

GP Links

Bi-monthly newsletter

July 2015

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Emergency Dept model improvements

The Emergency Department (ED) at University College Hospital has implemented an integrated urgent care model to ensure that patients' needs are met by the most suitable health professionals and that they are seen within four hours.

The department is doing well in its performance against the four-hour clinical quality standards, and reported that 97.7% of patients were assessed, treated, admitted or discharged within four hours in the last financial quarter.

Also, up to 10% of ED patients are being seen and discharged either by the ED front door GP or the Urgent Treatment Centre primary care clinician.

"This excellent improvement in the quality and timely emergency care represents the top performance in London and one of the best in the country," said divisional clinical director Joud Abduljawad.

Building on this success, the department is working with Camden and Islington CCGs and lead local GPs to establish a more advanced urgent care integration. This includes working on a new design front door model where the patients are assessed promptly and may be safely redirected, based on clinical criteria, to the most appropriate service including their local GP, out of hours GP, local pharmacist, local dentist or 111 services.

"We are also focusing on feedback from local GPs and there is a real drive now to improve the quality of ED discharge letters in order to improve communication, patients' experience and enhance the safety of the transfer of care," said Dr Abduljawad.

"We welcome feedback and GPs' opinion is extremely important to shape the vision for the service and also to improve patients' care," he said.

Contact: Dr Joud Abduljawad, Divisional Clinical Director, Emergency Services, joud.abduljawad@uclh.nhs.uk, 020 3447 9889.

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 7542

gpqueries@uclh.nhs.uk

www.uclh.nhs.uk/GPs

A community-based epilepsy clinic in Camden

Improved patient care and a more efficient way of working are the twin aims of the community-based epilepsy clinic that opened its doors to patients this May.

The new weekly clinic is a combined project between UCLH's National Hospital for Neurology and Neurosurgery (NHNN), the Royal Free London NHS Foundation Trust (RFL) and Camden Clinical Commissioning Group (CCG).

The service offers a weekly consultant-led clinic on Wednesday mornings and three nurse-led clinics during the week. Extended appointments are available for patients with learning disabilities.

Dominic Heaney, NHNN consultant neurologist, is enthusiastic about the new venture. "There are about 1,500 people with epilepsy in Camden," he says.

"About a third are having problems with their epilepsy, and even those who are well may have questions arising from it.

"The community-based epilepsy clinic will improve access for patients and better liaison between the hospital and the GPs. Sometimes patients fall through the gap between hospital and community – this clinic should make sure that doesn't happen."

The multidisciplinary team includes a dedicated community-based epilepsy nurse, hospital consultants and access to social support to promote independent living and better patient care, bringing services together in one place at the South Camden Centre for Health on Hampstead Road.

The service means that adults with epilepsy will have regular care and prompt referral for diagnosis and treatment, if needed.

Better integration of health and social care will also mean patients benefit from:

- earlier and smoother discharges home after treatment;
- improved obstetric care for women with epilepsy; and
- a better, planned approach to hospital admissions, reducing emergency admittance to hospital and lowering costs for hospitals and local health services.

Dr Rebecca Liu, RFL consultant neurologist, is a strong supporter of the service.

"Many patients with epilepsy do not need to be seen in a hospital setting. By moving specialist care into the community, we will achieve better channels of communication between GPs, epilepsy specialists, social care and mental health services.

"This means that we can help support patients with every aspect of their epilepsy and focus on what really matters to them. Prevention is a key part of this service and high-risk patients will be identified early and given prompt advice to reduce unplanned emergency admissions.

Mark Barrett, the clinical lead spearheading the service at Camden CCG said: "I am delighted that the new epilepsy community clinic is now up and running in Camden.

"Thanks to all involved in setting up and launching the clinic. I hope it will provide good continuity of care for patients and support for GPs.

"As the service is based in the community, I am confident it will be responsive to the needs of patients and also to the needs of primary care."

GPs can refer into this service through Choose and Book. Secondary care and community services can refer patients by completing a form and emailing it to cics.referrals@nhs.net

Full referral details can be found at: <http://www.camdenccg.nhs.uk/gps/epilepsy-integrated-care-service.htm>

Contact: Alan Lim, epilepsy specialist nurse, gim.lim@nhs.net, 020 3416 6660.

University College Hospital at Westmoreland Street reopens to patients

The first phase of our urology service move to the refurbished University College Hospital at Westmoreland Street has completed. This forms part of cross-London plans to improve cardiac and cancer care for millions of people across north and east London and west Essex.

Thoracic surgery has also returned to the hospital, which was previously called the Heart Hospital, and has been refurbished.

Geoff Bellingan, medical director for UCLH's surgery and cancer board said: "Moving urology services and continuing to have thoracic surgery at Westmoreland Street supports our plan to improve cancer services and will enable us to develop both services. For example, we are planning to introduce more one-stop urology clinics."

This is the first phase of the move, with other urology inpatient service scheduled to move over the summer and outpatient services moving by the end of September.

Contact: Zoe Ward, communications manager, zoe.ward@uclh.nhs.uk, 020 3447 2332.

Multidisciplinary diagnosis for patients with abdominal symptoms

A pilot service has been launched at UCLH to investigate and diagnose the condition of patients with abdominal symptoms.

The Multidisciplinary Diagnostic Centre (MDC) pilot aims to provide a more structured diagnostic pathway for this defined group of patients in a bid to improve patient flow and avoid unnecessary admissions.

Data collected during the pilot will be used to refine the operational and clinical criteria for managing vague abdominal symptoms and promote earlier diagnosis of cancer.

It is predicted that between 2002 and 2022 there will be an additional 1,250 patients diagnosed with cancer each year in London. The predictions for abdominal cancers are much higher, with an average increase of 18.9% across cancer of oesophagus, stomach, colon, rectum, pancreas, uterus and cervix; this is despite a predicted fall in cervical and stomach cancer.

It is widely recognised that a significant cause of the worst cancer mortality in the UK (compared to Europe) is late diagnosis and the burden for improvement lies with primary care.

Each GP is likely to see only a handful of abdominal tumours each year, and for pancreatic cancer this figure is once every 5 years.

Within London Cancer, of all cases with a recorded tumour stage in 2012, a large proportion of the following cancers presented with metastases (Stage 4): pancreas – 74%, hepatobiliary and gall bladder – 57%, and oesophagus & stomach – 35%.

To compound the problem, patients with gastrointestinal cancer are often diagnosed after attending Emergency Department (ED) where the patient pathway is fragmented, resulting in poorer patient experience.

A multidisciplinary diagnostic centre is also being launched at Queen's Hospital (BHRUT). Through the two centres, London Cancer aims to:

- Provide patient and GP access to rapid specialist assessment, diagnostic tests and a management plan within a few days of referral

- Evaluate non-specific, 'grey area' symptoms that are severe enough to warrant early attention but do not qualify for a 'target' (two-week wait) referral

- Improve patient experience by addressing fragmentations of the current diagnostic pathway

All referrals will include formalised assessment of patient self-reported symptoms and previous primary care contact, providing immediate additional clinical information. Patient symptoms will be collected using an electronic patient history programme.

This feasibility pilot project has been accepted as part of the competitively awarded national ACE Early Diagnosis Programme, jointly funded by Cancer Research UK, Macmillan and NHS England.

The ACE (Accelerate, Co-ordinate, Evaluate) programme is part of the National Awareness and Early Diagnosis Initiative (NAEDI) that aims to test the effectiveness of different models at scale through a national collaboration and evaluation process so that commissioning can be informed as rapidly as possible by examples of 'real world' implementation in the NHS.

Data collected will be available to inform future service development and planning. The UCLH site has gone live in June 2015. BHRUT is in set-up phase.

Referral Criteria

The MDC will receive referrals from GPs and ED for:

- Painless jaundice with bilirubin >80, cause unknown
- 5% unexplained and proven weight loss, not previously investigated and no likely benign diagnosis
- Non-specific abdominal symptoms, lasting three weeks but under six months, not meeting two-week wait (2WW) criteria but malignancy suspected by referring clinician
- Abdominal pain resulting in two visits to ED or primary care within one calendar month, not previously investigated or without a clear pre-established diagnosis

To refer, please see form at www.londoncancer.org/media/129136/20150612-MDC-referral-form-v3.doc

Contact: Roxanne Payne, MDC Pathway Coordinator, 020 3447 9454, UCLH.GIMDC@nhs.net

New multiple sclerosis online information

People with multiple sclerosis (MS) and their carers can now find expert information and advice on a new section of the UCLH website.

www.uclh.nhs.uk/multiplesclerosis

The content has been developed to meet the needs of people at different stages of their MS, from advice on our services for those who are newly diagnosed, to a section on living with MS and information about research trials and how to access them.

MS nurse consultant Bernadette Porter said: "MS patients and carers were involved in the development of the content from the start.

"We surveyed them to ask what they wanted, and asked them what they thought of what we've developed, so we're sure that our new pages are meeting the needs of our patients."

Contact: Pinar Kara, administrator, 020 3448 3855, MS.administrator@uclh.nhs.uk

South Islington Test and Learn Pilot

UCLH matron Samantha Philpott has been participating in an innovative integrated care project led by Islington CCG and funded by local Better Care Fund resources.

The aim is to improve defined health outcomes through integrated care. The team has a very broad mix of GP practices, social workers, mental health nurses and other community workers in the local area.

95% of South Islington patients receive their secondary care at UCLH and through collaborative working with the patient at the heart of the process, the team seek to establish the most effective way to work together.

The team are focusing their energy on groups of patients they believe will benefit from their interventions, ie

- Patients who have frequently attended Emergency Department
- Patient who have recently been discharged
- Patients who are currently in hospital
- Patients who need optimisation of their care packages to avoid readmission.

The team meet weekly and alternated case-based discussions with themed reviews of specific areas of interest. Topics of particular interest have included information

governance and the patient voice. Team members are encouraged to present patients who represent a challenge to the current models of working.

The benefits of the pilot to date include:

- Improved links between Primary and Secondary care, and improved inter-professional links within extended Primary Care teams
- Combined care plans – that are not only accessible to Primary and Secondary care, but created by them together, with the patient and their family
- Specific care management (e.g. repatriating an out of borough mental health patient back into Islington, and facilitating an early discharge of a patient back to the community
- Improved understanding- the group now crucially understand the financial impact of the patient journey, and can begin to see ways to improve both the patient experience, and whole cost to the local health care economy

The pilot continues until October 2015 when a decision for an Islington-wide model will be made.

Contact: Sam Philpott, matron, samantha.philpott@uclh.nhs.uk, 020 3447 5453.

UCLH to invest in new world-leading centre

A new centre for the diagnosis and treatment of conditions affecting the ear, nose, throat and mouth including dental, hearing, speech and balance services will be built on Huntley Street, WC1E.

The new centre will be built alongside the University College Hospital Macmillan Cancer Centre, after the UCLH Board confirmed its intention to invest in this world-leading centre on 8 July 2015.

Currently, UCLH provides ear, nose, throat and dental services from at the Royal National Throat, Nose and Ear Hospital (RNTNEH) and the Eastman Dental Hospital (EDH), as well as at the National Hospital for Neurology and Neurosurgery and University College Hospital.

When the centre opens in 2018, these services will move to the new site, offering multidisciplinary care under one roof in a modern environment.

Sir Robert Naylor, chief executive of UCLH said: "Investing in this new clinical facility is a great opportunity. It involves two world renowned hospitals coming together under one roof to provide the best possible care for patients. The cost of this new development will be funded from the subsequent sale of the RNTNEH and EDH."

Conditional planning permission for the new building was granted by London Borough of Camden's Development Control Committee in June 2015.

The building will be situated right at the heart of the University College Hospital campus. It will deliver services from two floors below ground, and five above, with access from both Huntley Street and Shropshire Place.

Contact: Zoe Ward, communications manager, communications@uclh.nhs.uk, 020 3447 2332.

Supported self-management follow up for prostate cancer patients

The uro-oncology service at UCLH is piloting a supported self-management approach to follow up for a small group of prostate cancer patients.

After receiving treatment for prostate cancer at UCLH, some patients will attend an 'end of treatment' appointment with their clinical nurse specialist to discuss long-term symptoms and side-effects.

They will continue to be seen in the oncology clinic until their PSA is stable (at least a year post-treatment).

Specific details will be included in your patient's end of treatment summary, which we will send to you, and more detailed information is available at www.uclh.nhs.uk/selfmanagement

Patients will be encouraged to call the uro-oncology CNS on 07908 506 389 or 07852 220 226 if they have any queries or problems related to their cancer or its treatment.

Contact: Katie Sutton, Macmillan Project Lead for Cancer Follow-Up Redesign, katie.sutton@uclh.nhs.uk, 020 3447 8827.

GP education

The next in the series of evening seminars for GPs are:

- > 24 September 2015
 - Heart Failure
- > 11 November 2015
 - Diabetes