An Audit of Electronic Consultations for provision of Endocrine Specialist Advice

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Introduction:
- E-consultation for Endocrinology was introduced locally in October 2016.
- To enable Endocrinologists to provide advice to GPs in a timely manner, with full access to patient’s electronic record.
- E-consultation for Diabetes already in place since 2010 for both North Kirklees and Wakefield CCGs.
- No prior qualitative assessments undertaken to evaluate workload or time to respond.

Aim:
- Assess the volume of E-consultations received at Mid Yorkshire Hospitals Trust (MYH) for Endocrinology.
- Turnaround time to respond by secondary care.
- Conversion to hospital face to face appointments.
- Cost-effectiveness of the service.

Method and Results:
- 7 month Audit period (1/10/2017-30/4/2018)
- Total of 859 e-consultations were received for Endocrinology: average of 36 e-consultations per week
- Reviewed by Ward Consultant on duty (Rota 1:8) as part of job plan (3 hours/ward week)
- Expectation that response would be provided within 3 working days of request being received.
- Administrative support by Diabetes/Endocrine Secretaries
- Median Time to Respond to E consultation was 1 day (Mean 1.77 day)
- 212/859 (24%) e-Consultations had a subsequent New Face to Face outpatient appointment in Endocrinology

Cost effectiveness:

<table>
<thead>
<tr>
<th>POD</th>
<th>Unit Income</th>
<th>Unit Cost</th>
<th>Unit Surplus (Net)</th>
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<tbody>
<tr>
<td>Endocrinology</td>
<td></td>
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<tr>
<td>New Face to Face Appointment</td>
<td>£251</td>
<td>£295</td>
<td>£25</td>
</tr>
<tr>
<td>E-consultation</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>£24</td>
<td>£10</td>
<td>£14</td>
<td></td>
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<tr>
<td>E-Consultation Charge</td>
<td>£32,618</td>
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<tr>
<td>Face to Face Conversion Appointment/Consultation Charge</td>
<td>£48,972</td>
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<td>Change returning to E-consultations (all Face to Face)</td>
<td>£196,429</td>
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<td>Savings to CCG</td>
<td>£89,558</td>
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Other Benefits:
- Advice provided to GPs/ Practice nurse in advance of hospital appointments, saving time and additional follow-ups impacting on Referral to Treatment pathway.
- Allowing patients to be discharged with recourse to advice as needed in the future.
- Avoiding unnecessary tests done by GPs.
- GP education with links to relevant guidance and documents signposted.
- Fully auditable advice provided will be embedded in the patient record (good clinical governance).
- Trust is remunerated for clinician’s time to provide advice (versus old system).

Conclusions:
- E-consultation provides GPs access to quick specialist advice.
- Enables specialists to provide advice based on information contained within the entire patients electronic record including previous results and correspondence.
- Cost benefit model shows savings to CCG and to MYH
- Low conversion rates implies saving on hospital appointments (cost/capacity), and allow suitable patients to be discharged.
- Opportunity for other specialties to develop E-consultation

Figure: Screenshots of sample E-consultation response

An Associated Teaching Trust