

## THE DEVELOPMENT OF A DIGITAL SOLUTION TO IMPROVE INTEGRATION BETWEEN GP'S AND PRIMARY CARE SERVICES

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**THE PROJECT WAS ABOUT IMPROVING INTEGRATION BETWEEN GP'S AND PRIMARY CARE SERVICES. THE USE OF A SINGLE DIGITAL HEALTHLINK REFERRAL FORM WAS TRIALLED IN ONE CHN AREA AND SUBSEQUENTLY ROLLED OUT ACROSS THE CHO AREA. THE OUTCOME OF THE PROJECT WAS IMPROVED ACCESS FOR PATIENTS TO PRIMARY CARE SERVICES AND A MORE INTEGRATED APPROACH TO CARE BETWEEN GP'S AND THE PRIMARY CARE TEAM.**

### Background

Prior to this initiative access to primary care services for patients was via written referral forms with no consistent referral pathway for any two disciplines or LHO area's. The requirement was for a single digital referral from GP practices which would provide the clinicians in primary care with sufficient information to triage and clinically treat patients accordingly.



### Aims & Objectives

#### Aim:

- To improve integration between GP's and primary care teams. To deliver efficient and effective access for patients from GP services to Primary Care Services.

#### Objectives:

- To develop a single standardised referral form using the Healthlink system for primary care services.
- To transfer the referral from GP's to Primary Care teams digitally
- To ensure safety and quality of patient information from one service to another.
- To improve communication and coordination of patient information across primary care services

### Stakeholders involved in the project:

- |                    |                           |
|--------------------|---------------------------|
| ➤ GP's             | ➤ Directors of Nursing    |
| ➤ Admin teams      | ➤ Clinical Staff          |
| ➤ Network Managers | ➤ GP Administration Teams |
| ➤ General Managers | ➤ GP leads                |
| ➤ Therapy Managers | ➤ IT Team                 |

### Feedback Questionnaires

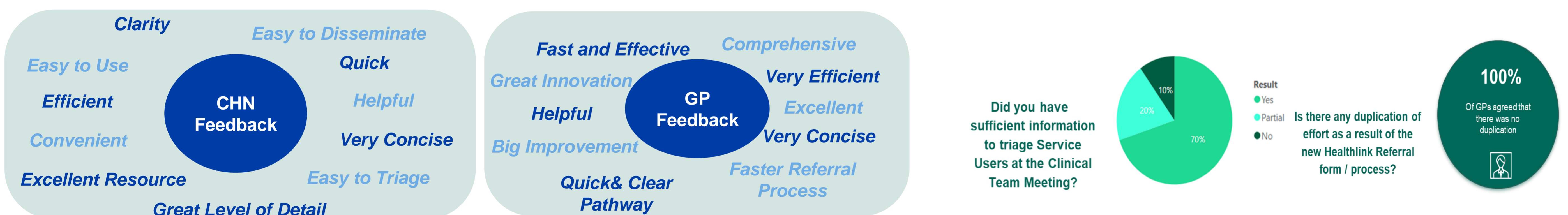
Feedback Questionnaires were issued on completion of the Healthlink Referral Form pilot to participants.

The purpose of the questionnaires was to understand what worked well and where improvements could be made from both a CHN Staff and a GP perspective.

Two questionnaires were issued: one for GPs and one for CHN Staff:

- CHN Feedback Questionnaire - issued to 15 staff, 12 responses.
- GP Feedback Questionnaire - issued to 20 GPs, 11 responses.

The feedback received from participants is summarised in the following two slides.



### Value for Money

The referral is delivered on an already available electronic referral platform in use within the service and no additional resources were required to develop or commence this initiative.

#### This single electronic referral form:

- Reduces duplication of referrals to services.
- Provides clinical information such as bloods and/or hospital discharge letters and radiology reports.
- Provides confirmation the referral has been received via the system also safeguarding referrals getting lost and/or delayed on transfer.



### Results and Outcome

- Over **2007 referrals** received since the roll out commenced in April 2023, data collection ongoing.
- **Safe delivery** of information with **confirmation** back to GP that referrals have **been received** at the **primary care service**.
- **Collection of data** allows for **further service planning** and **development**.
- Time to **complete referral** form approximately **8-10 minutes** per discipline prior to electronic referral, now form takes **approximately 2 minutes** to complete.

### Sláintecare Model In Action

Referral to **multiple disciplines** on the one form allows for shared **communication** among **disciplines** and **coordination of appointment** scheduling.

GP's can also **request Clinical Team Meeting** discussions for patients via the **Healthlink** referral form. This is in keeping with the **Sláintecare** model and proactively **assists in managing hospital avoidance** for **patients in the community**

### What Makes this Project so Valuable?

Single referral form taking in six disciplines, excellent communication of service engagement in the absence of a universal healthcare record  
Transferable to all areas, national roll out to commence. Standardisation of primary care services across the country.



### Acknowledgements & References

The CHO Primary Care Team & The GPs in the Cork and Kerry Region.