EP.TU.673

Optimising the referral process to the Surgical Emergency Clinic through mutual education of primary and secondary care teams: an audit cycle

Tiffany Cheung, Faiza Muneer, Michael Freeborn, Katie Cross Northern Devon Healthcare NHS Trust

Aims: The Surgical Emergency Clinic (SEC) in our Hospital facilitates access to General Surgical consultant-led emergency assessment. Anecdotally, referrals are often (likely inadvertently) inappropriate and / or incomplete, which may delay assessment by the correct specialist. We audited the quality of GP referrals to the SEC against four standards:

- 1) Referral form should be fully completed
- 2) Patient should meet stated inclusion criteria
- 3) Patient should have General Surgical condition
- 4) Patient should have specified blood / urine tests in advance in all

Methods: Retrospective analysis of 50 GP referrals to the SEC between November - December 2017, after recording data pertinent to the above standards in a spreadsheet. Results were presented at a local GP development day, a re-designed referral form incorporating GP feedback received was uploaded onto the Trust's intranet and an email inbox created for e-referrals. 50 further referrals between September -November 2018 were analysed.

Results: Full completion of the referral form increased from 0% (initial audit) to 29% (re-audit), and appropriateness of referrals from 62% to 90%. The proportion of patients having had specified blood and urine tests in advance improved overall also.

Conclusions: Our experience demonstrates that primary and secondary care teams actively communicating and working closely together can improve the referral process for both parties, and most importantly enhance patient access to timely, appropriate specialist care.