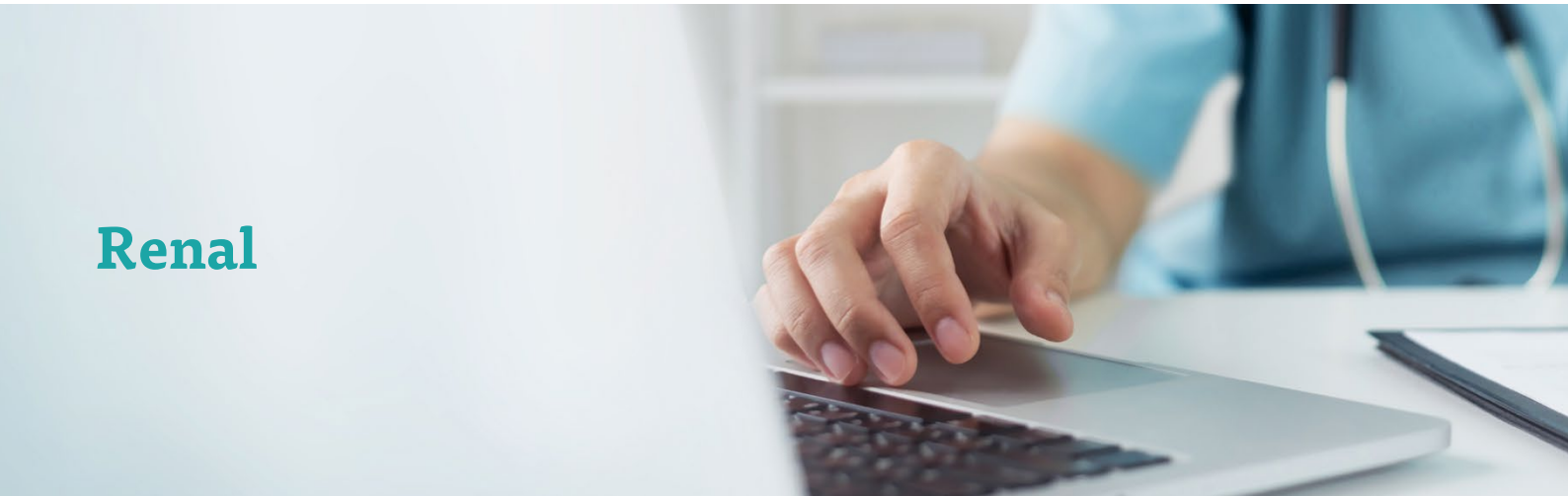




Renal

Background

The Renal Centre at Lancashire Teaching Hospitals provides a regional service for patients across Lancashire and South Cumbria. It receives up to 250 referrals per month from 5 hospitals – Blackpool, Lancaster, Furness, Blackburn, and Chorley.

The centre provides care for patients with kidney failure, renal biopsy, plasma exchange, immunosuppressive therapy and dialysis. Kidney transplants are carried out at Manchester Royal Infirmary, with the Renal Centre providing pre-transplant and post-operation care. The Renal Centre team comprises specialist consultants and specialist nurses, including transplant nurses.

What were the drivers for implementing Patient Pass?

I was the IT lead when Patient Pass was first introduced. We knew that other centres, within the region, had been using it with good feedback. Prior to Patient Pass the Trust used an ad hoc and manual system where contacts came primarily through the switchboard, pagers, and mobiles. We used a Word Document proforma that we asked referrers to complete and email back to us, but we found that some places couldn't embed word to email and so often photos were sent to us, and these were sometimes illegible, poor quality, and cumbersome.

We were getting a high volume of work and although we accepted referrals through a single referral email, the volume was very high and the manual proforma process resulted in very poor-quality referrals. With a word proforma, there was no way for us to ensure that the referrers provided a minimum viable dataset to allow for a meaningful response.

Previously, information was siloed with no real way to know whether the response to the original referral was to go back to same person or not and therefore it was often difficult to provide appropriate continuity of care. The service needed a system that would resolve the issues that we were encountering.

Many of the region's tertiary services sit within Preston – When the Trust were first looking at the case for Patient Pass it was to roll out to all tertiary specialties for it to be a regional solution. Preston services such as Neurosurgery, Neurology, Renal, Vascular, Plastic Surgery, Upper GI are all on the Patient Pass platform. Blackpool uses Patient Pass for Haematology, which was implemented to resolve a service need that they had. Other regional services located in other trusts have shown an interest in Patient Pass having experienced the system as referrers and following discussions of its benefits in regional forums.

How has Patient Pass improved outcomes for patients, staff, and the Trust overall?

The case for change was clear. Patient Pass was a proven solution, having already been implemented in Leeds NHS Trust and Northern Care Alliance NHS FT.

Patient Pass has all the correct internet security, licences and certification and so with no objections from our IT department it was easy to get it up and running. It was easy to develop, test, go live and fine tune very rapidly. It was also easier for us, when developing our referral form, that we were able to reference other services forms and work from them rather than starting from scratch. The Patient Pass team were great to work with and understood the clinical reasons why we were asking for a certain process, and it is encouraging to know that they are happy to always tailor the system and also suggest improvements to us as we go along.

We have seen many benefits to patients, some of these include: -

- **Improved flow** – We can manage and deal with all the referrals within 24 hours and more often than not within 6 hours.
- **Patient transfer** – Patients can be identified for transfer more quickly and nobody gets missed which was a risk with the old system.

There have been definite efficiency gains: -

- **Embedded tools** – The ability to forward the referral to the secretaries to generate an outpatient appointment, using receiver task to request an action from the referrer, and auto closing of dormant referrals greatly reduces the time spent managing the referral.
- **Staff satisfaction** – We are easily dealing with an increase in referrals with the same number of people.
- **Dashboard** – It is very helpful to be able to get metrics from the system. E.g. monitoring the volume of referrals and measuring transfer metrics such as step down from critical care etc. Because it is automatic, this has saved us a lot of time. This allows us easily pull data for regional QI programmes.

- **Auditable** – We are able to record and monitor who has had a consultant bedside review, especially where there are trust tariffs attached this activity.
Patient Pass has also eliminated a key information governance risk by providing a clear trace of the referral exchange that is visible to all relevant parties. This avoids situations where what was recorded locally by referrer does not match the record of the advice provided.
It is good that the information cannot be accidentally deleted or changed, like in a word document. This provides safeguards from retrospective editing and secures the record in line with key information governance principles.
- **Accessibility** – All the information is accessible; everybody from our service and the referring team can see previous information that has been shared.

The volume of referrals is increasing. However, the system has enabled us to improve the quality of the referral that we receive and manage the higher volumes of referrals easily, but there is always a balance to be struck between making the referral accessible and asking for too many mandated information fields.

Testimonial

“Patient Pass provides an auditable referral pathway that has enabled us to improve the quality of the referral that we receive. Information that is fed back is immediately visible for the referrer. Previously, there were concerning examples of inaccurately documented advice. This is impossible with Patient Pass as the information is clearly visible to all the relevant care teams. Patient Pass has greatly improved our capacity for managing referrals in a timely way across the six acute hospitals to which we provide Renal services”.

— Consultant Nephrologist & Physician, Clinical Director Renal Medicine, Associate Clinical Information Officer