

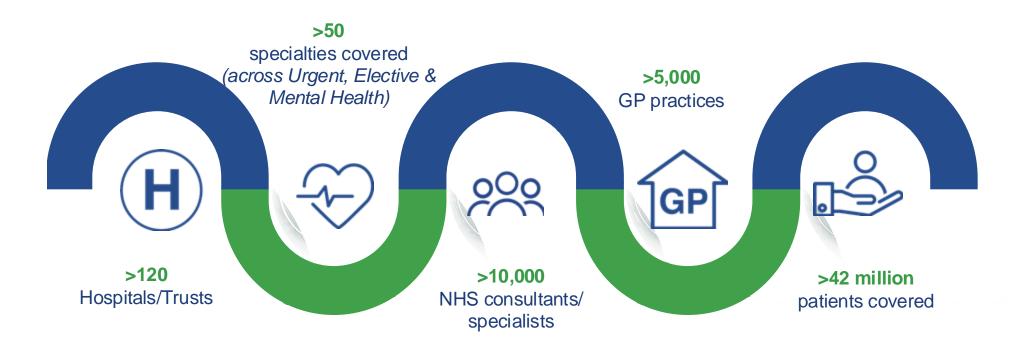
NHS vs Winter: Proven UEC pathways from across England, Scotland, and Wales

Consultant Connect

September 2024

Consultant Connect: who we are

A telemedicine provider transforming patient care in the NHS



Our services are used by over half the NHS in England, Scotland and Wales.



Enhanced Advice & Guidance

Rapid, reliable and flexible Advice & Guidance communication platform

Connecting healthcare professionals across the NHS



Telephone calls

Access to multiple secondary care teams via a single number/via the free app.



Safe clinical photography

IG secure and GDPR compliant patient photography via the app.



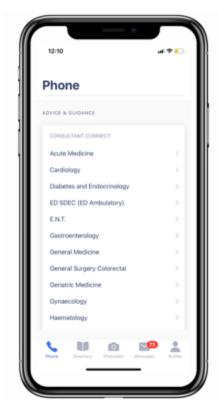
Messaging

Access to multiple secondary care teams via Messages, including sharing photos and attachments.



Email

Fully-tracked Email Advice & Guidance to seek written specialist advice.





Calls last on average under 4 minutes in duration. The UK average call connection time is under 30 seconds – a much faster alternative to calling switchboards.



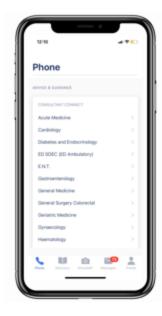
The service collects data such as call and message volumes and sources. Calls are also recorded for medico-legal purposes.





Enhanced Advice & Guidance

Single point of access to specialists via rapid telephone advice



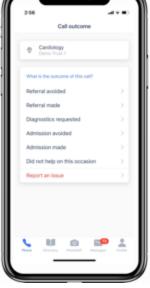
Clinician selects specialty from list, enters the patient's NHS number.



specialists*.

If the first clinician is unable to answer, the call is moved on to the next specialist.

Call is put through to a rota of



Specialist answers call, provides advice and outcome of the call is recorded.



Note: Providing a valid NHS number for the patient is entered, and an outcome is left, a PDF file will automatically upload to the patient electronic record if this function is turned on in your area.

*The service can be set up to provide access to a wider range of medics and community healthcare providers (not just NHS consultants).

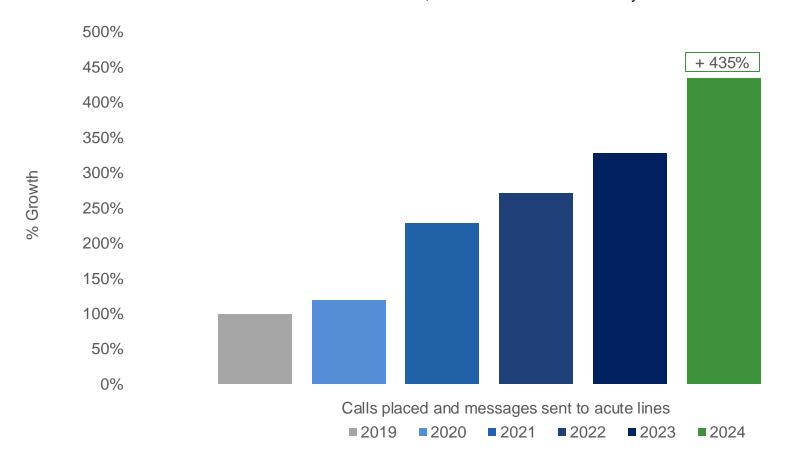


Single Point of Access (SPoA) pathways are the new normal

Trends

Growth in call and message volumes to acute lines

80% of calls are answered the first time in less than 30s, so no time is wasted on busy switchboards



SPoA improves patient outcomes

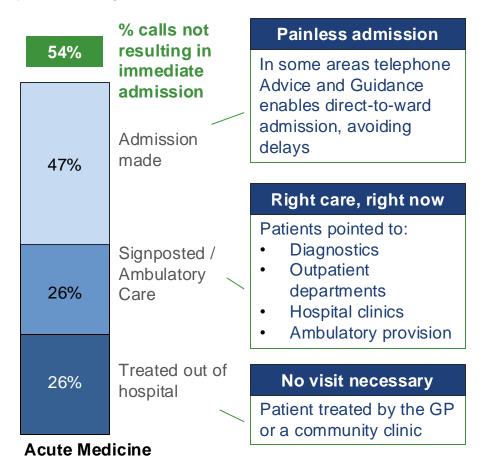
- Call before convey in Tayside results in 14.5 fewer patients admitted per day compared to the national average
- 53% of calls to SDEC result in patient avoiding A&E and being directed to the most appropriate place for their care
- Pre-alert lines ensure safe conveyance of critical patients, with ED teams on standby for their arrival
- Messaging A&G supports less urgent cases or as an easy way to book patients into clinic



54% of calls to urgent care specialties avoid an admission

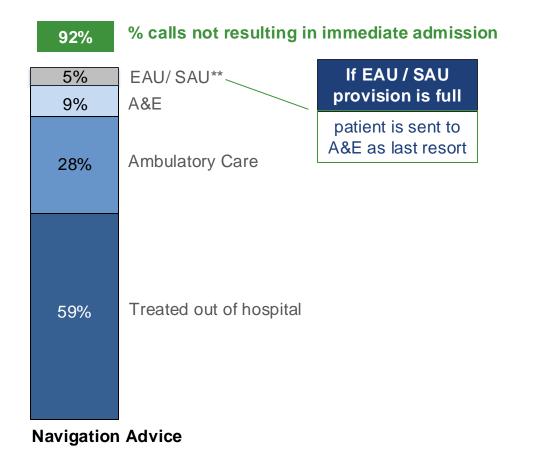
Outcomes of calls to Acute Medicine*

Percentage of calls 9 years, ending June 2024



Outcomes of calls to Navigation Advice

Percentage of calls 8 years, ending June 2023



Consultant

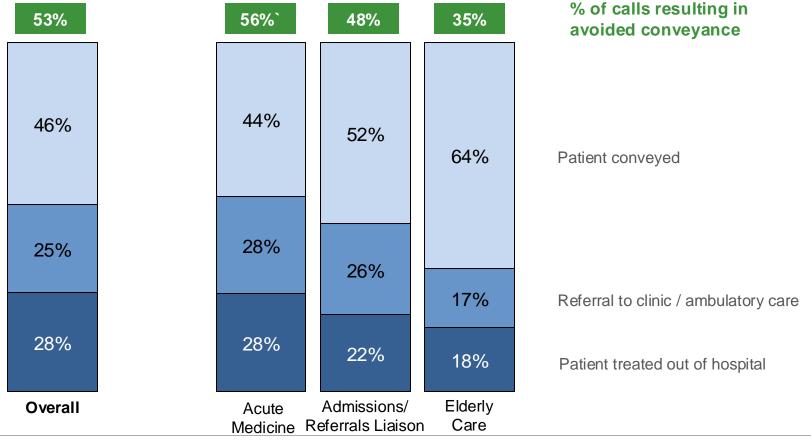
^{*}Outcomes of calls from all clinicians with access to Acute Medicine lines (e.g. Primary Care, Ambulance staff etc.) Source: Consultant Connect

^{**}Emergency Assessment Unit / Surgical Assessment Unit. Due to rounding the sum may not equal 100%. Source: Luton & Dunstable University Hospital analysis

53% of calls from ambulance staff avoid unnecessary patient conveyances

Outcomes of calls by specialty

Percentage of calls*
9 years, ending June 2024



Most ambulance usage is across 3 lines

3 specialties cover 80% of all ambulance calls:

- Acute Medicine provides same day emergency care (SDEC) advice that can save a crew from having to bring a patient in
- Liaison lines can also provide a direct link to the department that would receive the patient, speeding up the transfer
- Elderly Care / Frailty lines
 can render a referral
 unnecessary improving
 patient care and providing
 system efficiencies



^{*} Due to rounding, the sum of the components of a column may not equal 100% Source: Consultant Connect analysis



Facilitating Pathways via Consultant Connect | The Benefits



All calls are recorded for medico-legal purposes and can be accessed by ICBs/Health Boards and Trust/Hospitals, as well as the specialist(s) and clinician(s) involved.



Calls are answered quickly. On average, 80% of calls are answered the first time, and within less than 30 seconds.



Specialists don't need to remain at their desks, as calls and messages can be routed to any mobile device, without worrying about personal phone numbers being disclosed.



Our service is designed to fit in with specialists' existing schedules, so queries go through a rota. This means specialists can continue with their workload, safe in the knowledge that another member on the rota can pick up the inquiry if they're not available.



Our dedicated Account Management team deliver bespoke user service demonstrations and Q&A sessions. We also provide regular reports and insights, reviewing and refining the project strategy and gathering feedback.



We can launch projects in a matter of weeks; issuing a launch plan and setting a realistic date based on how advanced discussions are with specialty teams. For areas with local specialist capacity challenges, our network of out-of-area NHS consultants can be easily switched on/off to provide short or long-term relief.

Urgent Care Pathways: In Practice





Acute Medical & Surgical SDEC | South East London (KCH, GSTT, LGT)

Launched in 2019 | Available from 9am - 8pm, Monday - Sunday

Requesters

- Primary Care Clinicians
- ANPs
- Ambulance Staff
- Trust Clinicians

via

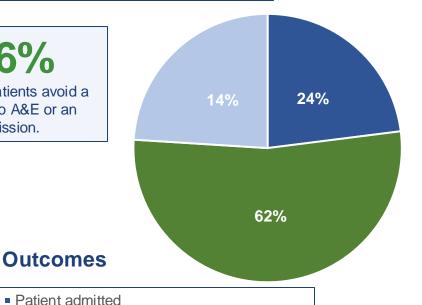
(y)

Providers

- Nurses
- Consultants

Live	Average calls per month	Average call connection rate	Average call length	Number of clinicians on the rota
4+ yrs.	>1,000	68%	3m25s	2

76% of patients avoid a trip to A&E or an admission.



- **Outcomes**
- Patient navigated to clinic or outpatients
- Patient treated out of hospital



The service was initially set up as multiple phone lines (Chest Pain SDEC, DVT SDEC). Requesters provided feedback that this was confusing and cluttered the phone directory.

Solution



Following the feedback provided, the service was reduced to a standalone option for Medical and Surgical SDEC. Moving SDEC access to Consultant Connect enabled a standardised process for all, a single referral route and point of access, and audit and monitoring of referral activity demand and outcomes.



SDEC has been highly beneficial for patient experience. It has reduced unnecessary delays due to the rapid access to expert senior specialists. The specialist advice also results in patients being treated out of hospital where appropriate.



Frailty Advice Line | South Warwickshire University NHS Foundation Trust

Launched in September 2019 | Available from 8am - 8pm, Monday - Sunday

Requesters

Live

4+ yrs.

- ACP Community Team
- West Midlands Ambulance Service

Average calls per

month

>100

- Secondary Care Clinicians
- Out of Hospital Urgent Team

via

Providers



Averag

86%

connection

- Frailty Unit
- Frailty Consultants

je call on rate	Average call length	Number of clinicians on the rota

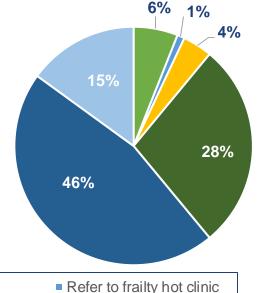
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Average: 2 calls per week per consultant

4mn

57%

of patients avoid a trip to A&E or an admission.



Outcomes

- Advice/self care
 - Itolor to hally flot office
- Triage patient to GP
- Triage to ED
- Triage to community
- Triage to frailty



Prior to Consultant Connect, the system was for clinicians to call through a single number, but calls didn't cycle through, and therefore many were unanswered.



A simplified solution for the end user. Utilising Consultant Connect and the robust rota system in place means that clinicians can always get hold of the right person.



Consultant Connect provides a quick access route for teams to consultants in the acute hospital. Clinicians can contact colleagues for advice whilst still in the patient's home, ensuring an agreed multidisciplinary management plan is devised.



Emergency Medicine Line | NHS Tayside

Launched in September 2018 | Available 24h/7

Requesters

- Paramedics
- GPs
- Secondary Care Clinicians (registrars)
- NHS 24

via

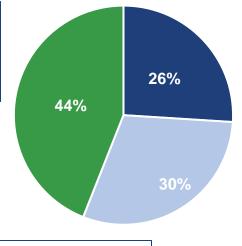
Providers



- Emergency Medicine Consultants
- Senior Clinical Decision Makers

56%

of patients avoid a trip to A&E or an admission.



Live	Average calls per month	Average call connection rate	Average call length	Number of clinicians on the rota
5+yrs	>2,700	90%	2m50s	3

Outcomes

- Patient navigated to clinic or outpatients
- Patient treated out of hospital
- Patient admitted



There were increased instances of inappropriate presentation of patients attending the Emergency Department.



Allowing telephone access to senior clinical decision makers for paramedics, GPs and other clinicians to ensure patients are navigated to the correct pathway, first time.

Impact -

The use of the service has reduced ambulance conveyances and helped ensure Right Care, Right Place, Right Time. Today, Tayside is the best performing ED in Scotland.



Acute General Surgery Referrals (General Surgery SDEC) | Cardiff & Vale

Launched in August 2020 | Available from 8am - 7pm, Monday - Sunday

Requesters

- Primary Care Clinicians
- Ambulance Staff

via

Providers



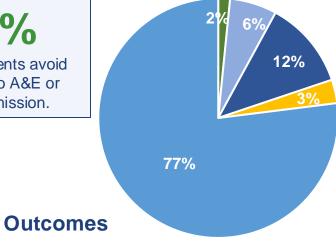
- Registrar
- Senior Nurses

Live	Average calls per month	Average call connection rate	Average call length	Number of clinicians on the rota
3+ yrs.	>400	87%	2m30s	3

Average: 28 calls per week per specialist

21%

of patients avoid a trip to A&E or an admission.



- Patient Navigated to Outpatient Pathway
- Patient Navigated to another specialty
- Patients Managed with Advice and Guidance
- SDEC referral made

■ ED admission made



A high number of unnecessary referrals.



The referrals number was removed and all calls go through Consultant Connect. This allows the Secondary Care clinicians to triage the referrals and redirect where appropriate. This is now the recognised pathway and has increased awareness of Consultant Connect for Primary Care.

The number of referrals has been reduced as Consultant Connect is the only method available to contact General Surgery SDEC. By being able to track calls and manage them through a rota system, calls are answered quickly and dealt with appropriately.



Contact Us

If you have any questions, feedback or would like more information, please contact Kat James, Director New Projects at Consultant Connect:

E: kat.james@consultantconnect.org.uk

T: 01865 261 467