

Cardiac Services in Cardiff and Vale

For the University of Wales Hospital in Cardiff, the introduction of the Welsh Patient Referral Service (WPRS) wasn't just a new system, it was in the words of Consultant Cardiologist and Clinical Director for Cardiac Services Dr Peter O'Callaghan, "an opportunity to look at the whole patient pathway and to ask questions such as: why are patients referred to see a cardiologist?"

The Service, which is available in the Welsh Clinical Portal, was introduced into Cardiac Services in Cardiff in 2015. It was one of two pilot sites for the project, which has now expanded to over 40 specialities across Cardiff and Vale and Abertawe Bro Morgannwg health boards.

Reduced waiting lists

The new system, together with a redesign of clinics, have made a phenomenal impact, as Dr O'Callaghan explained: "before we introduced this we were seeing more than 4000 new patients per year in the cardiology clinics and they were growing at what was becoming an unmanageable rate of more than 10% per year, in the last 12 to 18 months we've reduced the total number of patients waiting to see a cardiologist from over 1200 down to about 350"

In the past, the only way such a growing demand on services has been dealt with has been by paying for extra staff and putting on extra clinics, "Normally the way the NHS deals with demands is to increase capacity – but we're managing demand much more effectively" explained Dr O'Callaghan.

'We're shaving months off time-dependent treatment'

The reduction has been greatly helped by two features of electronic referrals: the ability to redirect the referrals to a specialist nurse or physiologist led clinic, and the option to decline the referral and give an explanation to a GP. Dr O'Callaghan said:

"With the old system the default was to allocate patients to a consultant clinic. 100% would go to consultant clinic, now 10% are declined with an explanation to a GP, and 21% are redirected to nurse led clinics"

As well as reducing the waiting times, the referral-to-treatment time has vastly reduced. Treatments such as Cardioversion (a procedure in which an electric current is used to reset the heart's rhythm back to its regular pattern) can be given to patients much quicker. Dr O'Callaghan explained,

"We can click a button in e-referrals and the patient gets a Cardioversion four to five months earlier than previously. We're shaving months off time-dependent treatment".

Saving patients worry

And the option to decline with an explanation has in some cases saved patients six months of waiting and worrying. For example, when a GP refers to Cardiology over concerns they have from an ECG report, the cardiologist can decline and explain to the GP it's not as serious as they had thought:

"While the patient's waiting for their appointment they're thinking 'I'm only 50 and I've got a heart problem' and getting concerned with things like what they should be eating. But now, rather than having 6 months of worry, the GP can let them know within days that they're fine"

Offering e-advice

One area of the referrals Dr O'Callaghan thinks could be improved is the two-way communication with GPs. The WPRS currently only allows for consultants to send one message to a GP with no option for further ongoing secure correspondence (although it will be included in future releases of the WPRS). So to plug the gap Dr O'Callaghan, and a project team from Cardiff and Vale developed eAdvice:

"It's a secure 'e-mail style' system" Dr O'Callaghan explained, "It allows for conversations between GPs and Cardiologists, and automatically records their correspondence and the decisions they make into the main hospital information system. It improves the education of GPs and makes a big difference to the quality of referrals we receive."

Dr O'Callaghan's advice to other directorates and health boards about to introduce the WPRS is:

"We thought if we just introduce this e-referral system and simply replicate what we've got it won't solve anything. But by sitting down and deciding what we're doing well, and what we're not doing so well, and engaging with all the users... with GPs and IT, then it's a massive opportunity".