

Same Day Emergency Care (SDEC) Referrals from Velindre Cancer Centre (VCC) Treatment Helpline



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Project Background:

Approximately 10 Aneurin Bevan University Health Board (ABUHB) patients a month are referred via Velindre Cancer Centre (VCC) Treatment Helpline to Acute Care within ABUHB Hospitals.

Not all acute patients require immediate care, therefore most patients experience a long wait at the front door of A&E/MAU before being referred to by Oncology Specialists for further review.

Around 50% of these patients could be directly referred to Same Day Emergency Care (SDEC), enabling specialist Acute Oncology Service (AOS) needs to be addressed more quickly and reduce the time spent in acute care, thus improving patient outcome and experience.

Project Outcomes:

- Established and delivered a new pathway between services in two organisations. ✓
- Reduced acute oncology patient waiting times by up to 8 hours. ✓
- Reduced 3 patients Co2 footprint and travel costs by £5 each, providing care closer to home. ✓
- Increased Acute Oncology Education for generalists in SDEC and flow centre. ✓
- Improved patient experience, by providing quicker specialist oncology advice. ✓
- Saved the LHB £4500 on admissions/bed days. ✓

Patient Story:

36YO palliative patient called the VCC treatment helpline at 07:30, feeling generally unwell post chemo. They were advised to attend SDEC at GUH after they opened at 09:00, a 10 mile and 22-minute round trip. AOS reviewed the patient at 11am, gave IV fluids and discharged at 17:00, with an appointment for day return for repeated bloods.

The patient was home in time to have dinner and do bed time routines with their children.

Previously, IV fluids, and repeat bloods would have resulted in an overnight admission via A&E costing the health board approx. £500 per night.

Project Aims/Objectives:

- Overarching Aim: Improve the patient experience for cancer patients impacted with complications of their treatment or disease progression.
- Objective 1: Work collaboratively with colleagues at ABUHB and VCC to co-design new pathway into SDEC.
 - Objective 2: Reduce the pressure at the front door within A&E and MAU settings.
 - Objective 3: Improve patient experience, by providing quicker access to specialist oncology advice, in a calmer and more comfortable setting.
 - Objective 4: Improve bedside generalist education on Acute Oncology for colleagues.

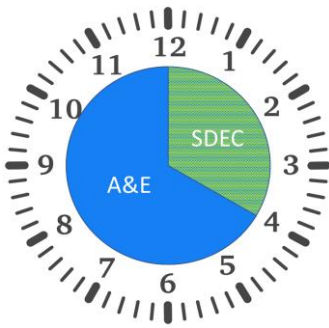
Project Impact: 12 patients supported, £4500+ saved in 10 weeks



Of the 12 patients seen, 3 were provided **care closer to home** than pre-implementation, resulting in a total saving of 90 miles and 191 minutes for those patients. This was a reduction in 85 kg of Co2, the same as offset by approximately 4 trees a year.



In A&E 78.2% of patients are seen in less than 12 hours. **In SDEC our average patient stay was 4 hours**, potentially saving each patient up to a further 8 hours wait



Project Approach:

- Briefing and introductory workshop.
- Development of pathways and agreement of criteria via email communication and short meetings
- Development of Communication plan prior to pilot and during pilot.
- Progression from pilot to business as usual.

Key Conclusions:

- The project has been successful on many levels, despite the disappointment of lower patient numbers that anticipated, and has resulted in a business-as-usual pathway.
- There is always room for more and improved communications and education, such as a networking morning to promote collaborative working between the involved organisations.

Next Steps:

- Roll out to wider within ABUHB, e.g. palliative care.
- Review the exclusion criteria, to allow access for more acute oncology patients from the VCC treatment helpline.
- Support developments of pathways at SDECs within the SE Wales region.
- Support developments nationally, by sharing our learning with Hywel Dda UHB.
- Networking morning.