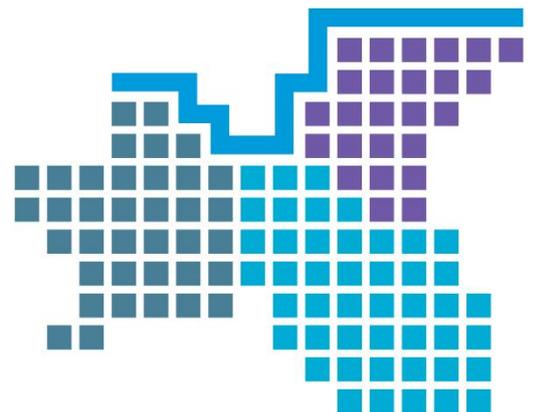


# **Referral Management Programme – Report to the CCG Board**

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## Executive Summary

The Wandsworth CCG Referral Management Programme (RMP) aims to improve the quality of referrals thereby reducing the number of patients referred inappropriately to secondary care.

Achievements through the programme over the past year include:

- More than 6347 advice requests have been sent via Kinesis, with 57% of these resulting in a saved referral. Kinesis savings to date total £482,384.70;
- 100% of GPs attending referral management education sessions have reported that what they have learnt will help them make better referral decisions in future;
- Successful roll-out of DXS, the clinical decision support tool across practices;
- Participation of GP practices in peer review and education has increased;
- Launch of new pathology scheme which has already shown a reduction in test rates.

Over the next year, the RMP Team will continue to expand and develop key elements of the programme, with the aim of ensuring it becomes embedded into the day to day working of all practices, so that patients can continue to be treated in the right place, at the right time and by the most appropriate professional for their needs.

# 1. Introduction

## 1.1. Background

In October 2010, the Wandsworth Referral Management GP Working Group was established to examine how effective referral management could help to improve care, streamline patient pathways and reduce inappropriate referrals.

Wandsworth GPs made thousands of referrals to outpatient clinics every year, with significant financial implications. There was also substantial variation in the quality and rate of referral between GPs and GP practices.

The group's remit was to review national referral schemes, assess feedback from stakeholder groups, develop a proposal for Wandsworth CCG, and to provide clinical input to the referral management process.

Around the same time, many London boroughs were implementing referral management centres. Wandsworth GPs agreed that a new approach to referrals was needed, but decided to explore the development of a programme of education and peer review, rather than a centre, which would enable GPs and patients to maintain control of their referral decisions.

The Wandsworth CCG Referral Management Programme is a suite of innovative initiatives which support Wandsworth GPs in making high quality referrals and improve the patient pathway and experience. As such, the programme aims to realise an overall reduction in outpatient attendances across the Borough, by reducing the number of patients referred inappropriately to secondary care.

The programme has been created using input from GPs, patients and clinical providers and includes the following work-streams:

- Accurate referral information: using EMIS data sourced from the practices;
- Shared learning and best practice: A programme of peer review and education;
- Streamlined referral processes and pathways: Supporting clinical decision making;
- Improved communication between clinicians: using the Kinesis on-line advice tool.

Unlike referral management centres across the country, the Wandsworth CCG programme seeks to empower and educate GPs to make the right referral decisions in collaboration with their patients. The programme has been running since June 2012.

## **1.2. Purpose**

This paper provides an update for Board members on overall performance and key programme initiatives.

## **2. Key Initiatives**

The Referral Management Programme has previously consisted of four core work-streams, managed by a team of two full time CCG staff responsible for administrating all aspects of the programme.

This year the team has successfully introduced a fifth element to the programme. In response to feedback from GPs and patients across the borough, the RMP Team has successfully rolled-out the clinical decision support tool, DXS.

The Team seeks to continuously develop, expand and improve the programme and the following provides an update on each of the work-streams over the past year.

### **2.1. Peer Review**

Peer reviews are GP-led and take place on a quarterly basis at each GP practice. All GPs from the practice attend, each bringing referrals for discussion within the group so that learning and best practice can be shared. Practices are given three months to complete each peer review; they then provide feedback to the CCG's RMP Team.

Over the past year, peer reviews have focussed on Gastroenterology, Uro-gynaecology, Cardiology, and Respiratory all of which feature on our top 10 most referred specialty list. Participation from practices has improved, with an 8% increase this year.

Key learning points from each of the peer reviews are written up into a report and shared across all practices in the Borough.

This year we will be introducing a Peer Review Pack; the aim of this is to provide GPs with up-to-date material relevant to the topic, and gives the RMP Team the opportunity continuously update guidance, pathways and clinic information from local Trusts. The pack will include the following information:

- Details of the specialists available on Kinesis;
- Information for reviewing your practice data on STORM;
- Guidance/pathways available on DXS;
- Clinic information from local Trusts;
- Presentation slides (these will be made available following the education session).

## 2.2. Educational Sessions

The RMP peer review process is supported by a programme of educational seminars which reflect the peer review themes. Secondary care consultants from St George's Hospital facilitate the events, which focus on the management of commonly referred conditions in primary care.

Over the past year, attendance and feedback at these events has been excellent, with 100% of GPs reporting:

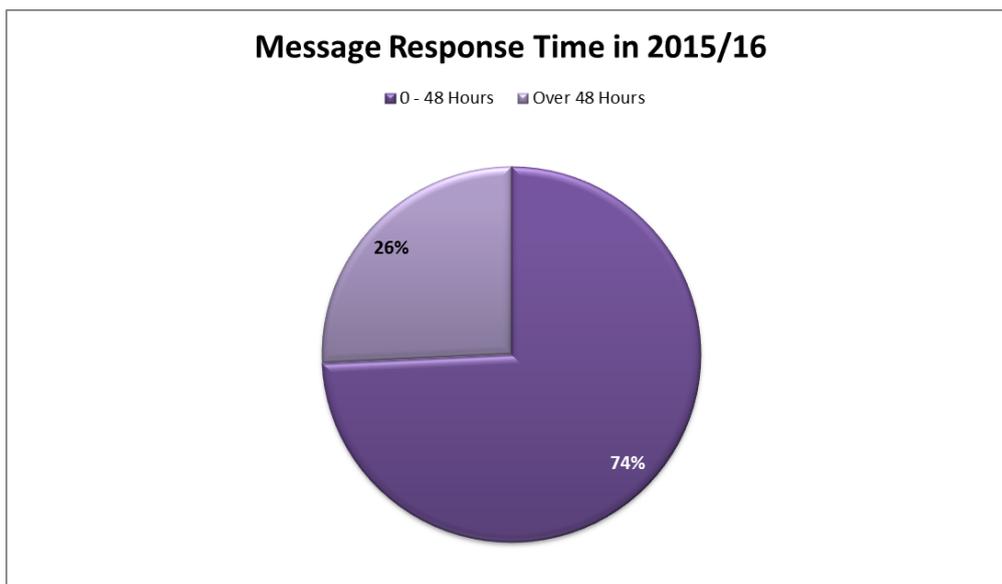
- That the knowledge gained during the session will help in the future;
- That they would recommend these sessions to other GPs;
- That they would be able to pass on what they had learnt to GP colleagues.

Across a total of six seminars held to date, there has been an attendance increase of 10%. There has also been a rise in the number of additional GPs attending the events from each practice.

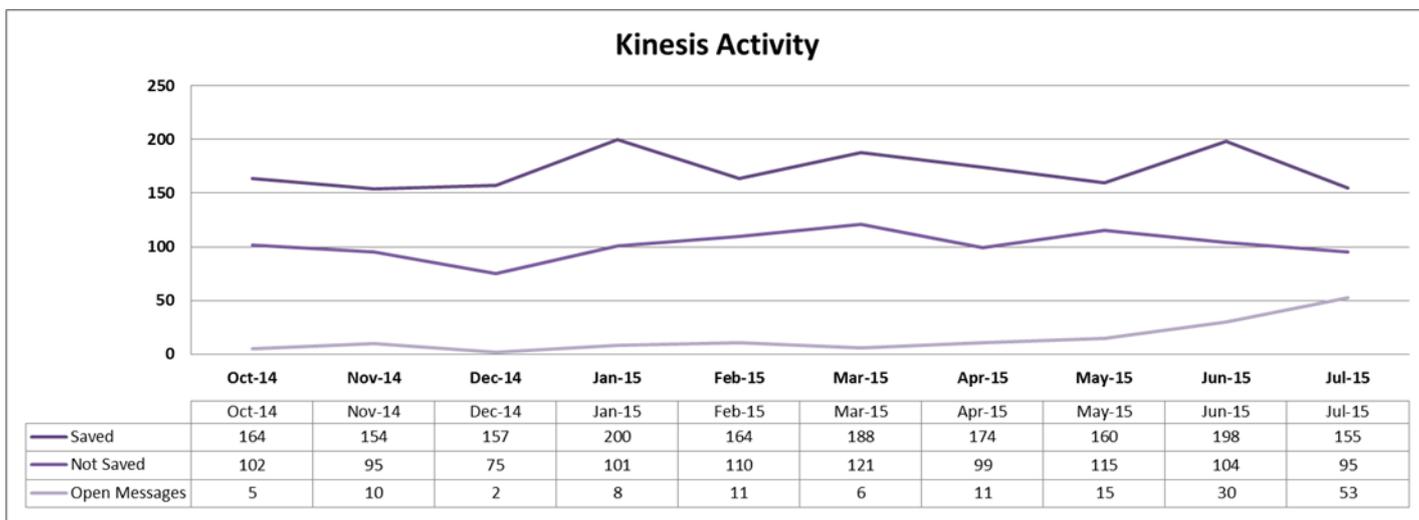
## 2.3. Online Advice Service

Kinesis is a secure (N3) web based tool that directly links GPs to hospital specialists for rapid access to expert advice on referral questions. The system was launched on 24<sup>th</sup> October 2012 as a pilot at St. George's Hospital. Since then we have expanded the service to a further four Trusts (Chelsea and Westminster Hospital, Kingston Hospital, Guy's and St. Thomas' Hospital and South West London and St. George's Mental Health Trust) and now have over 40 specialties online, with 148 specialists available to provide advice.

Consultants continue to offer timely advice with 74% of messages answered within 48 hours:



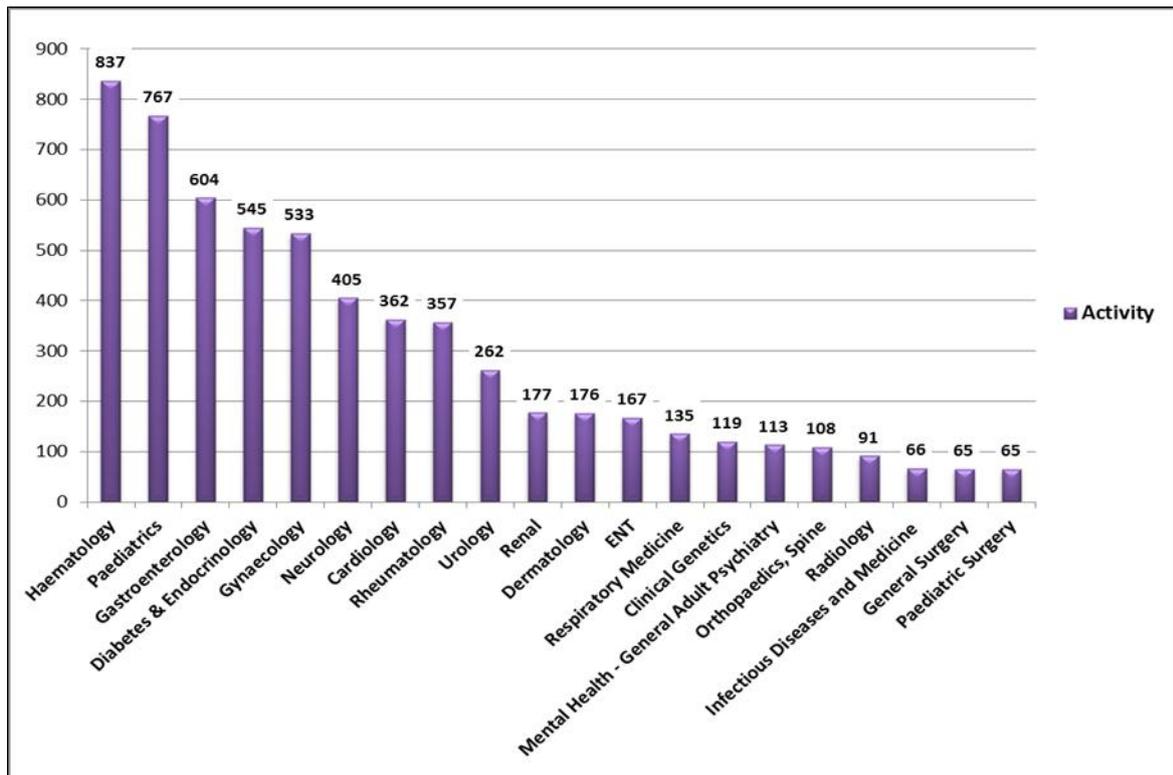
As of 19<sup>th</sup> August 2015 there have been 6347 advice requests sent to consultants via Kinesis with 57% of these resulting in a saved referral. This means that approximately 3608 patients have avoided an unnecessary outpatient appointment since the service began. It



also represents a significant saving to the CCG as each first outpatient attendance costs approximately £200. The graph below shows the Kinesis activity for the past 10 months:

The graph below shows the top 20 Kinesis specialties that GPs request referral advice from on Kinesis. The RMP Team are continuously working with the Acute Trusts to expand the number of specialties available on the system.

**Top 20 Kinesis specialties (all hospitals)  
since service began on 24 October 2012**



## 2.4. Monthly Reporting

To support practices in managing their own referrals, practices receive a monthly STORM (Strategic Total Referral Management) report, which displays referral activity based on EMIS read code information.

The report is searchable via specific referral data (such as GP, specialty and acute provider), enabling practices and GPs to compare themselves with one another. GPs can drill down into the report to review individual referrals, whilst the dashboard also provides valuable aggregate data and targeting information for the RMP Team and the Wandsworth Locality Commissioning Groups.

## 2.5. Clinical Decision Support Software

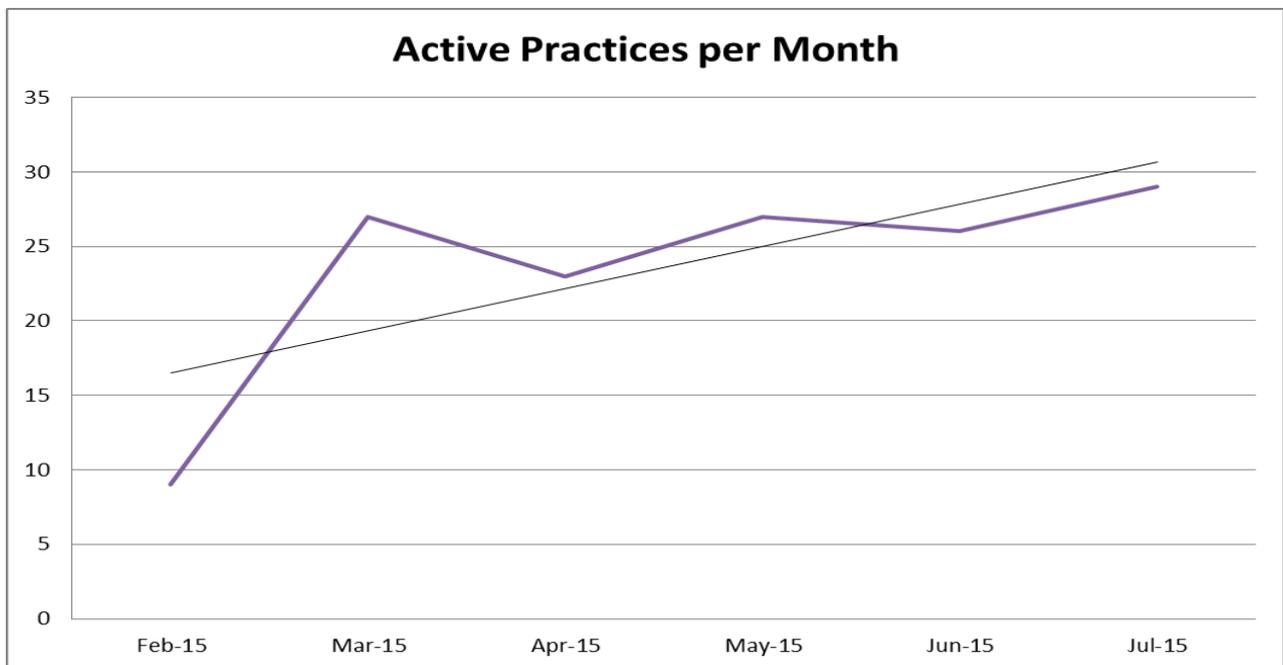
In October 2014 the RMP Team awarded DXS Ltd. the contract for the clinical decision support tool. The software enables GPs to access all referral forms, templates, local and national guidelines in one central location. The tool is interactive, sitting within the existing clinical system to enable GPs to make better informed referral decisions.

The software was rolled out to 10 pilot practices initially and is now set up at 41 out of 42 practices in Wandsworth, with the last practice scheduled for installation in the next few weeks.

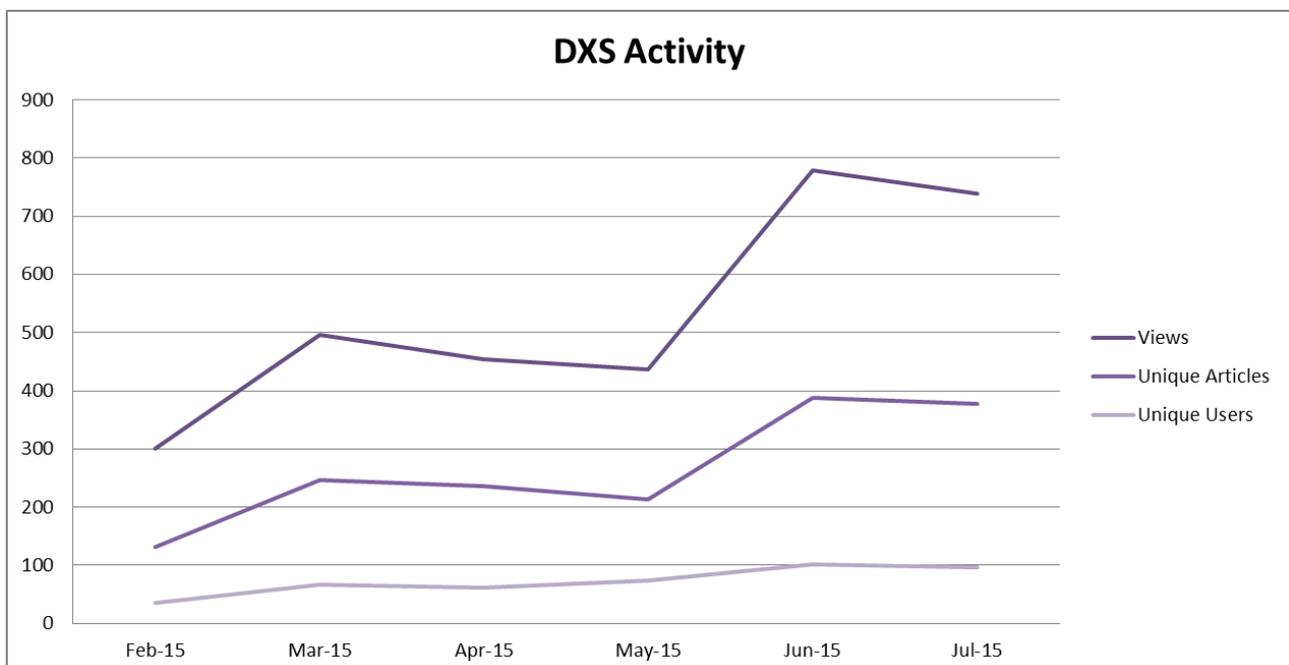
The expected outcomes from using the clinical decision support software include:

- Improved adherence to locally developed pathways;
- Increased standardised referral practices;
- Improved patient referral pathway and experience;
- Reduction in inappropriate outpatient referrals;
- GPs are supported in decision making;
- The potential to have approval criteria for ECI procedures; this is currently under development and could reduce inappropriate elective procedures.

Following installation the practices are trained to use the software. The graph below shows the increase in the number of practices using DXS in the past 6 months:



The RMP Team are continuously working on keeping local content up-to-date on the system,



and there is now over 250 referral forms, documents and guidelines available. The following graph shows the number of documents being accessed and how many times they are viewed each month:

### 3. Ongoing Development

As part of an ongoing feedback process, the RMP Team is continuously looking at ways to improve on the existing work-streams and find innovative ways to support practices in improving the quality of referrals. The following describes the new initiative that has rolled out this year:

#### 3.1. Pathology Improvement Programme

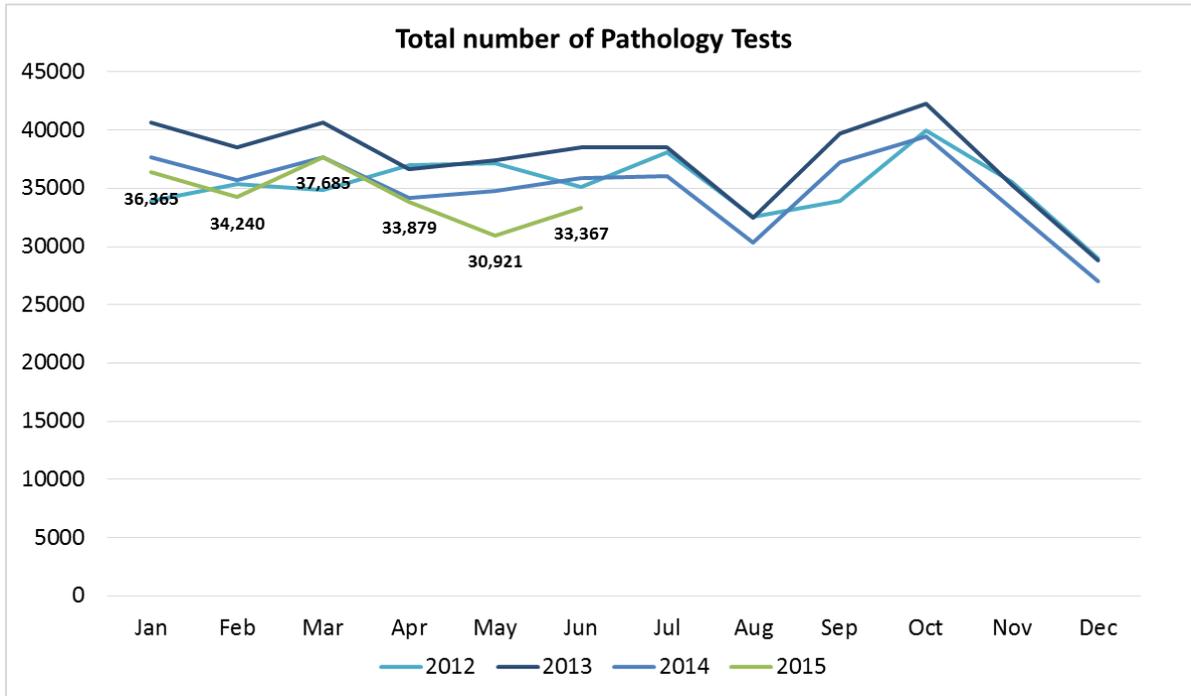
A Pathology Improvement Programme is being piloted for one year in conjunction with the Referral Management Programme. The aims of this scheme are to support GPs to ensure that:

- Tests requested are clinically appropriate to the patient's complaint;
- Tests are not duplicated unnecessarily;
- Tests are carried out in line with the recommended frequency;
- GPs have access to data on their practice's testing activity and to be able to benchmark with other practices.

The pilot launched in December 2014 and 81% of practices signed up. The tests included in the programme are the most commonly requested tests and have the highest total spend in Wandsworth and include: Vitamin D, Vitamin B12, Ferritin, Folate, Lipids, Thyroid Functions Test, Erythrocyte Sedimentation Rate and Bone Profile.

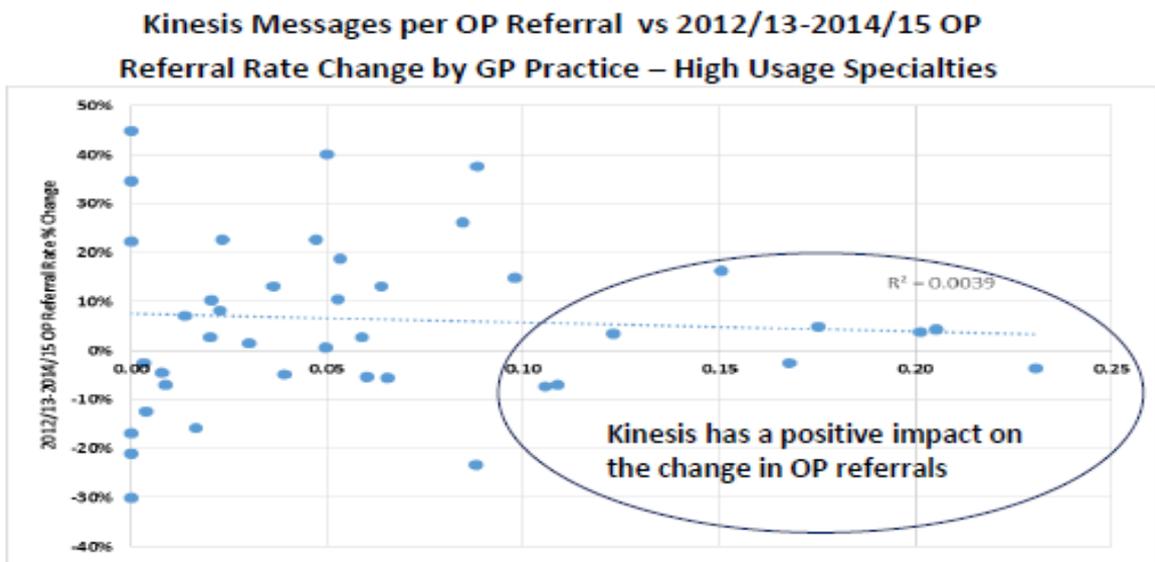
The first 6 months of the pilot have shown a reduction of 9000 requests for these tests compared to Jan-Jun 2014. A calculated saving based on the cost of an average test (£7.00) is £63,000 approx. The Team are awaiting the actual figures from SLAM to enable monitoring of accurate savings.

Please see the graph overleaf which shows the number of pathology tests\* carried out by Wandsworth practices up to (and including) May 2015.\**The graph reflects the pathology tests that are included in the programme i.e. Vitamin D, Vitamin B12, Ferritin, Folate, Lipids, Thyroid Functions Test, Erythrocyte Sedimentation Rate and Bone Profile.*



### 3.2. Enhancing use of Kinesis

2020 Delivery have analysed the use of Kinesis against outpatient referral rates. The graph below shows that Kinesis has had a positive impact on the change in outpatient referrals for some practices:



As a result of this analysis 2020 Delivery identified two areas of opportunity for reducing overall outpatient attendances through Kinesis:

1. Increasing the number of users and the activity
2. Increasing the number of specialties available on the system

The table below shows the areas of opportunity where additional specialties could be added to the Kinesis service to reduce inappropriate outpatient appointments:

**OP REFERRAL RATE % AND KINESIS MESSAGES % BY SPECIALTY (TFC CODE), RANKED BY KINESIS RATE**

Specialty (TFC Code)	OP Referral Rate % (Referrals / 1000 weighted population)	% Kinesis Messages / 1000 weightEd population
303 - Clinical Haematology	0.83%	13.02%
420 - Paediatrics	1.75%	11.50%
301 - Gastroenterology	2.26%	8.85%
502 - Gynaecology	10.87%	7.63%
320 - Cardiology	5.96%	7.26%
410 - Rheumatology	2.45%	6.10%
400 - Neurology	2.06%	5.51%
330 - Dermatology	6.38%	4.36%
101 - Urology	3.60%	4.13%
340 - Respiratory Medicine	1.37%	2.40%
710 - Adult Mental Illness	1.64%	2.22%
120 - Ent	4.34%	2.20%
100 - General Surgery	1.51%	1.09%
160 - Plastic Surgery	1.16%	0.62%
302 - Endocrinology	0.97%	0.60%
650 - Physiotherapy	7.99%	0.51%
130 - Ophthalmology	5.25%	0.12%
501 - Obstetrics	6.45%	0.00%
110 - Trauma & Orthopaedics	5.88%	0.00%
812 - Diagnostic imaging	4.45%	0.00%
103 - Breast Surgery	3.38%	0.00%
104 - Colorectal Surgery	2.23%	0.00%
304 - Clinical Physiology	1.69%	0.00%
503 - Gynaecological Oncology	1.58%	0.00%
310 - Audiological Medicine	1.35%	0.00%
560 - Midwife Episode	1.16%	0.00%
191 - Pain Management	1.05%	0.00%
106 - Upper Gastrointestinal Surgery	0.91%	0.00%
TOTALS	90.55%	78.1%

Agreed areas of opportunity where Kinesis service could be improved/added

Not considered as areas where Kinesis could help improve OP referrals

See section 3.3. Next Steps for information on how the RMP Team will use this information to develop the programme over the next year:

### 3.3. Next steps

#### Increasing Kinesis usage:

In April 2015 the RMP Team ran a facilitator task focussing on Kinesis usage; a high user from the practice met with the low/non users to promote the system and this gave the practices an opportunity to share benefits, understand why usage is low and to encourage uptake. Since then a number of new users have used Kinesis to obtain referral advice from a specialist.

Over the next year the RMP Team will use the information from this task and a number of existing mechanisms including; use of practice support team visits, embedding Kinesis into local pathway guidelines, developing clinical champions and exploring the use of incentives in order to raise awareness and drive activity up.

### **Increasing specialties on Kinesis:**

The RMP Team will be working with the Acute Trusts to focus on reducing outpatient appointments in targeted high referral specialties. The team will focus on expanding sub-specialties and engaging with new specialties to sign up to Kinesis, this may also include using contractual levers to ensure engagement.

### **Further development of the Referral Management Programme**

There are a number of other opportunities to reduce outpatient appointments that the Team will explore over the next year. These include;

- redesign of pathways to include the use of triage services/diagnostic services in the community,
- targeting of low value procedures through the ECI framework,
- reviewing the structure of the programme to include a performance related payment for practices similar to the approach used in the Pathology Improvement Programme
- working with Acute Trusts to develop their internal triage process, ensuring mechanisms are in place for GPs to receive timely feedback on inappropriate referrals.