

L&D Community

February 2018



LUTON &
DUNSTABLE
UNIVERSITY
HOSPITAL

www.ldh.nhs.uk/gps-professionals/

L&D and Bedford Hospital Merger Update - February 2018

Bedford Hospital and Luton & Dunstable University Hospital (L&D) Boards have submitted a Full Business Case (FBC) to NHSI to support a proposal to merge and become a single NHS Foundation Trust.

The FBC is currently undergoing an intensive review as part of the NHSI approvals process. This will verify that every aspect of healthcare provision at both sites has been fully considered and that a merger will ultimately provide better care for patients. Once approved, the intention is for the merger transaction to take place on 1 April 2018 subject to NHSI approvals.

The merger will result in a single NHS Trust, with one management team who will be responsible for services provided on the two existing hospital sites. Both sites will continue to deliver a full range of services including A&E, maternity and paediatrics.

The impact on GPs will be very positive in the long run as systems and processes at each site will be the same. Services will integrate at varying paces and you will be kept up to date of any changes.

Merging the two organisations will not result in significant change to the way that healthcare is provided to the local population. On Day One of the newly merged organisation, patients will not notice any difference clinically. It is behind the scenes where the difference will be most noticeable. One large Trust will be stronger, more resilient and have increased expertise than two smaller Trusts, therefore providing better care for patients.

Bedford Hospital and the L&D are a cherished part of the communities they serve, so both hospitals will retain their identity and individual names. However, the official NHS Trust name will change to Bedfordshire Hospitals NHS Foundation Trust.

A public summary document has been published and made available to key stakeholders such as CCGs, Health Watch and local councils and is publically available via both Trusts websites.

You can contact us to let us know your thoughts or to raise any concerns or questions by emailing merger@ldh.nhs.uk. For the most up to date information about the proposed merger, FAQs, Public Summary please visit the Merger Plans sections on either of the hospitals' websites

www.ldh.nhs.uk/corporate-information/merger/

www.bedfordhospital.nhs.uk/proposed-merger-find-out-more-here/

Welcome to L&D Community, the newsletter for GPs, Primary Care Practitioners, Practice Managers and Practice Administrators who use hospital and community services from the Luton and Dunstable University Hospital.

Inside you will find about new clinical and administrative developments, service updates, such as new Consultants, changes to existing services, referral processes, useful contacts, clinic details, waiting times and E-referral updates. These are all designed to make the L&D referral process simpler and quicker saving you time and effort.

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L&D GP Client Services Programme - Update Feb 2018

The Luton & Dunstable University Hospital conducted over 40 qualitative two hour long face to face GP surveys across Luton, Bedfordshire and Hertfordshire. These surveys sought to determine what the Trust could do to improve the interface between primary and secondary, reduce avoidable workloads, patient outcomes and improve both patient and GP experience.

The recommendations from the surveys resulted in a programme of projects called the GP Client Services (GPCS) Programme, which is being led by the Head of GP Client Services. The GPCS programme focused on a number of key projects detailed below along with an update on each project;

Redesign of A&E and inpatient discharge letters to meet new national PRSB standards and improve the quality and timeliness of letters.

- New A&E discharge letter is now fully compliant and due to be rolled out by April 2018.

- New Inpatient discharge letter being finalised with GP consultation due in the coming weeks.

Deliver training and education to key clinical staff on importance of good quality discharge letters.

- The Head of GP Client Services has worked closely with the PRSB to produce a national training and education video designed to highlight the importance/impact of high quality discharge letters. The video will be made available to all acute Trusts by March 2018 and used within our Trust to support training and education of all junior doctors.

Improve the way the Trust communicates with GPs and their administrators

- Fully updated web based directory of services www.ldh.nhs.uk/gps-professionals/consultants-and-services/
- Redesigned 'L&D Community' GP newsletter to focus more on providing practical service/admin information.

- Circulating 'L&D Email Admin Alerts' to GP admin teams, www.ldh.nhs.uk/gps-professionals/gp-admin-updates/

Providing Consultant Led GP advice & guidance within 48 hours

- Consultant led advice GP advice and guidance is now available via E-RS

Reducing avoidable workloads in primary and secondary care

- Circulation to all clinical staff an 'acute contract quick reference guide' so hospital doctors are aware of their acute contract obligations to GPs i.e. issuing of fit notes, ensuring appropriate prescribing of medications on discharge etc. to help reduce the number of queries from GPs to hospital staff. This quick reference guide is also included in the induction pack for all new clinical starters at the hospital.



*Bedford Hospital belongs to you – Become a member and have your say”...
Gordon Johns, Member and Chair of Bedford Hospital NHS Trust*

Bedford Hospital NHS Trust encourages GPs and staff working at GP practices, their patients and residents, particularly those from Bedford Borough, to become Foundation Trust Members to have a say on their local hospital.

Plans are progressing to merge Bedford Hospital NHS Trust with the Luton and Dunstable University Hospital NHS Foundation. They are looking to expand their Foundation Trust Membership to include people from across the whole of Bedfordshire and surrounding counties to ensure the membership represents the population both hospitals serve.

What is a Foundation Trust Member

As a foundation trust both the hospitals once merged will become accountable to their local community they serve.

What are the benefits:

- You will receive newsletters and updates from the Trust
- You can have your say and influence the way the Trust runs its affairs
- You have direct access to the Council of Governors to raise any concerns and offer ideas
- You will receive invitations to members' meetings and medical lectures given by hospital staff
- You elect the Governors

- You can stand for election as a Governor
- You are eligible for Health Service discounts via on-line shopping

Who can become a member

Anyone can become a member, it's free and easy to sign up and you can help influence the way your hospital is run.

How to become a member!

To become a member complete the online form at <https://www.ldh.nhs.uk/most-popular/ft-members/become-a-member/> OR Email at FTMembership@ldh.nhs.uk or call on 01582 718333 requesting for a membership application form.

Fertility Services at Luton & Dunstable University Hospital

The L&D's fertility services continues to expand and we have now have introduced the following services; Self-funded semen testing, HyCosy service and Endometrial Scratch.

Our vision is to establish a One Stop fertility clinic with all the diagnostics, procedures and follow up care delivered in one easy to access setting at the L&D University Hospital. Our patient centred approach has led to above the national average IVF outcomes for our patients supported by good patient experience feedback.

For more information please contact Miss Shahnaz Akbar FRCOG, Fertility Lead consultant, on 01582 498083 or visit our website www.ldh.nhs.uk/fertility/

L&Ds presence in the centre of Luton — Arndale House

Towards the middle of 2018, the L&D will move a number of outpatient services into the centre of Luton. We know that patients like to receive care closer to home and Arndale House sits on top of the Mall in the centre of Luton, with great facilities, and good access by road, rail and bus. Dermatology services, GP Phlebotomy services, and Luton Sexual Health will benefit from purpose built facilities that support our staff to provide the very best care to our Patients. We can't wait to open the doors!

Development of new 'Feeding a risk' clinical guidelines.

Patients in acute hospitals frequently have dysphagia which may occur as a result of many disorders.

Patients who are assessed as having an unsafe swallow and at a risk of aspiration are not always placed nil by mouth (NBM). The Royal College of Physicians & British Society of Gastroenterology (2010) has highlighted the increasing evidence base which suggests that non-oral feeding is not always clinically or psychologically beneficial or ethically sound in patients who are towards the end of life.

The Luton & Dunstable University Hospital has recently developed clinical guidelines to support our clinical teams in the decisions relating to 'feeding at risk' and the support and management required for this group of patients.

Once a 'feeding at risk' decision has been made by the multidisciplinary team it is important to discuss and document the potential of future complications and how these may be managed with the patient, carers, and professionals involved in further care. It is hoped this will support community /primary care professionals in appropriate management for this group of patients.

Discharge from Hospital

It is essential that any 'feeding at risk' decisions are communicated effectively to the patient's primary carers and health Care Professionals who will be involved in their long term care following discharge from hospital. Information leaflets are available to make the process more efficient and may be used by ANY health professional.

- Feeding at risk: information for patients/relatives/carers
- Feeding at risk: information for nursing staff
- Feeding at risk: a summary report for GP & Community Speech and Language Therapist.

For further information about the guidelines please contact either: Speech and Language department 01582 497049

New treatment for life changing and disabling jaw injuries

A surgeon at the L&D has performed an operation new to the L&D on a young man who broke his lower jaw, resulting in a hugely improved outcome for the patient's future quality of life.

Consultant Oral & Maxillofacial surgeon Mr Alan Parbhoo fixed the jaw of Nathan Spear from Dunstable, which was broken in multiple places and dislocated, using titanium screws and plates, rather than the traditional method of wiring the teeth of both jaws together, meaning patients cannot open their mouths to chew or brush their teeth.

This new technique has meant that Nathan made an excellent recovery and was able to open his mouth and bite normally immediately after surgery.

Mr Parbhoo said: "I am extremely happy with the outcome for this young patient. This was a very serious disabling and life changing injury. The previous way of treating it means that the teeth often never meet normally again causing difficulty eating for life, and a high risk of developing early arthritis.

"Nathan should now have a normal bite, and a lower risk of arthritis."

The jaw joint service is being developed by Mr Parbhoo and Mr Majumdar, providing new treatments such as arthroscopy to treat disease of the joint.

The Oral & Maxillofacial Department has recently undergone a £1m expansion in order to be able to deliver 21st century surgery, providing a much improved service for patients.



Nathan with Consultant Oral & Maxillofacial surgeon Mr Alan Parbhoo

Cervical screening: Ideas for improving access and uptake

Cervical cancer is the most common cancer in women under the age of 35, and incidence has increased 22% over the last decade. Each year, more than 3,200 women are diagnosed across the UK, and more than 890 lose their lives.

Treatment because of screening prevents 8 out of 10 cervical cancers from developing, and saves around 5,000 lives in the UK every year. However, uptake of screening is on a downward trend in our region 66.2% - 78.8% when the national standard is expected to be above 85%. Common known barriers include: cultural attitudes and beliefs, poor access to screening, socioeconomic factors (lack of knowledge and education), language difficulties (important factor in deterring ethnic minority women), beliefs, attitudes, embarrassment, and lack of knowledge.

A few changes that could increase uptake are improving lack of knowledge and education, the use of bilingual services and interpreters, reducing prejudice and discriminatory practices, introduction of nurse run evening clinics, opportunistic screening by GP and nurses in primary care, use of text/telephone services to remind patients of forthcoming appointments and leaflets made available to emphasise the significance of cervical screening.

Miss Pushpa Maharajan, Colposcopy Lead and Mrs Goodwin, Colposcopy Lead Nurse / Specialist Nurse Colposcopist

A Big Thank You to all GP's for your continued co-operation!

In a previous issue I had requested GP's to refer patients back to the Lower Limb Arthroplasty group in case of Suspected Surgical site infection (SSI) for an urgent review by a Lower Limb Arthroplasty Consultant and not to start ANTIBIOTICS.

I am pleased to say that with the co-operation of All concerned it has come down drastically but more needs to be done.

For Knee Replacements it's down to 2.3% from 6.1% last year. National average is 1.5%.

Our Hip replacement SSI is within National average.

For the Reassurance of all, our deep infection and overall revision rate for both TKR's and THR's is below the Regional and National average.

Our SSI Rate which includes patient and clinician reported outcome was high and on Analysis –one overriding reason was-starting of Antibiotics Empirically by all concerned, including ourselves at L&D Hospital.

It's somewhat similar in situation to Antibiotics for the vast majority of URTI, where its unnecessary, ineffective and promotes Bacterial Resistance.

It's an incredibly difficult clinical dilemma, including for experienced Arthroplasty Surgeons, looking at an inflamed Post op wound and excluding out infection by visual inspection alone.

Here at L&D the Lower Limb Arthroplasty team has put in place a management protocol for such cases.

The team can be contacted at
LLA Team: Joints@ldh.nhs.uk
For Urgent Review day hours: 01582 491166- ext 2233
Or Hospital@home Team : 07534960143
Out of hours and weekends for immediate review:
Registrar/SHO on Call T&O
01582 491166 Bleep SHO 478 Reg 778

Regards: Lower Limb arthroplasty Group LDH. Mr Manjure, Mr Kalairajah, Mr Sundarajan, Mr Sanjay, Mr Saeed, Mr Parwez.

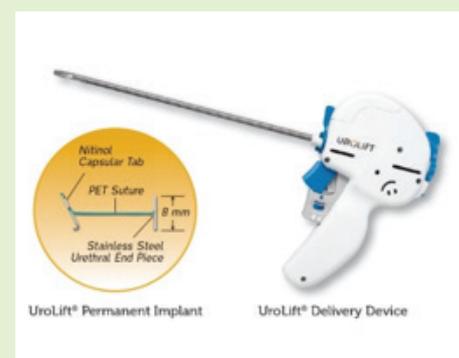
Prostatic Urethral Lift (The UroLift® System) for the Treatment of Obstructive LUTS

Patients at the L&D can now benefit from Prostatic Urethral Lift (The UroLift® System) for the treatment of obstructive lower urinary tract symptoms.

The Prostatic Urethral Lift, using The UroLift® System, is a minimally invasive, day case procedure to treat and address the symptoms of lower urinary tract symptoms (LUTS) that arise from benign prostatic hyperplasia (BPH).

During the procedure, implants are used to pull excess prostatic tissue away so that it does not narrow or block the urethra, relieving symptoms of urinary outflow obstruction without cutting or removing tissue. As a minimally-invasive surgical option, the UroLift System is associated with fewer side effects (notably low risk of permanent sexual dysfunction) and post-operative complications. Prostatic Urethral Lift is recommended by NICE as an alternative to current surgical procedures in men with LUTS due to benign prostatic hyperplasia.

The UroLift System comprises two single-use components: a delivery device and an implant, illustrated below:



After rigid cystoscopy is performed, the surgeon inserts the delivery device into the urethra until it reaches the prostatic urethra; a needle at the end of the device deploys and secures an implant in a lobe of the prostate.

One end of the implant is anchored in the urethra and the other is attached to the firm outer surface of the prostatic capsule, so pulling the prostatic lobe away from the urethra. This is repeated on the other lobe of the prostate. Typically, around four implants are used.

Dates for your Diary

GPs from all CCGs are welcome to attend the Trust's Saturday morning GP education meetings held in the Comet Lecture Hall. These meetings are held between 9.15am – 12.30 and free parking is available. These meetings are free to attend and consist of three hours of interactive, certified and accredited teaching with Q&A followed by a free hot lunch. All GPs who attend will receive CPD points. Please see below the schedule of forthcoming Saturday morning GP educational events for 2018.

Saturday 17th February 2018

- Mental Health/Dr Ashok G Patel & Dr Johan Schoeman
- Saturday 17th March 2018
Acute Medicine/ Dr Naziat AAU Consultant

Saturday 7th April 2018

- Cardiology/TBC

Saturday 19th May 2018

- Palliative Care/ Dr Anthea Robinson

Saturday 16th June 2018

- Diabetes/ Dr Saqib Mahmud & Dr Syed Mumtaz

Saturday 14th July 2018

- Paediatrics/ Ronald Misquith

Saturday 15th September 2018

To secure your free place for any of the above meetings please email Lesley.Tompkins@ldh.nhs.uk

**Lung Cancer Study Day -
Thursday 1st March 2018 -
9:00am – 5.00pm**

**Venue: Comet Lecture Hall,
Luton & Dunstable University
Hospital,
Lewsey Road, LU4 0DZ**

Target Audience:

All healthcare professionals who work with lung cancer and those who have a keen interest in learning about lung cancer.

Lung Cancer Specialist Nurse Role

To Reserve your place please Email: TrainingBookings@ldh.nhs.uk
For further information please contact: Leslie Ann John, Nicola Roper or Carrie Hollowday Lung Nurses: 01582 497153 or bleep 139/012 or lungmacmillannurses@nhs.net

Midwife Led Birth Unit open day – Saturday 3rd March, 9.00 – 17.00

We are pleased to invite mothers-to-be, families and health professionals to find out more about our Midwife Led Birth Unit on Saturday 3rd March 2018.

Future mothers who choose this option will be supported by our dedicated team of midwives in our maternity unit, with the added security of knowing they are in a hospital and beside our consultant obstetric led delivery suite.

The open day will include tours of rooms and facilities while highlighting the benefits of the unit and giving birth under midwife care.

For further details please contact Stella Roberts, Consultant Midwife on 01582 491166 or email stella.roberts@ldh.nhs.uk

The event will be held in MLBU which is located in the Maternity and Women's Health building. Refreshments will be available.

E-RS and Paper Switch Off (PSO)

As you are aware, in line with recent NHS Paper Switch Off (PSO) guidance received from NHS England, from 1st October 2018 all Primary Care referrals to 1st Consultant led outpatient appointments must be made digitally via the e-Referral Service (formally Choose & Book).

Total switch off is from 1st October, however Luton & Dunstable Hospital have received notification from NHSE that our local switch off is the 1st June 2018. Each acute trust has been given it's own remit for PSO in the lead up to October 2018.

All GP practices across Luton CCG, Bedfordshire CCG, Herts Valleys CCG and E&N Herts CCG will have received a letter from the Luton & Dunstable NHS Foundation Trust on 22nd January 2018. This letter outlines the next phases of the PSO project.

The table below shows phases 1-3, only ERS referrals will be accepted for the specialties listed in each phase from the dates listed:-

PHASE 1	PHASE 2	PHASE 3
6th November 2017	5th February 2018	April 2018
GYNAECOLOGY	GASTROENTEROLOGY	EARS NOSE AND THROAT
COLORECTAL	GENERAL SURGERY	NEUROLOGY
UROLOGY	HAEMATOLOGY	PAEDIATRICS
BREAST SURGERY	ORAL & MAXILLOFACIAL	OPHTHALMOLOGY
VASCULAR	ELDERLY MEDICINE	THORACIC MEDICINE
TRAUMA & ORTHOPAEDICS	HEPATOLOGY	ENDOCRINOLOGY
DERMATOLOGY		DIABETIC MEDICINE
PLASTIC SURGERY		PAEDIATRIC OPHTHALMOLOGY
CARDIOLOGY		NEPHROLOGY
		RHEUMATOLOGY

We will be unable to accept any non E-RS referrals for the 1st Consultant led outpatient appointment specialties listed above, after the dates shown for each phase. Any paper referrals will be returned to you for re-submission via E-RS. We would also request that E-RS referrals are made across all specialties where clinics have been published on the E-RS system to further instil this new way of working. Phase 3 will be the final stage in PSO and is expected to take place during April 2018 (precise date to be confirmed).

Appointment Slot Issues (ASI's):

Mary Hirst, Luton & Dunstable Hospital, Mary.Hirst@ldh.nhs.uk

Referrals: 2WW Referrals, Mary Hirst

2WW Booking Team, Luton & Dunstable Hospital, Mary.Hirst@ldh.nhs.uk
Telephone: 01582 497246m, ldh-tr.outpatients2wwreferrals@nhs.net

General Queries: Donna Holding, Luton CCG, Donna.Holding@lutonccg.nhs.uk

e-RS System:

Tina Glaholm, HBLICT, Tina.Glaholm@hblict.nhs.uk Telephone: 07770 642572
Theresa.O'Donnell@hblict.nhs.uk Telephone: 07881 008250

Consultants Starters and Leavers January - August 2017

February 2018 Imaging waiting times

STARTERS

Title	First Name	Last Name	Position	Start date at the Trust
Dr	Vijay	Joshi	Consultant in Respiratory Medicine	03-Oct-17
Miss	Neveen	Khan	Locum Consultant in O & G	16-Oct-17
Dr	Hilmi	Recicia	Locum Consultant in Dermatology	07-Nov-17
Dr	Amit	Saxena	Locum Consultant in Anaesthetics	16-Oct-17

LEAVERS

Title	First Name	Last Name	Position	Leaving Date
Dr	Ioanna	Androne	Consultant in Intensive Care Medicine	03-Nov-17
Dr	Spiro	Gerdzhikov	Locum Consultant in Anaesthetics	16-Oct-17
Dr	Trevor	Hedges	Consultant in Paediatrics	09-Oct-17
Mr	Adedamola	Onifade	Consultant in O & G	30-Nov-17
Drr	Anjla	Patel	Consultant in Neurophysiology	19-Dec-17
Dr	Gayatri	Pole	Locum Consultant in Imaging	31-Oct-17
Mr.	Almasuddin	Qazi	Locum Consultant in General Surgery	22-Dec-17

Modality	1st February 2018
MRI	4 weeks
MRI Paeds/Ga	6 weeks
CT (Gen)	5 weeks
CT (Brain)	2.5 weeks
CT (Colon)	2.5 weeks
US(Gen)	6 weeks
US (MSK)	7 weeks
US (MSK Inj)	7 weeks
US (Paed Hips)	6 weeks
US Neck	6 weeks
NM (Bone Ortho)	3 weeks
NM (Bone Oncol)	2 weeks
DMSA	3 weeks
Mag 3	3 weeks
Cardiac	3 week
Gen Screen	6 weeks
Paed Screen	6 weeks
HSG	2 weeks
Small Bowel	0 weeks
Sialogram	0 weeks
General Work	2 week
Dexa	3 weeks

L&D Launches its New Web-based Directory of Services

Please see the link below to the new Luton & Dunstable University Hospital 'Directory of Services' hosted on the 'GPs & Professionals' portion of our main website. This web based L&D Directory of Services is now live. This directory of services serves as a useful information resource for GPs and other health professional and their admin teams to help them navigate their way through the services we offer and provides contacts for the individuals and teams who provide our services.

www.ldh.nhs.uk/gps-professionals/consultants-and-services/

The Directory of Services holds useful on; referral information, pathway guidance, referral protocols, education and training, Consultants and secretarial contacts, admin/e-RS updates and General/Service Manager contacts for all primary/community colleagues and their admin teams to access.

Kindly advise your clinical and admin teams so they are aware of this new web based service directory which is designed to provide them with all the information they need to quickly arrange hospital care with us for their patients.

The above are waiting lists for routine appointments. Urgent appointments are available in each of the modalities above.



**Luton and Dunstable
University Hospital**
NHS Foundation Trust

Phone Numbers

Priority GP Phone Line: 01582 492851

The L&D's main switchboard: 01582 491166

Direct Line for Out-Patients Booking Dept: 01582 561385 Fax: 01582 718177

For written referrals please address your letter to:

Out-Patients Booking Dept (Name of Consultant & Specialty)

Luton and Dunstable University Hospital, Lewsey Road, Luton LU4 0DZ

If you have any queries related to the services we provide contact:

Amran Qurban
Head of GP Client Services

01582 718086

amran.qurban@ldh.nhs.uk

www.ldh.nhs.uk/gps-professionals/