

# Development of IT based nurse led endocrine tracking system

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## Why and How

**Why?** We needed to increase our patient capacity with minimal financial implication by creating a system that allowed capacity, increased patient safety and offered a diagnostic database

**How?** Patient cohorts most suitable for tracking were identified and screens developed within an existing IT system (Fig 1)

## Where we are now

November 2013 Initial screens became active  
June 2014 Letter templates online (includes pre populated blood form)

Total 615 patients managed via the tracker since 11/13. (Fig 2)  
Currently 380 active patients (October 2015)  
Over 2000 letters generated – email to GP, hard copy to patient

Complex/vulnerable patients managed via the tracker plus phone consultations with Endocrine CNS. Tracker does not removed flexibility to bring patients to clinic if needed

## Benefits

- \*Relevant information contained within a Trust wide system
- \*All members of endocrine team can access tracker to send letters or make notes within tracker while staff Trust wide with access to the system can see records thus improving safety
- \*Communication with GP's is via email and supports prompt information sharing
- \*Cost Savings: Pre tracker - new thyroid for first 12 months £300-400  
Post tracker - £ 200-250
- \*Phone consultations added to a virtual clinic thus attracting standard 'non face to face' tariff

## The future

Undertaking a patient audit to assess satisfaction, clarity of letter templates and number of phone/outpatient attendances in relation to tracker patients

Cross speciality working – developing protocols with Head & Neck specialist nurses to manage low risk thyroid cancer patients using the tracker

Fig 1 Sample tracker screen

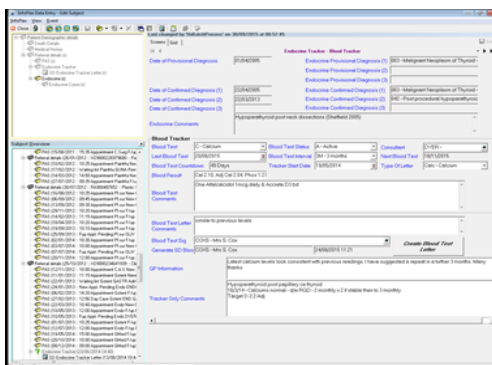


Fig 2 Patient groups on endocrine tracker

