qualified, experienced health professionals including nurses, physiotherapists, OTs and healthcare support workers. They have been recruited in conjunction with UCLH senior nursing and allied health professionals staff utilising the UCLH assessment centre and selection processes. Staff will undertake a comprehensive training programme including a UCLH ward induction. Healthcare at Home Ltd does not use agency staff and recruits locally to ensure the staff are based close to the patients they are caring for.

The core hours of the team providing care in the patient home is 0700–2200 hours, 7 days a week. Patient and clinical support is available from qualified nurses via a 24/7 telephone support line.

We will be evaluating and monitoring this service from the start, and have set up a weekly governance and review meeting. Any feedback from you or your patients will be invaluable to ensure we provide a service that best meets the needs of our patients. **Contact: Alison Clements, head of operations, medicine board, alison.clements@uclh.nhs.uk, 020 3447 9133.**