

# A Retrospective analysis of electronic Endocrinology Advice & Guidance via NHS e-Referral Service at University Hospitals Leicester NHS Trust

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## Background

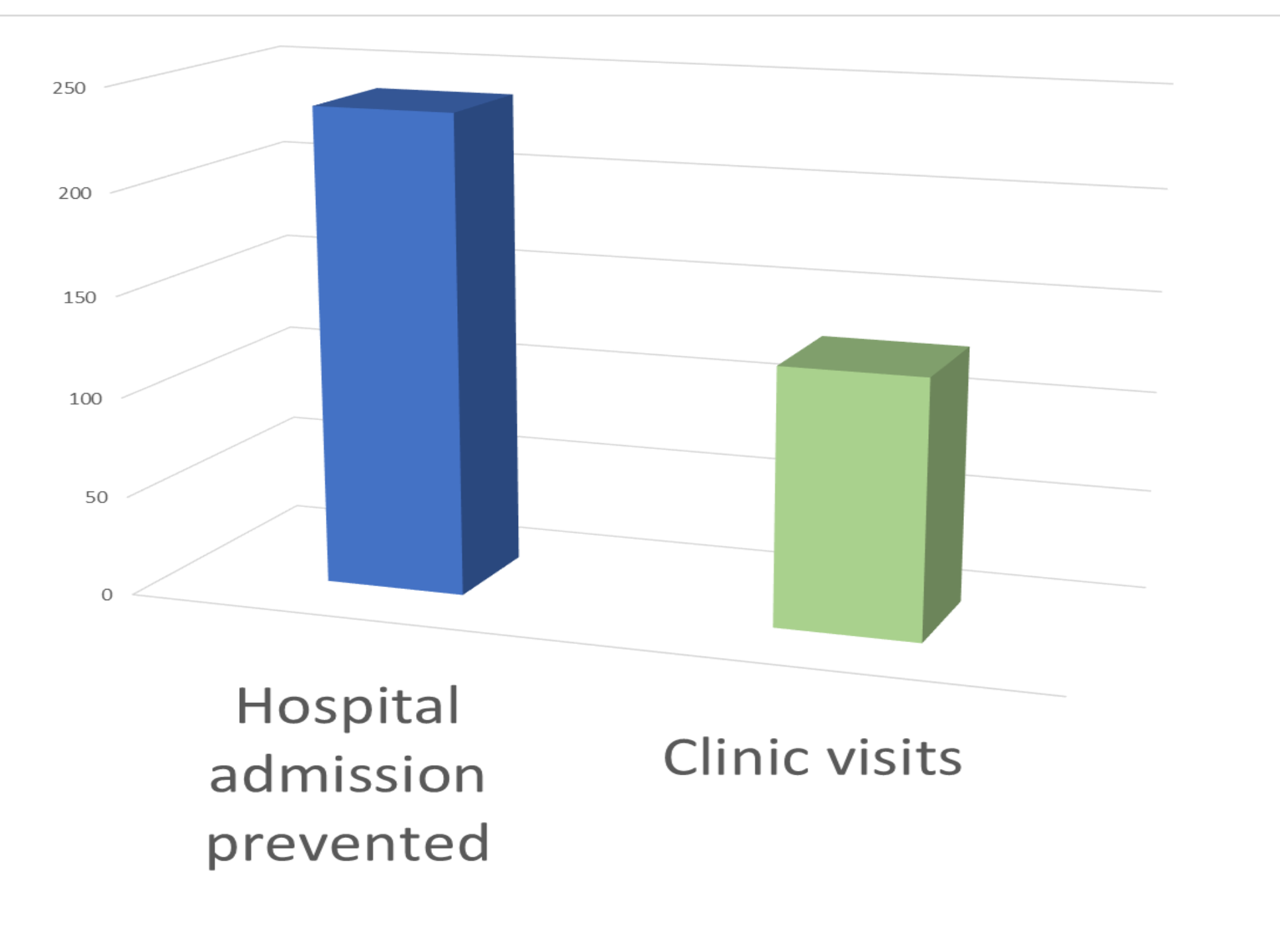
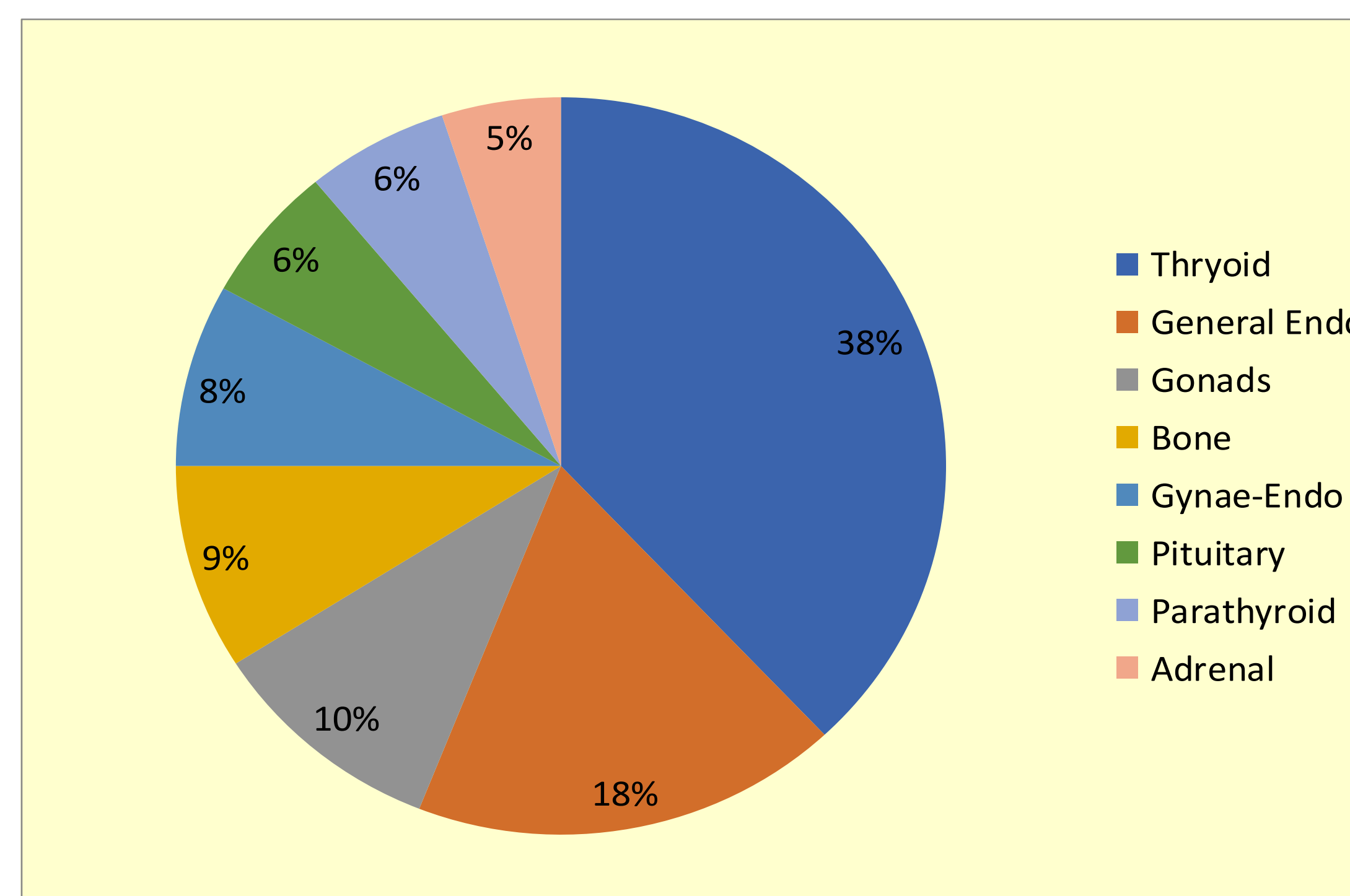
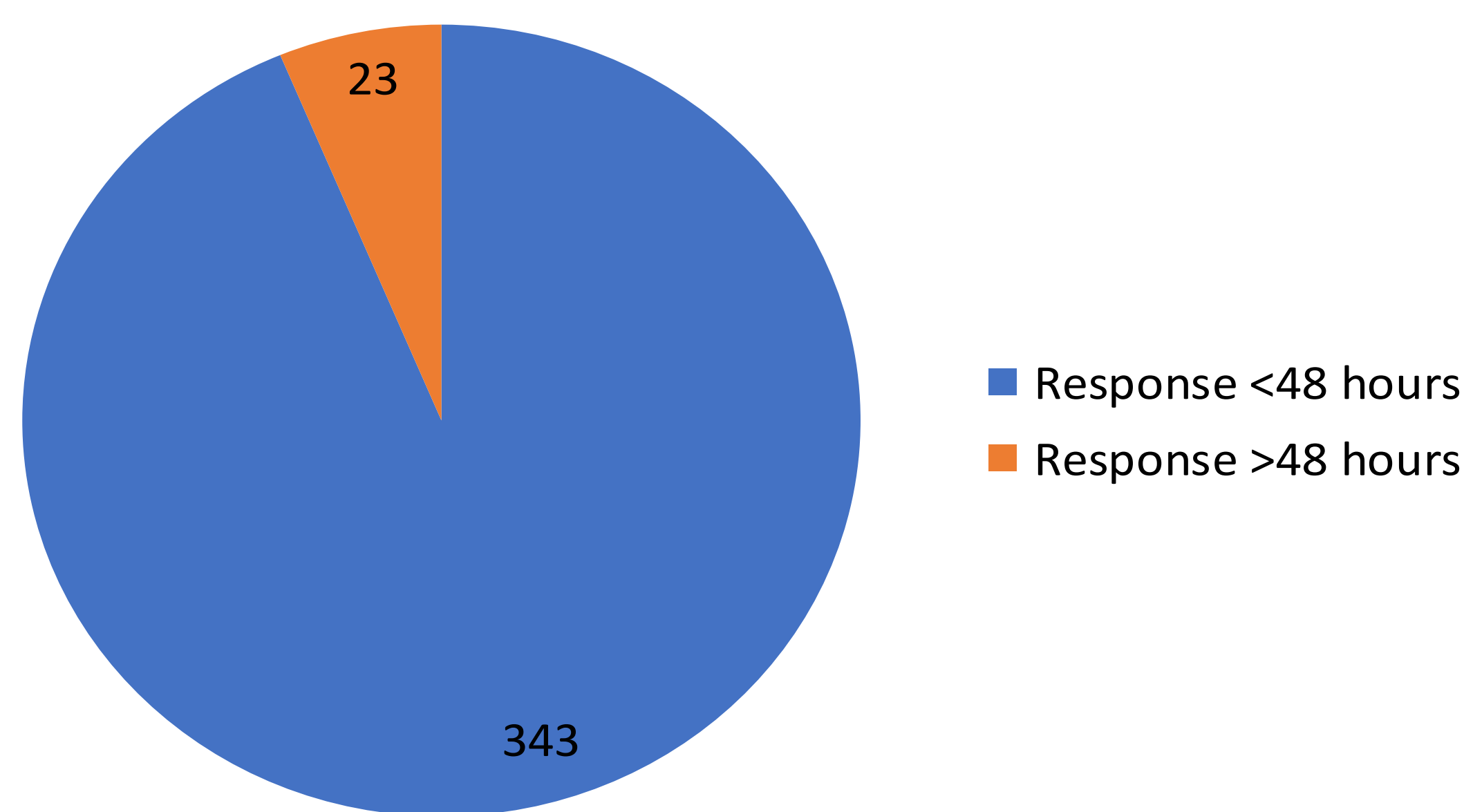
Electronic Endocrinology Advice & Guidance (e-Endo A&G) via NHS e-Referral Service was introduced at University Hospitals of Leicester NHS Trust (UHL) in March 2017 to address General Practitioners' (GP) non-urgent endocrinology clinical concerns.

Primary aims of the service, was to prevent inappropriate outpatient visits, avoid acute admissions and reducing length of time in resolution of queries.

## Objectives & Methodology

To retrospectively evaluate utility of e-Endo A&G for 12-months period, and to estimate whether the service is compliant with National CQUIN of >80% questions answered within 2 working days (48-hours).

Retrospective analysis of all UHL's e-Endo A&G queries (n=366) from Leicestershire GPs from April 2017 to March 2018 was undertaken.



## Results

n=366; 96% answered by Consultants; 4% by Registrars. Referral composition: Thyroid-38%; General Endocrine-18%; Gonads-10%; Bone-9%; Gynae-Endo-8%; Pituitary-6%; Parathyroid-6%; Adrenal-5%. Average response time <48-hours(2 working days)-94% (343/366), against CQUIN target of >80%. <24-hours-83% (303/366). 65% (238/366) queries were resolved preventing an hospital episode. 35% (128/366) resulted in clinic visit, following appropriate workup and/or treatment initiation. Furthermore, at £25 per query, £9,150 income was generated for the Trust.

## Discussion

e-Endo A&G is a clinical governance compliant, time-efficient system resulting in reduction in clinic visits/admissions by 65%. It is recommended for Trusts, who have not yet adopted this virtual system, to avail following benefits:

### For Patients

- Patients' specialty concerns resolved within 48-hours
- Shorter clinic waiting times if outpatient visits necessary
- Prevents travelling to secondary care centers

### For GPs

- Rapid access of Endocrine expertise for non-urgent queries.
- No loss or delay in communication
- Cost saving measure

### For Endocrinology Department

- Prevents inappropriate outpatient visits
- Shorter waiting times
- Priority patients seen earlier
- Income generation
- Registrars training opportunities

### For Trust

- Clinical Governance compliant (audit trial and medico legal)
- Income generation
- Potentially fewer complaints

### For Commissioners

- Ensures the best clinical pathways are accessed with associated outcomes
- Ensures the most cost effective delivery method is utilized
- Supports the delivery for a paperless NHS as set out in the Personalized Health and Care 2020 strategy

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