

University Hospitals of Leicester NHS

NHS Trust

Caring at its best

# GP Newslette Image: Construction of the second state Image: Construction of the second state

Starting in April, the HPB service will be offering 'Advice and Guidance' clinics through Choose and Book.

The clinics will be available under the 'Hepatobiliary & Pancreatic specialised surgery – H&P-LGH\_RWE' service. More information will follow next month.



# Important information:

When ordering ICE Pathology Tests and Investigations, it would be helpful if you could **keep the Clinical Detail information as concise as possible**. The Laboratory System has a limit of **240 characters** for automatic filing of free text, otherwise the information files as supplementary information only.

This limitation of the system recently led to an unnecessary referral of a patient to the Emergency Department. Although the full patient history had been entered into the clinical details field on ICE, this could not be seen readily on the laboratory system as it was too long. Following Laboratory protocol, the abnormal results were telephoned to the Out of Hours service, who arranged for an urgent admission.

Had a more concise Clinical Detail been

entered, this would have been easily seen and the results deemed 'normal' for that patient, with no action necessary. Pathology continue to encourage the use of ICE for test requesting. Figures for the

last two months show 85% of City GPs



and 90% of County GPs are using the system, with over 200,000 orders made. These huge participation figures make an enormous difference to the smooth functioning of the department and our service to you.

Many thanks for your support and we would encourage you to keep up the good work.

For further information or if you have any questions, please contact Pathology IT on 0116 258 7634

# Leicester's new bowel cancer service launched

Serving a population of nearly one million people, a new bowel cancer screening centre has been opened at Glenfield Hospital. Previously managed by Kettering General Hospital, UHL took over the management of the new 'University Hospitals of Leicester Bowel Cancer Screening Centre' on 10th February.

The Centre will be working with the Leicestershire and Lincolnshire area team and Public Health staff to support the increase in the number of people attending bowel screening to save more lives. Bowel cancer is the third most common cancer in the UK. If detected early, there is more than a 90% survival rate, reducing the need for treatments such as chemotherapy, radiotherapy and even surgical intervention.

Screening for bowel cancer is currently offered to all 60 to 69 year olds throughout the country and is also being rolled out to 70 to 74 year olds. Every two years all men and women are automatically invited to participate. If they agree, a screening test is sent to their home. After the age of 74, people can self-refer. Anyone with an abnormal result – about two in every 100 – will be invited to visit the centre for a colonoscopy.

A second screening programme, Bowel Scope, will be introduced towards the end of 2014. All men and

women aged 55 years will be invited for a one-off lower bowel examination (flexible sigmoidoscopy).

> If detected early, there is more than a 90% survival rate



For more information about the Bowel Cancer Screening Centre, you can visit **www.leicestershospitals. nhs.uk/bowelcancer** 

Karen Emery Programme Manager/Matron

Dr Richard Robinson Clinical Director

# **Re-direction of Clinical Letters**

In UHL we are working hard to reduce the number of clinical letters that are sent to the incorrect GP practice.

When a practice receives a UHL letter inappropriately it should be returned to UHL. Unfortunately practices have also been returning post to us that has been sent to them from other organisations. Examples include insurance forms, Leicester Partnership Trust letters, non-Leicester hospital letters (Spire and Nuffield) and council documents (including child protection files).

### By law we should not see this post and practices who send this type of post to UHL may be breaching patient confidentiality.

This post will now be returned directly back to you.

Practices must ensure that post received in error is returned securely to the originating organisation.

A 'Listening into Action' scheme is currently in progress at UHL to identify and resolve the many reasons why letters may end up at the wrong destination. We are serious about reducing the quantity of misdirected mail and expect to see quality improvements as a result of this scheme and a drop in inappropriately addressed mail being sent to GPs.

# For misdirected post from UHL

please send in a envelope to Data Quality, Rogers Ward, Leicester Royal Infirmary





# Leicester Fertility Centre

Thank you for completing our survey last month. We have taken your suggestions/comments on board and are working to improve communication and information sharing with yourselves.

Working with the CCGs, we aim to simplify the existing 'Referral criteria' guideline without any additional cost burden.

The website for Leicester Fertility Centre is also currently undergoing a 'makeover' to include information on current state of the art investigations and treatments we provide, along with our success rates. In the coming months we will keep you updated, so please watch this space!

If you have any queries please do not hesitate to contact us on 0116 258 5922 or www.leicesterfertilitycentre.org.uk



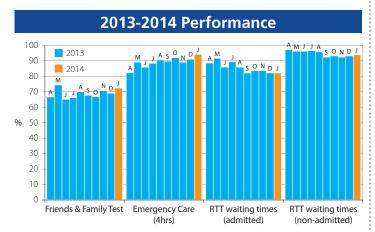
# Progress against quality and performance standards

This month we wanted to share with you our performance against the quality outcomes, which is generally good.

### **Referral to Treatment (RTT)**

We have seen some improvements in our RTT non admitted

**figures.** In January, 93.4% of patients were treated on time. Unfortunately our waiting times for admitted patients was less satisfactory at 81.1%. A recovery plan has been agreed with our commissioners to clear the backlog of patients and achieve the access standard of 90% (admitted) and 95% (non-admitted). We have seen an increase again in our Friends and Family score despite it being an incredibly busy time.



### **Emergency performance**

On the issue of emergency performance, we had a better month in January (our best for 15 months), in part due to 'Super Weekends' when we invested extra resource over the weekends following the Christmas break. This fell back in February. In short, admissions are at record levels with 9.5% more patients admitted in February compared to January, discharges are at record levels, medical length of stay continues to compare well with other Trusts and Discharge Transfers of care (DTOC) are relatively high. We had every bed in UHL open but we could not cope when so many patients needed to be admitted.

In terms of improving the situation, we are concentrating on ensuring patients flow through the system as smooth and as rapid as possible. This is good for patients and helps to reduce pressure on bed capacity. We have been working with colleagues from health and social care to help improve the discharge processes and will accelerate the work already underway. The daily discharge census, which has been successfully in place at the Royal (on 13 medical wards) for a couple of months is being rolled out at Glenfield over the next week and then the plan is to roll it out to the rest of the areas. We will also be running two further Super Weekends over the 22nd/23rd and 29th/30th March.



We have also gone out to recruit more geriatricians for our elderly care wards as part of our 7-day working.

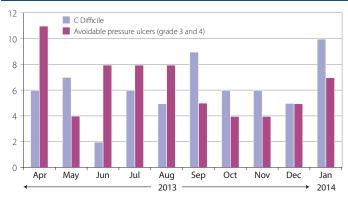
Richard Mitchell Chief Operating Officer

### C Difficile

There was a worrying increase in the number of C.diff cases during January, which brought us very close to our target for the year of 67. **There were no cases in February** which stands us in a good position to stay within the full year number. This will make us unusual amongst hospital trusts.



### 2013-2014 Performance



### Cancer performance

The overhaul of the Cancer Centre within UHL continues to reap rewards as reflected in our performance against Cancer waiting time targets.

# 62 day performance (target 85%) from referral to first treatment remains above the national average for quarter 3 just as for

**quarter 2 at 87.3%.** This transformation has been achieved against a national trend of increasing difficulty with this target. In January UHL treated 89.5% of its cancer patients within 62 days of referral compared with 83.4% nationally. UHL was ranked 150th out of 168 Trusts nationally for the first quarter of 2013/4. In the third quarter we are ranked 75th.

Two week wait performance (target 93%) from referral to review at UHL has also improved. For quarter 3 we have seen 95.2% within two weeks. In the East Midlands overall the figure is 94.4%.

The Trust continues a number of work streams both internally and together with the CCGs to continue to improve the care of our cancer patients. These include work to use Choose and Book to give patients real appointments at the time they see their GP when they are told they may have cancer, and for this appointment to be offered within 7 days rather than 14 as currently. Internal processes to streamline diagnosis, staging and treatment are beginning to have real impact, with a current focus on improving access to oncology once the decision to refer has been made.

Any feedback or suggestions for our cancer patients would be gratefully received by the Cancer Centre, please contact via email **matthew.metcalfe@uhl-tr.nhs.uk** 

### Matt Metcalfe

Cancer Centre Clinical Lead, Consultant HPB Surgeon

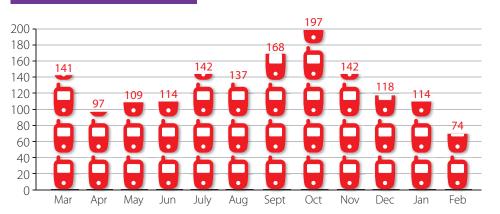


# GP hotline Tel: 0116 258 4858

### Highlight report February 2014

Since the GP hotline was launched in May 2012, it has received the following number of calls:

### Total number of calls



# Clinics and services offered to GPs for potential admission avoidance

A directory of service for Admission Avoidance Clinics can be found by clicking here **www.leicestershospitals.nhs.uk/professionals/potential-admission-avoidance-services** The directory includes details of clinic opening times, referral criteria, contact numbers and wait times. Examples of fast access clinics included in the directory are the Symptomatic Breast Clinic, Frail Older People and Stroke / TIA.

# Hepatobiliary and Pancreatic Team Charity Bike Ride

Our second charity bike ride from Leicester to Skegness to raise money for our pancreatic and liver cancer research trust fund will take place on **Saturday 21st June 2014**.

The HPB Surgical Unit in Leicester is involved in several research projects for pancreatic cancer and liver cancer. Pancreatic cancer is the fifth leading cause of cancer related death in the UK. Liver cancer is the third-fastest increasing cancer in males and the fifth fastest in females (increases of 45% and 33% respectively, in the last decade). This increase may reflect rising alcohol consumption and subsequent higher rates of cirrhosis of the liver. However, research into both of these areas are poorly funded so we are trying to raise money.

In May 2013 the HPB medical and nursing

team joined forces with patients and their family and friends on an 80 mile charity bike ride from Leicester to Skegness. As a strong team of 35 participants the team raise over £20,000. The ride was a huge success in terms of funds raised which helped improve the local profile of our HPB unit. The bike ride also gained significant local media coverage and raised the profile of pancreatic cancer.

Due to the success of the ride and popular demand, we have decided to repeat the challenge again this year to raise funds for research into both liver and pancreatic cancer within the unit.



# GP hotline **online**

You can email requests to the GP hotline through our website. Your request will be actioned in real time between the hours of 9am – 6pm Monday to Friday.

Access the online form at: www.leicestershospitals.nhs. uk/professionals/gp-hotlineonline-request-for-help/

Alternatively, you can ring the GP hotline on **0116 258 48 58** and press option 2.





**If you are up for a challenge** and want to join in the bike ride, sponsor the event or just come along and support the team please contact Cris Pollard, Lead HPB Nurse Specialist

cristina.pollard@uhl-tr.nhs.uk

You can donate by visiting www.justgiving.com/TeamHPB



Thank you very much for your support



GP education and evidence of our learning has never been at a more important stage. Here in Leicestershire we are working together as providers of GP education to support a good range of quality learning events. Through collaborative work we have created a new web page that should provide you with all the information you will need for your appraisal and revalidation, plus a CPD calendar for the upcoming year. www.llrapproisal.co.uk

### Dr Leslie Borrill

Locality Clinical Lead, GP Beaumont Leys



# GP Education

## Events attended by UHL consultants:

Wednesday 19th February 2014 City CCG Protected Learning Time King Power Stadium

Gastroenterology and Cancer 2 week wait Mr Matt Metcalfe

## Forthcoming GP education events:

Musculoskeletal Core Clinical Skills - training for GPs Saturday 10 May 2014 "Primary care refresher on musculoskeletal history & examination skills" Glenfield General Hospital Course Fee £15 - to book: contact Nichola Coleman

on 0116 256 3016 Nichola.coleman@uhl-tr.nhs.uk

# For further information about our GP educational events programme, please visit:

www.leicestershospitals.nhs.uk/professionals/gp-education/

# Consultant update

Starters

Philip Darbyshire Children's medicine

If you would like more information about any articles in the newsletter or have suggestions for future editions, please do get in touch.

Jade Atkin or Liz Sahu 0116 258 8598 / 07432 623 350 jade.atkin@uhl-tr.nhs.uk liz.sahu@uhl-tr.nhs.uk

### Starters

Kim Gregory

**Sports Medicine** 

# And finally...

**For general information** such as referring to us, GP education and previous editions of the GP newsletter, you can find it all (home or at work) by clicking here:

www.leicestershospitals.nhs. uk/professionals/

