

# GP Newsletter

*Caring at its best*



Welcome to the May edition of the GP Newsletter

## Transforming End of Life Care

In England, over 50% of patient deaths occur in an acute hospital setting and locally, within UHL, there were 3086 deaths from April 2012 to March 2013.

**It is vital that patients have access to high quality palliative and end of life care across all healthcare settings.**

To improve the quality of end of life care, we are participating in a national pilot called 'Route to Success'. This involves

embedding key enablers into ward based areas, including the AMBER care bundle, individualised end of life care plans and when appropriate, advance care planning and access to the 'rapid discharge home to die' pathway.



## The AMBER care bundle

The AMBER care bundle is being implemented across all three hospital sites. The care bundle provides a systematic approach to manage the care of patients who are facing an uncertain recovery and who are at risk of dying in the next one to two months.

It encourages a multidisciplinary approach to decision making, with the views and preferences of the patient and those who are important to them (such as their next of kin) being identified and taken into account.

It also promotes documentation of a clear medical plan including decisions about escalation of treatment and resuscitation. The AMBER care bundle helps patients receive care tailored to their individual needs and ensures they are given information in a timely manner, providing this is what they want. The opportunities to undertake advance care planning, including around the time when they are dying, means that if they deteriorate during admission or in the future, these can be taken into account.

To date, 20 wards have received training and are using the AMBER care bundle to support the care of their patients. It is being introduced on further wards in the coming months.

### Education

Education is key to the sustained delivery of high quality end of life care and this is a priority within UHL. The end of life care facilitators are delivering education to a huge variety of staff groups within the Hospital, including ward and non-ward based staff.

A key success within the education programme is the Quality End of Life Care for All (QELCA) programme which is being delivered in collaboration with UHL, LOROS and Help the Hospices. This has empowered generalist nurses within UHL to be able to make a sustainable difference to the experience of dying patients and their relatives / carers. We have seen a number of positive changes to care as well as a problem solving approach to local issues on the ward.

### Ongoing work

This is only part of the work we are doing across Leicester's Hospitals. For example, we have recently introduced new interim guidance to support the care of people identified as being in the last few days of life. We are also working with GPs to ensure timely and appropriate communication about dying patients.

**the  
AMBER  
care  
bundle**

**For further information about any of these initiatives, or about end of life care issues within UHL, please either contact the team on 0116 204 7951 or email [endoflifeissues@uhl-tr.nhs.uk](mailto:endoflifeissues@uhl-tr.nhs.uk)**



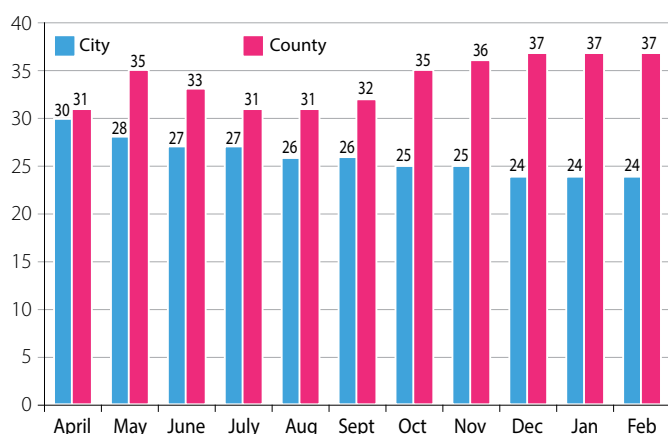
# Delayed Transfers of Care

We are required to complete a national census on delayed transfers of care every week.



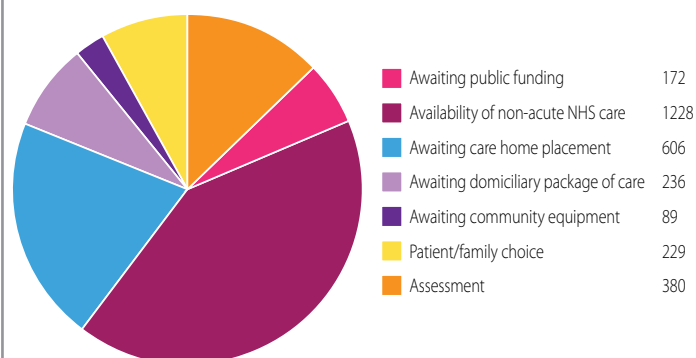
Since April 2013, the average number of patients whose transfer of care is considered to be a 'delay' has fallen for City patients from 30 to 24 in February 2014 whilst County patients have averaged 37 for December, January and February.

## Average Monthly Patients Delayed



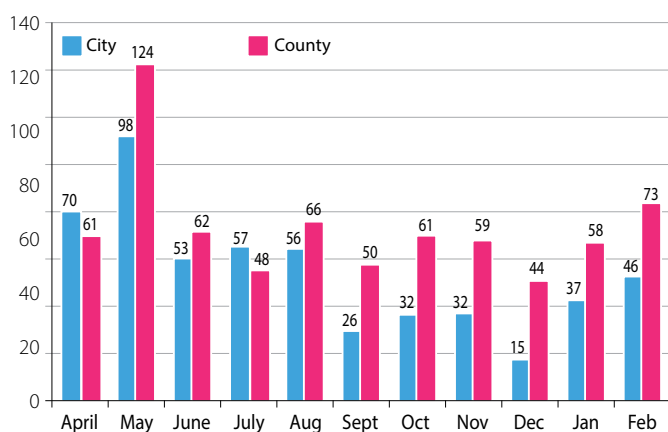
Between April 2013 and February 2014, the main reason for a delayed transfer of patient care for both city and county patients was the lack of availability of non-acute NHS care. This accounted for 41% of the delays followed by awaiting a care home placement at 21%.

## Reasons for delayed transfer of care April 2013 - Feb 2014



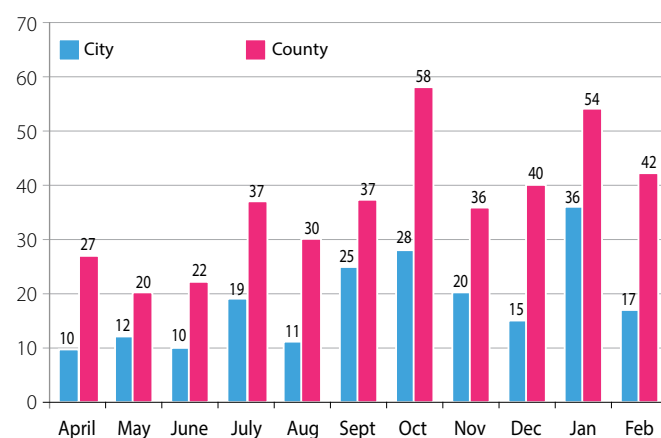
Non acute NHS care delays include reasons such as lack of bed availability for rehabilitation, palliative care in a community hospital and stroke rehabilitation in the community.

## Delays due to availability of non-acute NHS care by city and county patients



Delays due to care home placements relate to both nursing and residential care availability as well as patient choice and the availability of next of kin to choose and view placements. Waits can occur whilst Funding Panels agree packages of care for complex patients and for these to be put in place by Social Care and continuing healthcare.

## Delays due to awaiting care home placement by city and county patients



We would like to work more closely with GPs to assist your patients in a safe discharge from hospital and would be interested to hear how this could be achieved together.

Mandy Gilhespie Specialist Nurse for Discharge  
Phil Walmsley Head of Operations

# THE DOCTORS' DINING CLUB

## The next Doctors Dining Club will take place in June 2014

The evening provides an opportunity for GPs and Consultants (local to Leicester, Leicestershire and Rutland) to get to know each other over a meal and develop informal professional relationships between and within primary and secondary care.

To find out more about the club and to get yourself on the mailing list, please contact Ron Hsu [rth@leicester.ac.uk](mailto:rth@leicester.ac.uk) 0116 229 7263

## The Hot Gallbladder Service

The Hot Gallbladder Service is a new pilot service provided by the Hepatobiliary (HPB) team to patients presenting with gallstones and resulting complications.



Liver, Gallbladder, Bile duct, Spleen, Duodenum & Pancreas

It was introduced at Leicester General Hospital in August 2013 to provide better patient care, reduce both hospital length of stay and readmission rates. The aim was to offer laparoscopic cholecystectomy (gallbladder surgery) within 14 days of presentation and reduce overnight admissions.

During the pilot, all patients admitted with biliary colic, acute cholecystitis or pancreatitis as a result of gallstones were

booked onto a planned elective surgery slot within 14 days of presentation if they met the criteria for day case surgery. Dedicated slots for both ultrasound and theatre were made available for these patients by the HPB team.

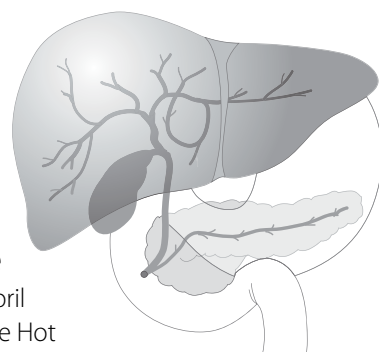
**Results**  
From August 2013 to February 2014, 88 patients were booked for gallbladder surgery. 91.8% of patients were discharged within 24 hours of completed surgery and there was a reduction in median length of stay from 3 to 1 days. All patients received a phone call at 48 hours as part of their day case gallbladder surgery follow up.

### Future

Since April 2014, the Hot Gallbladder Service has been expanded across the Trust. This will now include all patients presenting at Leicester General and Royal Infirmary. There will be six theatre slots each week available to allow us to provide efficient and high quality care to these patients.

### Mr. Deep J. Malde

Consultant General, Hepatobiliary and Pancreatic Surgeon



## Pancreatic and Liver Cancer Research Charity Team Bike Ride

There are many ways you can sponsor our team taking part in our second annual charity bike race from Leicester to Skegness

You can visit our website [www.justgiving.com/TeamHPB](http://www.justgiving.com/TeamHPB) or by simply texting "Text THPB50 £2/£5/£10" to 70070

The ride is over 80 miles and will take place on Saturday 21 June 2014. The team consists of surgeons, anaesthetists, nurses, theatre staff, managers, patients, family and friends. So far we have received lots of very generous intentions to support our

cause and we now need to translate these into donations on our website. Many thanks for your support.

**Cris Pollard**  
Lead HPB Nurse Specialist



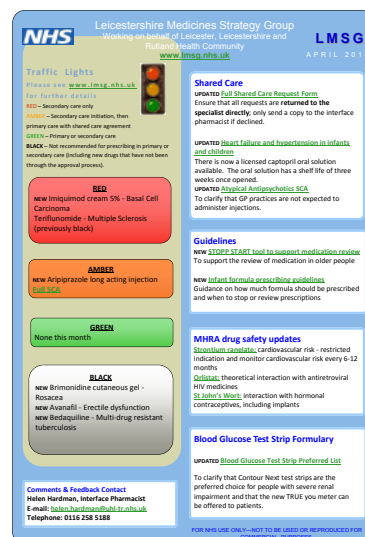
## Leicestershire Medicines Strategy Group (LMSG) newsletter

The new Leicestershire Medicines Strategy Group (LMSG) newsletter can be accessed here:

[www.lmsg.nhs.uk](http://www.lmsg.nhs.uk)

The newsletter has been designed to keep you informed of LMSG outcomes and will be distributed monthly.

**Helen Hardman,**  
Leicestershire Health Community Interface Pharmacist





# Pioneering Dementia Support Service launched at Leicester Royal Infirmary

A new service has been launched by Alzheimer's Society at Leicester Royal Infirmary to help people live well with dementia.

## The Hospital Liaison Dementia Support

**Service**, which launched on Tuesday 22 April, will see three members of staff from the charity working from the Royal in a bid to improve patient experience, reduce time spent in hospital and readmissions as well as provide valuable information, advice and guidance.

The service is centred around the completion of a specialist document developed by Alzheimer's Society called 'This is Me', which details things that are important to the person with dementia

like food preferences, interests and hobbies.

Any person then involved in their care will have easy access to the things most pertinent to their happiness and wellbeing.

In addition to providing support within the hospital setting, Alzheimer's Society Dementia Support Workers can visit people with dementia and their families who have a planned hospital stay before being admitted, providing the opportunity to ask questions, get information and complete a 'This is Me' leaflet.



**Anybody can refer into the service and self-referrals are also accepted.**

**For more information contact Jo Rodwell (Dementia Support Manager) or Sally Grundy (Services Manager) on 0116 231 6925 or email [jo.rodwell@alzheimers.org.uk](mailto:jo.rodwell@alzheimers.org.uk).**

## Burn Referrals

To ensure patients with burns in Leicester are managed in the right service at the right time, they should be treated within the nationally agreed burn care thresholds.

In particular, it is recommended that children should have a topical antimicrobial dressing and burns that are full thickness or burns to areas of special interest e.g. hands, face, feet, perineum should be referred into a specialist Burns Service which we offer at Leicester Royal Infirmary.

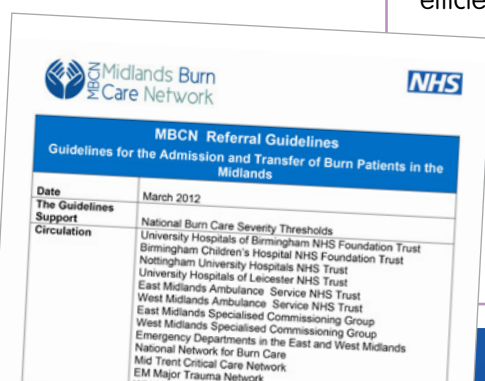
The full threshold document for referrals can be found on the Midlands Burn Care Network website and by clicking here [www.midlandsburnnetwork.nhs.uk/Library/MBCNThresholdsFinalDocument.pdf](http://www.midlandsburnnetwork.nhs.uk/Library/MBCNThresholdsFinalDocument.pdf)

We are experiencing some cases where there is a delayed presentation into the Burns Service when an earlier referral may have been more appropriate.

Our Burns and Plastics Nursing Outreach Team are happy to discuss any patients with ongoing burns, or patients that may require debridement with complex wound management needs. Home visits can be arranged and cases discussed with the Burns and Plastics Consultants. This service has been successfully running for three years, with an aim to provide expert clinical care within the comfort of the patients own home.

## Claire Porter

Lead Nurse for Burns and Plastic Surgery



## New Theatre Arrivals Area for surgical patients officially unveiled

A £1.6m area for patients having surgery at Leicester Royal Infirmary was officially opened on 26 March.

The Theatre Arrivals Area (TAA), provides a facility for patients to be admitted on the day of their surgery, to be processed by the nursing staff and to meet their anaesthetist and their surgeon. They then make the short journey into theatre for their operation. The concept of a TAA is well-received within the NHS and is designed to make the arrivals process for ambulatory surgical patients as smooth and efficient as possible.



Patients are now welcomed in the reception area of a brand new unit and their personal details checked, before they are asked to take a seat in the waiting area. They are then assessed by a nurse in a private admission/consulting room and seen by their anaesthetist and surgeon, before waiting in the comfortable sub-wait area for their operation.

# Calendar of forthcoming GP education

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.llrappraisal.co.uk](http://www.llrappraisal.co.uk)

Dr Leslie Borrill

Locality Clinical Lead, GP Beaumont Leys



## GP Education

For further information about our GP educational events programme, please visit:  
[www.leicestershospitals.nhs.uk/professionals/gp-education/](http://www.leicestershospitals.nhs.uk/professionals/gp-education/)

### Forthcoming GP Education Events

#### Joint Injection Course:

What to inject, what not to inject and how to inject

Saturday 7 June 2014

Leicester General Hospital

Course fee: £50

To book please contact Nichola Coleman: 0116 256 3016

[nichola.coleman@uhl-tr.nhs.uk](mailto:nichola.coleman@uhl-tr.nhs.uk)

#### A Refresher in the Management of Eczema in Primary Care

Wednesday 25 June 2014

Belmont Hotel, De Montfort Street, Leicester LE1 7GR

(Sponsored by Johnson & Johnson) Preceded by a hot knife and fork buffet from 6.30pm to 7.30pm.

To book please contact Marisa Woolmer, Executive Territory Manager, Dermatology Team, Johnson & Johnson. 07795 300547

[marisa.woolmer@apodi.co.uk](mailto:marisa.woolmer@apodi.co.uk)

#### Two Day Practical Paediatric Allergy Course

Wednesday 2 July 2014

Thursday 3 July 2014

Glenfield General Hospital

Course fee: £100 (1 day) or £150 (2 days)

#### Day 1: The Allergic Child

Course objectives: to provide practical advice about a wide range of non-food allergic conditions with a focus on diagnosis and treatment supported by practical sessions.

#### Day 2: The Child with Food Allergy

Course objectives: to provide practical advice on all aspects of the diagnosis and management of food allergies with a focus on the clinical presentation of food allergy and the treatment which will include workshops on dietary avoidance and alternative dietary options.

To book a place please contact Warren Luyt

[childrensallergy@uhl-tr.nhs.uk](mailto:childrensallergy@uhl-tr.nhs.uk)

### Consultant update

#### Starters

Rajeev Vedantham	Anaesthetics
Hemant Bhavsar	Children's
Raghuram Shivram	Metabolic Medicine
Aashish Mokashi	Ophthalmology

#### Leavers

Corinne Camilleri	Respiratory Service
Fouzia Jabeen	Pathology
Shawqui Nour	Children's Surgical

#### Retired

Raymond Symonds	Oncology
Elaine Carter	Children's Medical
David Ward	Plastic Surgery



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](mailto:jade.atkin@uhl-tr.nhs.uk)

[liz.sahu@uhl-tr.nhs.uk](mailto:liz.sahu@uhl-tr.nhs.uk)

### 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:

# Leicester Diabetes Centre: Clinical Newsletter

Clinical Research Studies within the Leicester Diabetes Centre

## Actively recruiting for the following studies:

### Did You Know:

James Lind in 1747 conducted the first clinical trial which showed that citrus fruit cured scurvy.

## New studies coming soon

- **Award 9**
- **Canvas R**
- **Two Ertugliflozin Studies:**  
**Cardiovascular and Diet & Exercise**
- **Finesse**
- **Exscel**
- **eGFR**

Watch this space for more details

## Contact Us!

Please phone or call into the Leicester Diabetes Centre and we will be happy to discuss the study with you or the patient. If you have any patients that would be suitable for any of the studies or would like more information about any of the above research studies contact the research team on the numbers above. Thank you

**Are your patients interested in Diabetes Research? Do you have patients that would be suitable for our clinical studies? If so please email or call the study contact for more information. Leaders in Diabetes Research, helping to create a better future.**

### Lixilan - O study

This study is looking at the efficacy and safety of insulin glargine v GLP lixisenatide v glargine/lixisenatide in a fixed ratio combination. We are looking for people with type 2 diabetes on metformin alone or in combination with a Su or nateglinide or SGLT-2 inhibitor. The study lasts 36 weeks (9 months) and the patient has to come to the dept for 12 visits.

**Recruitment target:** 8 patient  
**Recruitment till:** 28/10/14

#### Contact:

Helen Bray - lead nurse  
T: 0116 258 4408  
e: [helen.bray@uhl-tr.nhs.uk](mailto:helen.bray@uhl-tr.nhs.uk)

### Omneon study

This study is a cardiovascular outcome study looking at once weekly DPP4 v placebo. We are looking for people who are over 40 years of age with preexisting vascular disease such as MI, CVA, and peripheral disease.

The patient can be on any medication except: GLP1 or DPP4

**Recruitment target:** 7 patient  
**Recruitment till:** 28/10/14

#### Contact:

Helen Bray- lead nurse  
T: 0116 258 4408  
e: [helen.bray@uhl-tr.nhs.uk](mailto:helen.bray@uhl-tr.nhs.uk)

### The GWP42004 (Cannabinoid) Study

This study is a randomised, double blind, placebo controlled, parallel group, dose ranging study for a new oral medication(GWP42004) as an add on to metformin in participants who have type 2 diabetes. The study lasts 14 weeks and patients will attend for 5 visits to the clinic in total. Patients need to be taking more than 1000mg metformin in order to participate.

**Recruitment Target:** 6-8 patients  
**Recruitment till:** 2015

#### Contact:

Bharti Patel - Lead nurse  
T: 0116 258 4725  
e: [bharti.m.patel@uhl-tr.nhs.uk](mailto:bharti.m.patel@uhl-tr.nhs.uk)

### Carmelina study

Randomized, double blind, placebo controlled Cardiovascular Safety & Renal Microvascular outcome study with Linagliptin 5mg once daily in patients with type 2 diabetes at high vascular risk.

**Duration of Study:** 48 month  
**Recruitment target:** 15 patients  
**Recruitment till** 2016

#### Contact:

Carrie Wilson-lead nurse  
T: 0116 258 4499  
e: [Carrie.wilson@uhl-tr.nhs.uk](mailto:Carrie.wilson@uhl-tr.nhs.uk)



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Committed to Growing International Research, Education & Innovation