

Two new processes result in:

- no lost “decisions to operate”
- all patients safely added to Wait List
- instant data transfer to POA (pre-operative assessment)
- no under or over assessing prior to surgery...

All feedback
welcome!

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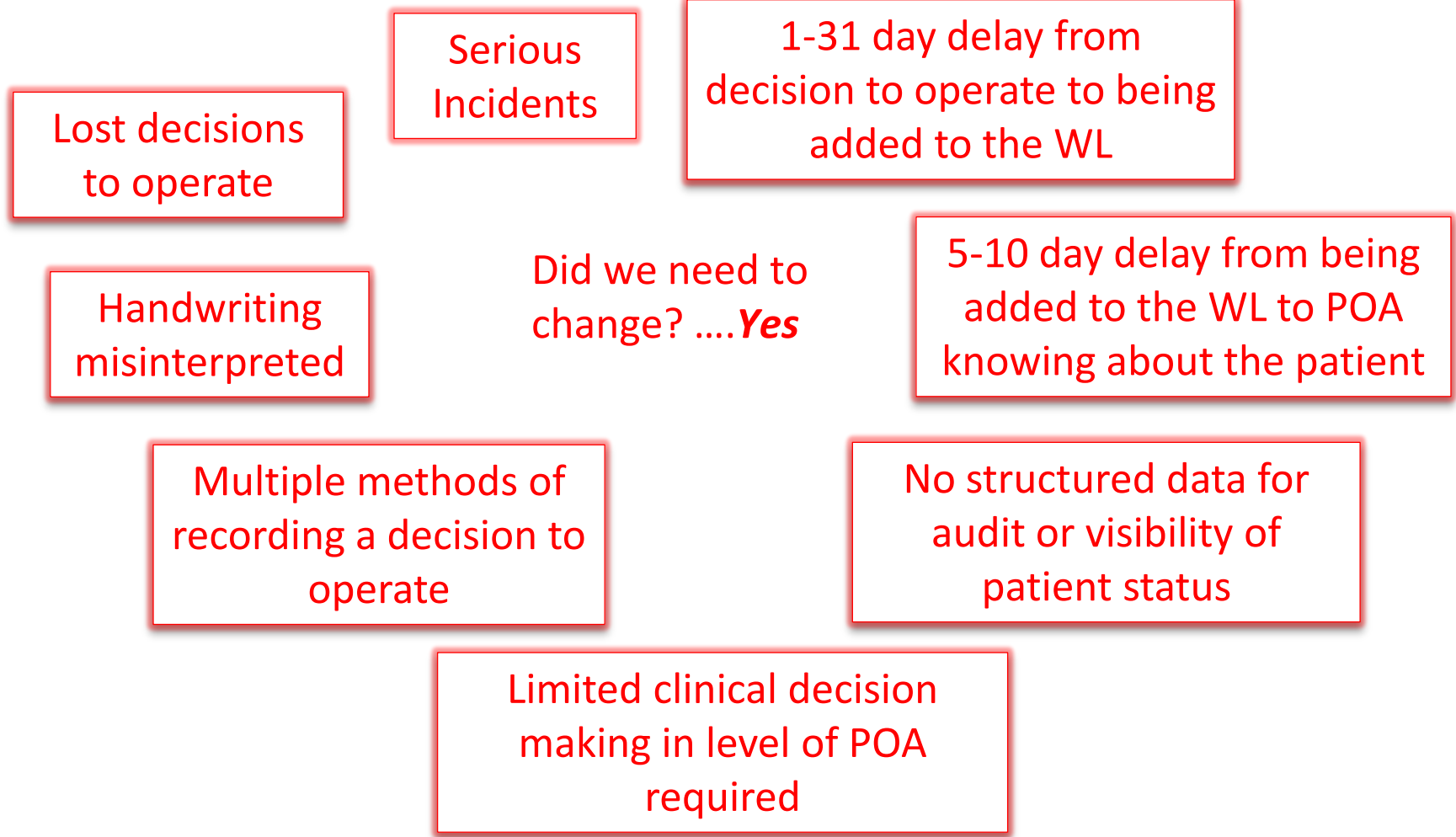
Barrie Phypers

Anaesthetic Consultant

Claire Richards

Lead POA Nurse





1. Processes:

1. Electronic recording of Add to WL requests

- a. Surgeons complete an online form whenever and wherever the decision is made
- b. Data is instantly accessible to specialty admin staff
- c. Once added to the WL the surgeon's request is then marked for POA
- d. Data is then instantly accessible to POA staff

All surgical specialties are now live.

2. Clinical POA triage

- a. POA staff review daily the surgeon's request
- b. POA staff check hospital systems for recent tests / information. They also use GURU to check GP medication data.
- c. The triage decision (Telephone assessment, Face to face assessment, No further assessment ^{new}) is recorded. This is then instantly available to POA admin to book.

Creating Internal Referral

MRS. PATIENT PATIENT DUMMY : 01/01/1999 Age: 18 Female.

Date Decision to Refer: 05/09/2017
 Referral Type: Outpatient

Refer To
 Service: ENT Add to Waiting List Service
 HCP: [dropdown]
 Urgent: Yes No
 Is Referral for a New Condition?: Yes No
 Pathway ID: [text box]

Referred By:
 Service: [dropdown]
 HCP: MS CATHERINE CADE
 Recording User: MS CATHERINE CADE
 Recording Date/Time: 05/09/2017 14:32

Clinical Details Notes

Referral Letter: [Link icon]
 Clinical Details: [text area]

Service Specific Questions:

Question	Answer
Proposed procedure including side	[text box]
Does the patient want to be contacted if slot available at short notice?	[dropdown]
Expected Surgical time	[text box]
Responsible Consultant	<input type="checkbox"/> Anyanwu, k <input type="checkbox"/> [dropdown]

Service: ENT Add to Waiting List Service
 HCP: [dropdown]
 Referral From: 28/05/2017 To: 05/09/2017
 Search to include: Awaiting Acceptance Requiring 2nd Opinion

also include
 Accepted Rejected
 Accepted - Requires appt. Accepted - Appt. Booked Completed

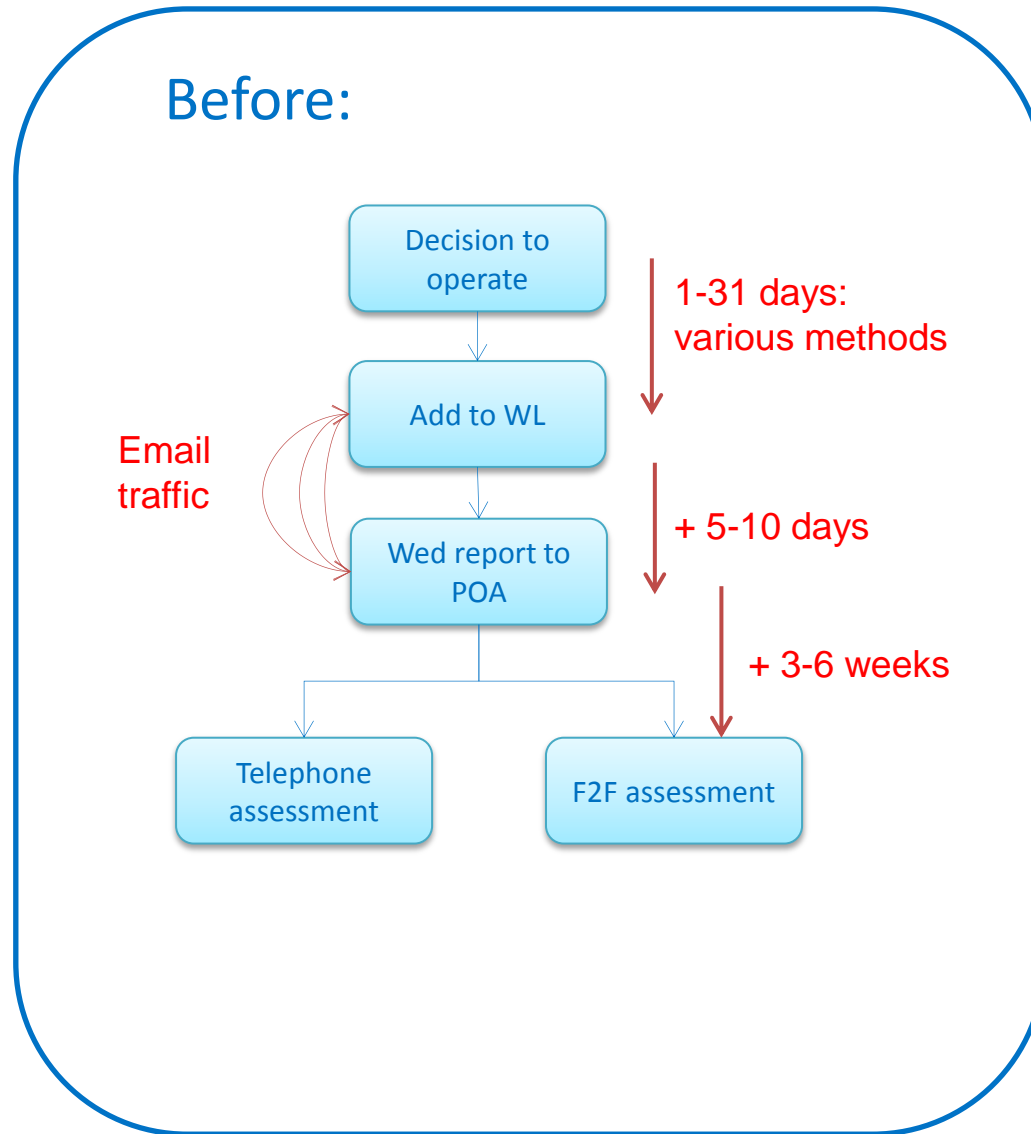
Ref Date	Urg	Referred By	Type	NHS Number	Name	DOB	Ref to Service	Ref To	Status
05/09/2017	Yes	DR MAM...			THE CARVILL	05/06/1976	ENT Add to Waiting Lis...		Awaiting Acceptance
04/09/2017	Yes	MR...			LEE	13/06/1979	ENT Add to Waiting Lis...		Second Opinion Required
01/09/2017	Yes					31/08/1970	ENT Add to Waiting Lis...		Second Opinion Required
30/08/2017	Yes					28/06/1982	ENT Add to Waiting Lis...		Second Opinion Required
23/08/2017	Yes					01/09/1976	ENT Add to Waiting Lis...		Second Opinion Required
05/09/2017	No					04/12/1933	ENT Add to Waiting Lis...		Awaiting Acceptance
05/09/2017	No					29/07/1959	ENT Add to Waiting Lis...		Awaiting Acceptance
05/09/2017	No					06/01/2015	ENT Add to Waiting Lis...		Awaiting Acceptance
05/09/2017	No					12/01/1937	ENT Add to Waiting Lis...		Awaiting Acceptance
05/09/2017	No					20/11/1996	ENT Add to Waiting Lis...		Awaiting Acceptance
04/09/2017	No					19/08/1965	ENT Add to Waiting Lis...		Awaiting Acceptance
04/09/2017	No					18/03/1956	ENT Add to Waiting Lis...		Awaiting Acceptance
01/09/2017	No					15/04/1998	ENT Add to Waiting Lis...		Second Opinion Required
30/08/2017	No					06/04/1997	ENT Add to Waiting Lis...		Second Opinion Required
27/08/2017	No					28/06/1974	ENT Add to Waiting Lis...		Second Opinion Required
24/08/2017	No					01/07/1976	ENT Add to Waiting Lis...		Second Opinion Required
14/08/2017	No					04/01/1975	ENT Add to Waiting Lis...		Second Opinion Required
11/08/2017	No					10/10/1986	ENT Add to Waiting Lis...		Second Opinion Required
09/08/2017	No					03/06/1982	ENT Add to Waiting Lis...		Second Opinion Required
13/06/2017	No	MR PHO...				22/12/1949	ENT Add to Waiting Lis...		Awaiting Acceptance

e-Add to WL form tailored per specialty but usually includes:

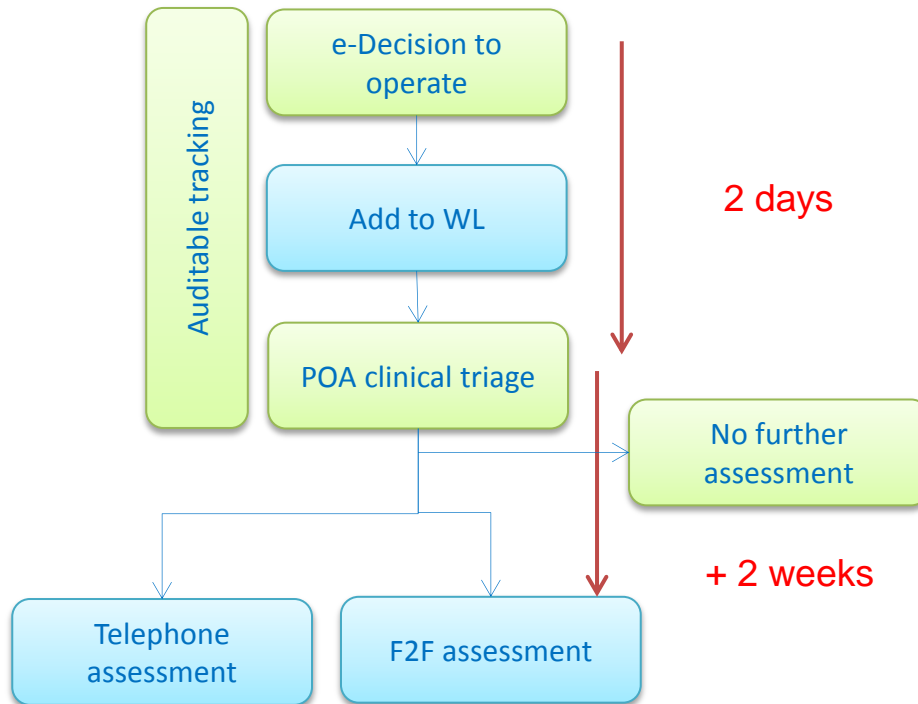
- ✓ Patient details
- ✓ Procedure
- ✓ Side
- ✓ Expected surgical time
- ✓ Responsible consultant
- ✓ Type of WL
- ✓ Admission type
- ✓ Referral urgency
- ✓ Comorbidities
- ✓ Anaesthetic type
- ✓ BMI estimate
- ✓ Request for consultant anaesthetist review
- ✓ Clinical Details freetext

Data is structured and questions can be set as mandatory

2. Pathway:



After:



3. Results:

- ✓ More than 1900 e-add to WL per month
- ✓ Used by all surgical specialties
- ✓ No related Serious Incidents
- ✓ No lost decisions to operate
- ✓ No handwriting misinterpreted

- ✓ Single, fully auditable, method of recording a decision to operate

- ✓ No delay between decision to operate and being added to the Waiting List.
- ✓ No delay between being added to the Waiting List & POA knowing about the patient.

- ✓ Clinical decision in place for level of POA required:
 - ✓ 20% streamed out as no further assessment required.
- ✓ Improved use of POA resource
- ✓ More patients ready for booking sooner

4. Conclusions: well worth the effort!

- ✓ We used systems we already had, but had never used like this before
- ✓ As always...roll out took longer than planned...18 months across all surgical specialties (still working through Orthopaedics)
 - ✓ Consultant surgical leads vital
 - ✓ Specialty administration support vital
- ✓ Anaesthetic lead vital (POA triage criteria, consultant to consultant debate)
 - ✓ Enabled “no further POA assessment required” by the surgeons...which further enabled POA resources to be focussed on those patients needing them
- ✓ Service improvement momentum in POA has lead to development of e-assessments, all GP letters redesigned, regular training days
- ✓ Peace of mind that no patients are lost in this bit of the system