



CASE STUDY: HOW E-RS CONNECT HAS REDUCED TIME TAKEN FOR THE DERMATOLOGY TEAM AT UHL TO RESPOND TO A&G BY 25%

Specialty teams at University Hospitals of Leicester NHS Trust (UHL) have been utilising e-RS Connect for Advice & Guidance (A&G) worklists since November 2024, **improving efficiency and reducing pressures**. e-RS Connect links the NHS's referral backbone with Consultant Connect's A&G platform to enhance e-RS's capabilities. This enables specialists to review and return referrals with advice, convert A&G requests into referrals, or ask for additional information—all through a user-friendly interface that integrates with existing workflows.

To find out how this impacts clinical teams, we spoke with Dr Elizabeth Roberts, Consultant Dermatologist at UHL, who has been using e-RS Connect in her day-to-day role.

UHL Dermatology e-RS Connect stats*:

More than **1,700** A&G cases responded to | **96%** of cases were returned to the referrer with advice | **2%** of cases were converted to a referral | **2%** of cases required further information

Why did you start using e-RS Connect, and what are the most significant benefits?

Traditionally, we've used the e-RS platform, but the clunky nature of the system slows down the process. All attachments are uploaded as a PDF, Word Document, or JPEG, requiring us to download each item individually. This takes a few seconds and sometimes longer. That's not a problem if you've got one or two attachments, but our A&G requests often contain three or four clinical history uploads, followed by six or seven images, so it can take several minutes just to download the information. **We can receive up to 60 new A&G cases daily, so it is critical to streamline the process of completing these cases.**

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'Utilising e-RS Connect is a real time saver because the images are viewable without downloading, and I can see the clinical history and attachments all in one place. The system is very quick to load and easy to use, and we've reduced the time taken to complete A&G by approximately 25%, because the data is so easily accessible.'

How easily has e-RS Connect integrated into your working day?

'It has slotted in seamlessly, allowing me to complete my on-call A&G from home. That's a real bonus because it can be difficult to work uninterrupted on site, so it's much easier and very straightforward to log onto my work computer remotely to respond to A&G.'

How have you found using filters for reporting purposes?

'It's incredibly helpful because, as a team, we've each agreed to complete 30 A&G cases daily, so I can use the filtering tools to check how many we've completed. **It's so easy to do, and is also beneficial for screening for urgent queries.** Also, if the referring clinician responds to your questions with further clarification, the A&G cases are linked as conversation threads.'

'However, within e-RS, I would've been guessing how many cases I'd already responded to because it's so complicated to use. Using e-RS also makes it challenging to tell which cases are related. So, if the referring clinician alluded to a previous A&G query, we would've had to ask them to re-upload a copy of that A&G conversation as an attachment, which is very time-consuming.'

'Using e-RS Connect is very intuitive. I recommend that all specialty teams try using it. **Compared to the standard e-RS platform, e-RS Connect reduces time spent responding to A&G by 25% because it's so much easier to use.'**

* Correct as of August 2025



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