

L&D Community

September 2018



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

One Stop Sleep Apnoea Clinic

As you know, the Respiratory Department at Luton and Dunstable University Hospital has been providing a full Obstructive Sleep Apnoea (OSA) service to our local population for the last few years.

In July 2018 we launched a one-stop apnoea clinic to all your patients. This includes seeing and assessing patients in the sleep clinic, performing a full diagnostic sleep study, with a CPAP machine for them to use during their sleep.

We will also monitor them remotely and follow them up regularly both in the telephone clinic and in the chest clinic. We provide mandibular advancement devices for patients who have simple snoring. If you have patients with symptoms suggestive of OSA with a high Epworth Sleepiness Score (ESS>9) please see scoring matrix below and consider referring them directly to Respiratory Department for further assessment.

This will reduce unnecessary inter-departmental referrals and will also help reduce multiple follow up appointments in hospital.

Epworth Sleepiness Score

How likely are you to doze off or fall asleep in the following situations, in contrast to feeling just tired? This refers to your usual way of life in recent times. Even if you have not done some of these things recently try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

0 = no chance of dozing
1 = slight chance of dozing
2 = moderate chance of dozing
3 = high chance of dozing

Situation	Chance Of Dozing
Sitting and reading	
Watching TV	
Sitting inactive in a public place (e.g. a theatre or a meeting)	
As a passenger in a car for an hour without a break	
Lying down to rest in the afternoon when circumstances permit	
Sitting and talking to someone	
Sitting quietly after a lunch without alcohol	
In a car, while stopped for a few minutes in traffic	

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 pre-operative assessment service

The redesigned L&D pre-operative assessment service launches on the 24 September on the ground floor of the hospital's Surgical Block, replacing up to five locations currently in use.

Patients who agree with their surgeon to go on a waiting list for surgery during an outpatient clinic consultation, will be invited to go straight from the clinic to the drop-in pre-operative assessment service, on the same day. This means that any issues that need resolving before surgery can be identified much earlier on, and addressed, to minimise any delays in having surgery.

When they arrive, all patients will be asked to fill in a questionnaire about their pre-existing health, and then a Health Care Assistant will take observations and swabs. Some patients will be triaged onwards, for a more in depth

assessment with a nurse, and those meeting medication criteria may see a pharmacist as well. Any patients with possible high anaesthetic risks may also be asked to see an anaesthetist. We will endeavour to offer patients a "one-stop" service wherever possible, but on occasions patients will be asked to return. Patients with completed assessments will be given details of a patient hotline number to phone if anything changes, eg. with their medication, pre-existing health conditions or have a newly diagnosed condition.

One specialty a week will be rolled in to the new way of working and we hope to be up and running across all surgical specialties by mid-December.

For further information contact Debbie Brazil (project lead) at debbie.brazil@ldh.nhs.uk or Karen Blinko (lead pre-assessment nurse) at karen.blinko@ldh.nhs.uk.

Case finding for Hepatitis C in Bedfordshire

Over the last 10 months the liver team have been busy case finding for hepatitis C in the community, and we brought along the fibro scan to heighten awareness around other liver conditions.

We have attended more than 12 events since October 2017 and performed more than 300 tests to check for hepatitis C antibodies. We have targeted different communities in Bedfordshire from Mosques, Sikh temples, homeless shelters, health and wellbeing events in community centres and college and most recently festivals such as Luton Mela and Bedford River festival.

From our experience many people will not identify with being at risk of hepatitis and so our aim over the last 10 months was to offer everyone a test. Hepatitis C can be transmitted in a number of ways and so many people may have been at risk without knowing. Hepatitis C is also asymptomatic and many people will feel well.

From this year's screening we found 2 positive results, both are now in a treatment pathway. The importance of screening now, more than ever before, we can treat and cure hepatitis C in more than 95% of people.



CNS Therese Moore and Martin Mcgrath Fibro Scan Technician at the Luton Mela August 2018.

New speech and language therapy clinic

In April 2017 Speech and Language Therapy (SLT) opened an innovative new clinic within the ENT department at the Luton and Dunstable Hospital. Patients experiencing voice change that met the referral criteria could be referred directly from their GP into this clinic. All patients received specialist assessment, in the form of stroboscopy of the vocal folds, and treatment at their initial point of contact.

Research has shown that access to stroboscopy leads to a more accurate diagnosis and therefore the most appropriate treatment pathway. The clinic also reduces waiting times as the usual pathway would have been an appointment in general ENT clinic and then referral on to SLT.

This clinic has now been running for over a year. Eighty eight percent of referrals into the clinic were appropriate; sixty six percent of these referrals came directly from GPs. Seventy nine percent of patients needed SLT as their primary treatment and were, therefore, discharged from the clinic.

This demonstrates a more efficient service for patients, allowing them to access and receive treatment in a timely and efficient manner. We would like to acknowledge the part that GPs have played in making this clinic successful in its first year.

Refresher WORKSHOP on administration of rescue medication with Buccal Midazolam and Basic Life Support Skills.

The L&D Paediatric Dept are extending an invitation to all adult parents/carers of children/young adults to attend a training day for the administration of rescue medication for prolonged seizures with Buccal Midazolam.

The L&D Paediatric Dept are extending an invitation to all adult parents/carers of children/young training.

The details for the training day are as follows:

Date: Tuesday 9th October 2018

Time: From 5.30pm (workshops to start 6pm to 8pm)

Venue: Luton and Dunstable Hospital, Children's out-patients (opposite the surgical block)

Parking will be paid for and should be easier in the evening. Childcare is available on request. There will also be light refreshments available. There will be an opportunity to meet other parents and carers.

We will open the playroom on the children's ward to facilitate childcare and will have play staff available to look after them from 5.30pm. If childcare is required please can you let my secretary Carol know at the time of booking along with the number of children and their ages. Please bring them to the children's ward for 5.30pm.

If you are able and interested in attending please either call my secretary Carol Lander on 01582 497203 or email her at c.lander@nhs.net to confirm attendees.

Dr Vandna Gandhi, Consultant Paediatrician

Fertility Services at Luton & Dunstable University Hospital

The L&D's fertility service continues to expand and now offers the services listed below which are well established with good patient satisfaction levels. These services are delivered by a responsive team who provide guidance and support to all their patients.

Self-funded semen testing – As well as providing NHS funded semen testing we now also provide self-funded semen testing.

HyCosy service – The fertility dept has developed a one stop HyCosy service to check the patency of fallopian tubes by ultrasonography. This service has reduced the number of fertility investigations required resulting in a quicker patient journey.

Ultrasonography – This service has reduced the number of fertility investigations required resulting in a quicker patient journey.

Endometrial Scratch – This new procedure is used to help embryos implant more successfully.

IVF /Assisted Conception Seminars – From August we will be offering IVF seminars for all our patients. These seminars provide patients with the opportunity to meet the team and

answer any queries or concerns they may have regarding our services and treatment pathways.

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 services are approved by the IPGC team in the Trust and are working well with good patient satisfaction levels and above national average success rates.

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&D University Hospital Fertility Team.

Dr Nisar wins national award for Rheumatology department

The Rheumatology department has been awarded a commendation at the British Society of Rheumatology's (BSR) 2018 National Best Practice Awards. Of 27 centres, Luton & Dunstable University Hospital was among ten finalists who were visited by a panel representing NICE, BSR and a consultant peer. At a prestigious award ceremony at the national conference in May, the Early Arthritis service won commendation for demonstrating cost effective

improvement in patient outcomes and reduction in biologic use.

The awarding panel particularly praised the fact that the service transformation led to nearly 80% of patients achieving therapeutic target within six months.

Waiting times for a first appointment reduced to 2.5 weeks in line with NICE recommendations with improved clinic utilisation. DNA rate dropped to half of the organisation's average. The use of biologics decreased from 26% in 2015

to 5.6% in 2016 underlining successful medicine optimisation. An analysis of workplace productivity revealed that 83% patients experienced no impact of their disease on their work compared to only 45% of patients in work nationally.

The team demonstrated that the service is distinctive, as the focus was not on process delivery, but on achieving improvements in clinical outcomes using a centralised and patient-oriented multidisciplinary model.

GP Input in Trust clinical and service development projects

The L&D is undergoing a great deal of change with major developments underway such as the STP, L&D site redevelopment, Bedford & L&D Trust merger to name just a few. In addition to these large scale developments the Trust routinely undertakes smaller speciality specific clinical or service developments. In order for us to meet the growing and changing needs of our patients and GP clients we are always looking to involve motivated and forward thinking GPs to help us ensure we meet these changing needs by involving them in the design of new and existing services and clinical pathways. Recent examples of projects where GP input has been invaluable are the design of the L&D's new Inpatient and A&E discharge letters, GP Client Service Programme, New L&D Laboratory Information Management System (LIMS).

With this aim in mind if you are a GP who would like to work with the L&D as a GP service user representative on forthcoming service/clinical developments affecting the wider health economy we would love to hear from you. In most cases GPs input/feedback is sought during the initial design and then recommendation stages of new or existing service or clinical pathways. You can tailor the amount of time you can commit and how you wish to be involved.

To express your interest in forthcoming projects please email our Head of GP Client Services via amran.qurban@ldh.nhs.uk.

NHS E-Referral Advice and Guidance – Non Urgent Update

The Trust has been receiving increased numbers of advice and guidance requests. The turnaround time of 80% responded within 2 days has been met. It is worth noting that some of the clinicians have stated they are receiving admin queries rather than clinical queries. Just to clarify the Advice and Guidance available on the NHS e-referral system is available in order for a secondary care clinician to have a conversation regarding one of their patients.

There are three key reasons why a primary care clinician would use Advice and Guidance:

1. To ask for advice on a patient's treatment plan and/or ongoing management of patient's.
2. Asking for clarification (or advice) regarding a patient's test results.
3. Seeking advice on the appropriateness of a referral for their patient or whether there is a more appropriate care pathway.

There are planned audits within the high volume specialties and learning from these will be shared with the Practices.

Mary Hirst, Outpatients Operational Manager, Luton & Dunstable University Hospital NHS Foundation Trust.

L&D to only accept ER-S GP referrals from 1st October 2018

Please be reminded new national NHS rules contained within the 2017/19 Acute NHS Standard Contract will come into effect on the 1st October 2018 which stipulates all hospital GP referrals must be sent via ER-S from this date for services available on ER-S. All acute providers including the L&D will only accept ER-S referrals from the 1st of October. However the L&D has in place some exclusions, as such non ER-S referrals will be accepted for the services listed in the exclusions table below. All services outside of these exclusions will require an ER-S referral.

Exclusion listing	Additional Information
All Ward Attenders	–
All Walk-ins	–
All Nurse Led Clinics, e.g. pre-assessment	–
Ambulatory Clinics – All Specialties	–
Audiology	The criteria for Audiology are over 55 age related hearing loss. Any other conditions need to be referred to ENT.
Bariatric 1st Appointment Clinics	–
Cardiology Tests	GP can on direct refer for Echo. 24/48 hour ECG no open access to GP practices.
Cardiology Therapist led	–
Community Diabetes Service	On occasions referrals from this service will be redirected to a Consultant led clinic. Practices will be contacted and advised when the referral should be sent via e-RS.
Dietetics	Service does not accept direct GP referrals
Physiotherapy	–
ENT – Acute Clinic	–
Gynaecology Early Pregnancy Assessment Clinics (EPC)	FSA (Fertility Semen Analysis) via ICE BG5 (Termination of Pregnancy – TOP)
Gynaecology Ward Attenders	ALL
Midwives	ALL
Neurophysiology	Referrals can be made via ICE
Obstetrics 1st Appointment Clinics	–
Ophthalmology Acute Clinic	–
Orthopaedics – Fracture Clinic	–
Orthotics	–
Paediatric Assessment Unit (PAU)	–
Respiratory Physiology	Respiratory Physiology
TIA Medicine TIA / Stroke	Urgent service via fax 01582 497359

News regarding the redevelopment of the L&D Hospital

1. New outpatient clinic at Arndale House, The Mall, Luton

In May 2018 the L&D Hospital opened a new outpatient clinic facility at Arndale House in the centre of Luton. The new clinic offers modern and spacious facilities for our patients. Sexual Health services, Dermatology services and GP Phlebotomy and follow up Anticoagulation Phlebotomy services have all moved from the main Hospital site to this new facility. Some phlebotomy patients will continue to be seen on the main hospital site including outpatients (patients who have a Blood Test Request Form given to them by a hospital doctor or nurse), children under 13, and patients requiring transport or with limited mobility. For further information please visit to the Trust's website at www.ldh.nhs.uk

Both patient and staff feedback has been excellent, with immediate improvements in patient access, reduced waiting times to secure a clinic appointment and reduced waiting times when attending clinic. Patients and 80 of our staff members have appreciated the new facilities and easier car parking and public transport routes that Arndale House provides. Patient feedback will continue to be monitored to ensure all three services remain responsive and progressive to the needs of patients.

The movement of clinics from the Hospital site has had the added benefit of relieving some congestion on and around the hospital site and is allowing the expansion of respiratory, gastroenterology and rheumatology clinics, and the separation of obstetrics and gynaecology clinics. This in turn will support improved access and patient experience.

2. New paediatric oncology bedrooms

Following a successful appeal run over the last year, the Trust has received generous funding from donors to the Hospital Charity and have fundraised to enable the refurbishment of two paediatric oncology bedrooms. Work is currently underway and these rooms will be opened in October. Children using the service have fed into the design and the pictures below show the interior design for the bedrooms.



Luton and Dunstable Hospital Clinical Ethics Committee

The L+D Hospital Clinical Ethics Committee was created over ten years ago and meets monthly to discuss ethical issues that affect our patients and staff. The committee is made up of twenty or so members from many different departments and includes doctors, nurses, managerial and lay members. We have always had GP representation on the committee with Dr Jo Price currently on the panel. We feel that the knowledge and insight that GPs can bring to our committee is extremely

valuable and would be delighted to welcome any GPs who would be interested in joining us. We meet on the first Wednesday of every month at 5.15pm in the COMET centre at the Luton & Dunstable Hospital.

If you would like to attend one of our meetings please contact Dr Steve Brosnan, consultant anaesthetist and CEC Chair via the L&D switchboard.

Important Announcement – Cardiology NHS E-Referral Service

Starting from 29th August 2018 we have published a new service called Suspected Heart Failure-Luton & Dunstable Hospital-RC9. This is a triage service for patients with suspected heart failure. When you select the appointment type of Heart Failure you will come across this service which is a Referral Assessment Service alongside the routine Cardiology Service. There is a set criteria for referral into this service which shown on the referral criteria. It is important that you check this before referring to ensure you are selecting the correct service for the patient.

Previously referrals to the heart failure service were made via the ICE system. Referral on ICE to Heart Failure will no longer be available. This is in line with the NHS England requirement to send first consultant appointments via NHS e-Referral system.

Please also be advised the rapid access chest pain service is no longer available on ICE, but is now available on ER-S.

If you have any queries or concerns regarding this or any other queries then please contact the staff listed below.

Query	Name	Organisation	Email
Directory of Service queries	Mary Hirst Pete Towers	Luton & Dunstable Hospital	Mary.Hirst@ldh.nhs.uk Peter.towers@ldh.nhs.uk Telephone 01582 497246
2WW Referrals	2WW Booking Team		ldh-tr.outpatients2wwreferrals@nhs.net Telephone 01582 497247
General Queries	Donna Holding Sally Donnelly	Luton CCG Bedford CCG	Donna.Holding@lutonccg.nhs.uk Sally.donnelly@bedfordshireccg.nhs.uk
e-RS System Training	Theresa O'Donnell	HBLICT	Theresa.O'Donnell@hblict.nhs.uk Telephone 07881 008250

Consultants Starters and Leavers September 2018

STARTERS

Title	First Name	Last Name	Position	Start date at the Trust
Mr	Jose	Maya	Ophthalmology Medical Locum Consultant	06/8/2018
Dr	Ayevbekpen	Okoye	SCBU/NICU – Consultant	16/8/2018
Dr	Suvidya	Rajendran	Obstetrics Medical – Consultant	11/6/2018
Mr	Prithwiraj	Saha	Urogynaecology – Consultant	30/8/2018
Dr	Vipin	Tyagi	Paediatric Medical – Consultant	03/7/2018
Dr	Doris	Subanandan	Medical Consultant	02/01/2018
Dr	Samadara	Wari-Pepple	SCBU/NICU – Consultant	11/6/2018

LEAVERS

Title	First Name	Last Name	Position	Leaving Date
Dr	Vinod	Devalia	Haematology Medical Consultant	31/8/2018
Dr	Sirisha	Donekal	Paediatric Medical – Consultant	14/6/2018
Dr	Arzu	Rezvani Webb	Imaging Medical – Consultant	28/6/2018
Dr	Abraham	Teferi	Microbiology Medical Consultant	11/8/2018
Dr	Bright	Thomas	Imaging Medical – Consultant	06/7/2018
Dr	Beatrice	Zinga	Paediatric Medical – Consultant	29/7/2018
Dr	Sokratis	Zormpas	Ophthalmology Medical Consultant	31/7/2018

New Consultant in Clinical Neurophysiology



*Dr Simon Freilich,
Consultant in Clinical
Neurophysiology*

I'm a Consultant in Clinical Neurophysiology and am thrilled to have joined the L&D substantively this August. I've moved across from the Whittington Hospital and now look forward to enhancing service provision to our local population. For those of you who aren't sure what Neurophysiology is, we perform EEGs for those with suspected Epilepsy and Nerve Conduction / EMG studies for those with suspected Neuro-Muscular problems. We deal with the complete spectrum of ages and issues, whether supporting our colleagues on the NICU, to stratifying carpal tunnel severity in the elderly. As we are one of medicine's best kept secrets, the chances are, you've never seen what the tests involve. Feel free to check out my YouTube Channel 'Dr Simon Freilich' where you can find lots of content with demonstrations of the tests we perform together with evidence based explanations of the conditions we help diagnose. Whilst most of our referrals are from hospital based specialists, we do accept direct access requests from GPs and MSK providers for assessing peripheral nerve problems such as carpal/cubital tunnel and neuropathy screening.

September 2018 Imaging waiting times

Modality	Appointment wait
MRI	5 weeks
MRI Paeds/Ga	8 weeks
CT (Gen)	5 weeks
CT (Brain)	3 weeks
CT (Colon)	3 weeks
US(Gen)	6 weeks
US (MSK))	7 weeks
US (MSK Inj)	11 weeks
US (Paed Hips)	7 weeks
US Neck	7 weeks
NM (Bone Ortho)	2 weeks
NM (Bone Oncol)	2 weeks
DMSA	3 weeks
Mag 3	2 weeks
Cardiac	2 weeks
Gen Screen	9 weeks
Paed Screen	8 weeks
HSG	2 weeks
Arthrogram	6 weeks
Small Bowel	3 weeks
Sialogram	8.5 weeks
Plain Film Xray	4.5 week
Dexa	5 weeks

The above are waiting lists for routine appointments. Urgent appointments are available in each of the modalities above. Currently waiting times for GP reports for MRI, MRI Paeds/ Ga, CT (Gen), CT (Brain) and CT (Colon) are currently 4-5 weeks. All other modalities will be reported to GPs in less than 10 days. Urgent results reporting shall be given priority with reports provided to GPs asap.



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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

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/