Improving the referral process for the Learning Disability – Epilepsy service

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Quality issue

Different processes for handling referrals to the Learning Disability – Epilepsy service have been developed over a number of years, and there is no clear, defined process for how referrals to the service are dealt with. Following a review of the service, it was agreed to apply QI learning and methodology to standardise and improve all parts of the process.

Aim

To improve care for Learning Disability patients by improving the communication pathway, ensuring accurate and timely clinical information for healthcare workers, patients and their families.

Priorities for improvement

In order to understand the current system, a period of research into current practice and analysing the processes as described was paramount. After agreeing that the initial focus would be on the Learning Disability – Epilepsy service, the next step was to process map the referrals received and how these were dealt with. We invited colleagues from the Community Learning Disability team to share their process for handling referrals. This highlighted a difference in how referrals were handled in the community in relation to the Epilepsy service.

Double Diamond

Process map
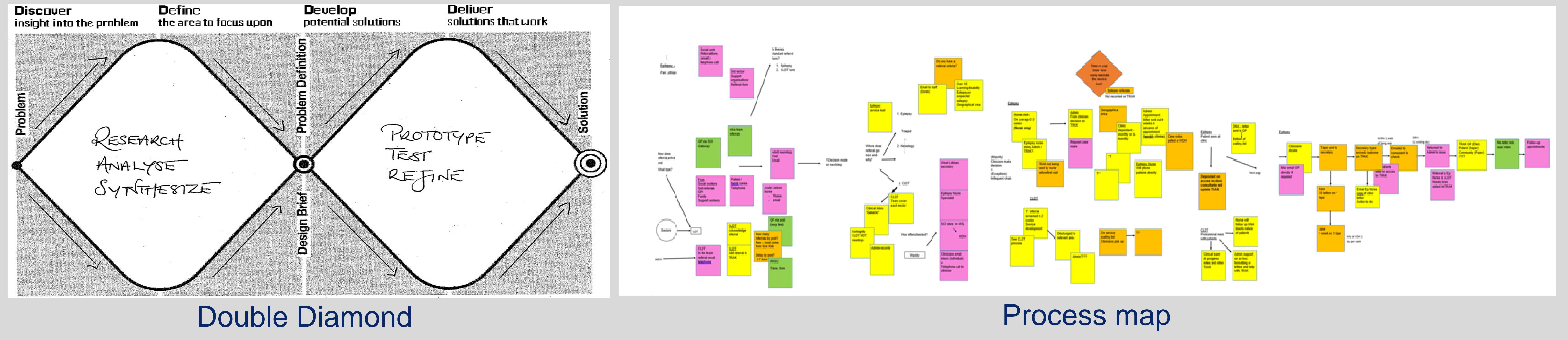
Measurement of improvement

Although the data has not given us a definitive answer as to how well the referral process is working for the Learning Disability – Epilepsy service, it does allow us to understand if the process is consistent, and to investigate where the challenges for the service are.

Further investigation highlighted that there were no rejected referrals during this time period. Assuming that not all referrals will be actioned, the team decided to look at this in more detail. This is part of the ongoing project with the administration team to standardise the referral process.

Number of referrals per month
Jan 2017 - Jun 2019
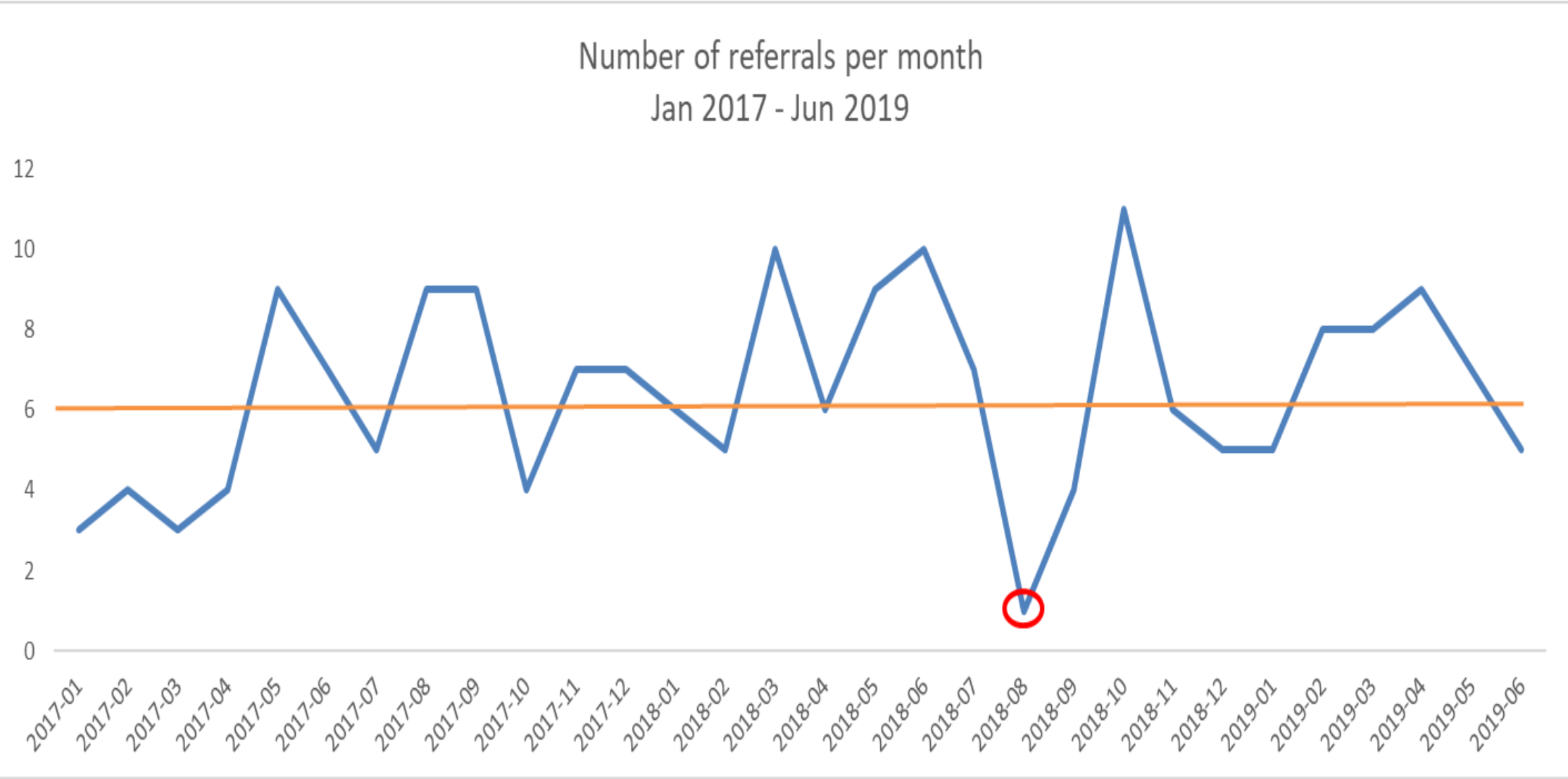
Next steps

Stage 1
• All referrals to be added to TRAK and weekly boxi reports monitored for trends etc

Stage 2
• Create generic inbox for all referrals, ensuring the service is delivered within the Waiting Times Guidance for referrals

Stage 3
• All TRAK templates to be reviewed and progress notes added to TRAK in real time

Stage 4
• Measure dictation and transcribing process times from clinical to admin and vice versa
• Improve monitoring work flow through letters on individual tapes and not 6+ letters on tapes
• Look at the process for follow up appointments
• Transfer all health records held at AAH to REH Health Records Department

Lessons learned and messages for others

Before improving any service, have a clear understanding of what the processes or systems that are already in place are. If your data does not reflect what you thought was happening, it's not the data's fault. Look deeper to understand what the data is telling you.

Engaging with teams is essential to ensure good consultation and communication throughout the QI process. Teams will put forward their own ideas for service improvement, which will help ensure successful engagement with the QI process. Continue to research and develop different methods and tools to improve stakeholder engagement.