Newcastle leading the way in liver medicine

A new type of genetic blood test that diagnoses scarring in the liver, even before someone may feel ill, has been developed in Newcastle.

The new test seeks an epigenetic signature in blood which can diagnose the severity of fibrosis for people with Non-alcoholic Fatty Liver Disease (NAFLD).

Dr Quentin Anstee, a Consultant Hepatologist at the Freeman Hospital and Senior Lecturer at Newcastle University explains: “This scientific breakthrough has great promise because the majority of patients show no symptoms. Routine blood tests can’t detect scarring of the liver and even more advanced non-invasive tests can really only detect scarring at a late stage when it is nearing cirrhosis. "We know that the presence of even mild fibrosis of the liver predicts a worse long-term outcome for patients with NAFLD and so it’s important to be able to detect liver scarring at an early stage.”

Find out more about how to refer patients with suspected NAFLD on page 3.

Pioneering liver cancer treatment

The Freeman Hospital is currently one of only 11 specialist centres in the UK to offer a pioneering procedure to treat liver cancer. It involves millions of tiny radioactive beads called SIR-Spheres Y-90 resin microspheres which are injected directly into the tumours via the blood stream. They emit high doses of radiation to destroy the tumour cells and significantly reduce the size of liver tumours. Until now, there have only been two other forms of therapy available for patients with inoperable liver tumours - TACE and sorafenib - which many patients are unable to tolerate. This new treatment offers an alternative.

Professor Derek Manas, Director of Newcastle’s Institute of Transplantation says: “The treatment has been very effective. For patients we cannot operate on, it gives them an alternative option as there are not many treatments available, and they only need a single treatment, helping reduce side effects.”

App-ropriate care for liver patients

A pioneering App has been devised in Newcastle which allows medical teams to monitor the progress of patients with Primary Biliary Cholangitis (PBC, previously known as Primary Biliary Cirrhosis) and predict suitable drug treatment.

The work was led by Professor David Jones, a liver expert who works for both the Newcastle Hospitals and Newcastle University, as part of the Newcastle Academic Health Partners (NAHP), supported by the NIHR’s Biomedical Research Centre.

As well as offering reassurance for both the patient and the medical team, the App is saving NHS resources, improving patient care and according to a recent academic paper has been shown to be as accurate as a liver biopsy.

To find out more about these stories, go to the News Section of our website www.newcastle-hospitals.org.uk/news/index.aspx

Also inside...

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Introducing NECTAR
Newcastle Hospitals @ Manor Walks, Cramlington
Direct Access Adult Tinnitus Clinic
Pulmonary Rehabilitation @ Benfield Park Healthcare and Diagnostic Centre
GP Communications - an update

GP Matters is available electronically and can be found on GPTeamNet. If you would like us to send these to you directly, email gpmatters@nuth.nhs.uk and we will add you to our direct mailing list.

Healthcare at its very best - with a personal touch
Streamlining Urgent Care

The residents of Newcastle and surrounding areas are extremely lucky in that our local hospitals never close for urgent and emergency care.

Enormous amounts of urgent work are carried out every day within the Emergency Department (ED) and the Assessment Suite (AS) at the city centre’s Royal Victoria Infirmary (RVI).

It is no secret that the pressures on both are huge. Yet, at the same time, alternative options are probably under-used. Our patients’ care will be enhanced if alternatives to direct admission are used when appropriate.

It is recognised that GPs and their colleagues are doing all they can to see likely admission patients as early as possible in the day, which is appreciated. Yet the average day in General Practice is unpredictable and logistics less than simple which can lead to patients being visited much later in the day and delays with transport resulting in evening admissions for calls that started in the morning. This all adds to the pressure and likelihood of admission.

The possibility of booking Ambulatory Care Unit assessments the following morning, potential use of urgent elderly care services, complex community responses via the CRRT, or getting expert advice by phone are the options we are trying to emphasise, but there are many more:

- GPs across Newcastle were recently sent an A5 laminated contact sheet which provides direct contact details for some of the key services and clinics which offer excellent alternatives to Newcastle’s ED and AS.
- This has been produced with the intention that GPs – and other Practice staff who carry out home visits – take the card with them at all times.

These key services can be contacted when you need to arrange rapid referral to specialist care in one of our community or secondary care based services, and can be an excellent alternative to emergency admission for some patients. They include:

- **The Ambulatory Care Unit** – for patients who are ambulatory and would benefit from urgent assessment or investigations which can be booked for the same day or following morning;
- **Our Emergency Medical Opinion Line** – direct communication with a Consultant in Acute Medicine about a potential admission;
- **Community Response and Rehabilitation Team (CRRT)** – providing community based responses for patients who are frail and vulnerable, often with complex health and social needs;
- **Rapid Assessment in Care of the Elderly (RACE)** – rapid MDT assessment for early stage concerns.

There are many other services available which can be found online at [www.newcastle-hospitals.nhs.uk/gpuac](http://www.newcastle-hospitals.nhs.uk/gpuac)

A website optimised for hand-held devices and dedicated to GPs with a plethora of information is currently being developed – further news on this soon.

We hope the GP Contact Lists prove useful. Further copies can be obtained by contacting Dr Chris Gibbins, Consultant in Acute Medicine on 0191 282 6624 or our Consultant Opinion Line on 0191 282 1524.

Dr Steve Summers is a GP Partner at Park Medical Group, Fawdon and Clinical Lead for Urgent Care at Newcastle Gateshead CCG

Ambulatory Care Developments

The RVI’s Ambulatory Care Unit (ACU) has expanded its capacity to offer more patients rapid assessment, treatments and same day discharge.

Working alongside the Assessment Suite, this has vastly improved the care and experience of patients referred with urgent and acute medical problems.

Consultant expansion has allowed us to ensure that there is now dedicated senior medical presence on ACU every day Monday to Friday until 7:00pm. In addition to established pathways for DVT, PE, Headaches and low risk GI bleeds, we are now managing a wide range of patients presenting to the acute medicine services at the RVI.

ACU has good links to diagnostics and staff can access urgent ultrasounds, CT and other specialist tests that allow rapid diagnosis and avoid the need for admission to hospital.

Feedback from patients has been very positive.

However, patients referred from the community with acute medical presentations often present late in the day and arrive at hospital during the evenings which are the peak time for emergency admissions to medicine. It may also be too late for the diagnostic tests that are needed and patients either end up staying overnight or being asked to return the following morning. Many of these patients may have been suitable for an urgent next day review in ACU rather than an urgent referral to the Assessment Suite or ACU.

To try and improve this service for patients, the Bed Bureau will now be asking referring GPs whether the patient would be suitable for an early next day appointment in the Ambulatory Care Unit. If suitable, the GP will advise the patient to attend ACU at 9am the following morning and bed bureau will advise the ACU staff. It is hoped that this improvement will streamline the service and avoid unnecessary delays in patient care.

For more information or advice, please contact Dr Chris Gibbins, Consultant in Acute Medicine on 0191 282 6624 or try our Consultant Opinion Line on 0191 282 1524.
The Joint Clinic takes place at the CRESTA Clinic on the Campus for Ageing and Vitality. The referral criteria is as follows:

1. Recognition of risk of NAFLD (i.e.: overweight, insulin resistance/diabetes, high blood pressure, high cholesterol)
2. Confirm NOT drinking >14/21 units alcohol a week
3. Exclude other causes of liver disease, eg. viral hepatitis (HBV and HCV)
4. Calculate the "NAFLD Fibrosis Score" using this simple online calculator: http://nafldscore.com/

If it puts people as "high" or "intermediate" risk then they should be referred to us. If "low" risk, lifestyle advice and monitor in primary care.

Please note that genetic blood tests are not currently part of routine care BUT there are two very promising medications in late-stage 3 Clinical Trials and we are recruiting into both studies so there are now lots of treatment options available.

Referrals can be made by letter addressed to the Joint Fatty Liver Disease Clinic, Freeman Hospital, NE7 7DN

For more information you can contact Dr Quentin Anstee via his secretary helen.dobson@nuth.nhs.uk

New Headache Management Guidelines

Most patients with headaches can be managed in primary care. New Headache Management Guidelines have been developed regionally and adapted for use at Newcastle’s Royal Victoria Infirmary (RVI).

The Guidelines include an aid to GPs diagnosing headaches, basic management as well as when and how to refer in. We hope they are a useful aid to enable more headaches to be managed in primary care.

Advice and Guidance from Neurologists is also available via the NHS eReferral System if you need further help.


Epilepsy First Seizure Clinic

This clinic is for adult patients who have had a suspected first seizure and is run by Consultant Neurologists and Nurse Specialists at the RVI.

Patients who should be referred:
• Patients aged between 16-65 years of age
• Single seizure (or several seizures but no diagnosis of Epilepsy)

Patients not suitable for referral
• Symptomatic seizures (hypoglycaemia, acute trauma, eclampsia, other)
• Non-epileptic attacks
• Isolated loss of consciousness without seizure, syncope

How to access
• Download the First Seizure Clinic Referral Form from GP TeamNet or our website at www.newcastle-hospitals.org.uk/neurogps
• Email First Seizure Clinic to: tnu-tr.1stseizureappointments@nhs.net

To find out more or if you have any queries please contact:
Penny Burt, Epilepsy Nurse Specialist on (0191) 282 3995 or penny.burt@nuth.nhs.uk
Dee Frost, Epilepsy Nurse Specialist on (0191) 282 3995 or dee.frost@nuth.nhs.uk
Epilepsy Admin Team on (0191) 282 3995 or tru-tr.1stseizureappointments@nhs.net

Joint Fatty Liver Disease Clinic

Following a successful pilot period, Newcastle’s Neurologists are pleased to announce that the ‘Advice & Guidance’ Service will be a long-term feature on the NHS e:Referral Service.

The service has been very well received and feedback extremely positive with 100% of GPs finding it useful and over 90% stating that they would have referred the patient had this service not been available.

So far appropriately 75% of requests have not required an appointment, with GPs receiving expert advice within days. This has allowed patients to be managed in primary care, avoiding unnecessary hospital appointments.

When asked how likely they were to use the service again in future if it was available from 0 – not at all, to 10 – very likely the response was 9.6/10.

GP Comments:
“Often as a GP we need quick advice more than referral but find it difficult to track down someone to speak to on the telephone or don’t like to bother someone on call when it’s not an emergency.”

“Please keep this service! It will improve patient care and reduce referrals”

“An extremely useful resource with prompt responses. Please maintain the high standards already exhibited.”

To find out more or if you have any queries please contact:
Dr Naomi Warren: Consultant Neurologist on either (0191) 282 3176 or Naomi.Warren@nuth.nhs.uk
Lawrence White: e:Referral Service Manager on either (0191) 244 8632 or Lawrence.White@nuth.nhs.uk
Don’t be the last to discover
the Newcastle Laboratories Website

The Trust’s ‘Newcastle Laboratories’ are delighted to announce the launch of our new website:

Created using a clean, modern layout with clear navigation, our website provides visitors with easy access to information on:

- who we are
- what we do
- where to reach us
- how to get the most from our range of services

Using the latest technology, the site is compatible with current browsers and mobile devices so you can access important information even when you are away from your practice.

Our website is packed with information aimed at a wide range of service users including patients, NHS Trust laboratories, research institutions and private occupational health providers but also has a dedicated GP Zone, accessed from the Homepage, providing quick reference to information on your local courier collection times, specimen stability, ICE and LabLinks I.T. support and much more.

The website has two exciting new features:

- An easy-to-browse database of all our lab tests. The extensive databank is searchable by test name from the Home page, and contains information on clinical background, specimen requirements, special precautions, reference ranges and more, to facilitate requesting and interpretation of laboratory results.
- An e-catalogue offering a straightforward means of ordering your pathology consumables which provides you with email updates on the progress of your order.

Dr Akhtar Husain, Clinical Director for Newcastle Laboratories, says: “The website is part of Newcastle Laboratories’ ongoing efforts to enhance the quality and accessibility of information to all our service users. The content will be updated continually to reflect new developments taking place within laboratory medicine”.

Visit our website today at: www.newcastlelaboratories.com and let us know what you think. We welcome your feedback.

Rheumatologists
win National Award

The Freeman Hospital’s Rheumatologists have been selected as this year’s winner of the ‘Emerging Best Practice Award’ by the British Society of Rheumatology (BSR).

The BSR judging panel commended the winners for their submission “An integrated Clinical Rheumatology Database Linking Service, Audit and Research”.

The database is attached to the service’s Early Arthritis Clinic. Clinical Lead Dr Arthur Pratt says: “I am a strong believer that integrating clinical services with high quality research creates a ‘virtuous cycle’ with real benefits for our patients and their carers.

“Absolutely key to this has been the development of a database which helps our team to collect relevant information from patients in clinic on a ‘real-time’ basis. As well as providing us with a powerful resource for our research programme, this helps us to monitor how well our service performs against national standards. Finally, for example through the database’s ability to “auto-generate” letters from nurse-led clinical appointments we can ensure timely communication with our GP colleagues.”

This data has demonstrated some very impressive results which were published earlier this year in the first National Clinical Audit for Early Inflammatory and Rheumatoid Arthritis.

Of the award Dr Pratt says: “HQIP outcomes are very much related to this Best Practice Awards being closely aligned to the HQIP ethos of continuously striving to improve health outcomes by constantly measuring clinical practice and outcomes.”
First On-line GP Training course on Neuromuscular Disorders

Muscular Dystrophy UK and the Royal College of General Practitioners (RCGP) have come together to create the first ever online course for GPs on the presentation and management of neuromuscular conditions in primary care.

The new training module, developed by a group of neuromuscular clinical experts – including specialists at Newcastle’s Northern Genetics Service – GPs, and (perhaps most importantly) people with muscle-wasting conditions, includes important information in an easy to use format.

The course helps GPs gain a better understanding of the spectrum of neuromuscular disease, their role in the management of neuromuscular conditions, and to recognise the key moments when a patient needs to be referred to a specialist.

This new module is hosted on the Royal College of General Practitioners e-learning training website, and takes less than an hour to complete. It is free to GPs who are members of the RCGP and worth one accredited continued professional development point.

For patients in the North East and Cumbria, the regional Neuromuscular Diseases Service is run by the Northern Genetics Service at the Centre for Life, overseeing the diagnosis and co-ordination of multi-disciplinary care for children and adults with inherited neuromuscular diseases, including muscular dystrophies.

The Newcastle Genetic Service has a dedicated team specialising in all aspects of neuromuscular diseases and welcome referrals from GPs and secondary care.

For further information please visit: www.newcastle-hospitals.org.uk/services/northern-genetics_specialist_newcastle-muscle-centre.aspx

Dedicated service for Young People with JIA

Patients diagnosed with Juvenile Idiopathic Arthritis (JIA) are seen in Adolescent Rheumatology clinics based at the Great North Children’s Hospital by Consultant Rheumatologist, Dr Martin Lee (who has a special interest in young adult care).

Patients are then transitioned across at an appropriate stage to a specialised Young Adult service run from the Benfield Park Healthcare and Diagnostic Centre in Walkergate, Newcastle. Here they are seen by members of the Rheumatology team with an interest in Young Adult care; Dr Martin Lee, Sister Lesley Tiffin (Rheumatology Specialist Nurse) and Laura Hetherington (Rheumatology Research Nurse).

Dr Martin Lee also sees new referrals for Young Adults with a suspected Inflammatory Arthritis or with JIA moving to this region at Benfield Park’s clinic.

Benfield Park Healthcare and Diagnostic Centre is extremely easy to access via Walkergate Metro and there is also ample and free on-site parking. It is most Young Adult friendly with bright and welcoming waiting areas, and clinic rooms which are light and spacious.

Young patients can be referred via the e-referral system. Under ‘Organisation or Site Name’ type in NUTH and the option of ‘Newcastle Hospitals at Benfield Park’ will come up.
The new, state of the art outpatient centre at the Manor Walks Shopping and Leisure Centre in Cramlington has now been up and running for over six months and is proving to be a huge success.

Patients who have used the centre have remarked upon the superb standards of the facilities and the staff, and the convenience and ease of access.

We are currently running a number of clinics from Newcastle Hospitals @ Manor Walks, specially chosen as having high attendances from patients living in and around the South Northumberland area.

These include:
- Audiology and ENT (including Specialist Nurse Clinics)
- Dermatology (including a Melanoma Screening Clinic)
- Ophthalmology (Macular Service)

We also offer Chemotherapy Closer to Home clinics provided by our specially trained nursing staff from the Freeman Hospital’s Northern Centre for Cancer Care (NCCC).

In each edition of GP Matters we shall publish a feature on the clinics provided there. This issue features:

**Direct Access Adult Tinnitus Clinic**

Tinnitus is a condition which affects over 10% of the adult population and for about 1% of those people it can really affect the quality of their lives.

It is important that they are able to access support and management options quickly in order to help them begin to cope and adapt to their tinnitus. In order to speed up this process we are setting up a service where GPs can refer patients, over the age of 18, who have bilateral, persistent tinnitus which is affecting their sleep or general wellbeing directly to Audiology for an assessment.

They will be seen by a senior Audiologist and the initial appointment is designed to assess their hearing; take a detailed history; give basic rehab advice, tailored to their situation, and also to fit hearing aids or white noise generators where appropriate.

Following this they will have access to a group session for further tinnitus management information and a follow up appointment for adjustment of the devices where necessary. We also have a dedicated Hearing Therapist who can provide ongoing support as required.

If there are any contra-indications brought to light from their history which looks like they require a medical opinion then the patient will be referred over to ENT for further investigation and MRI scans if required.

This service will initially be available to Newcastle patients and then rolled out across the rest of the region. The sessions should be available from 1st June 2016 via e:Referral. They will run on the 1st, 2nd and 5th Wednesday mornings; the 2nd Friday in the morning and 4th Friday in the afternoon.

For patients who do not meet the e:Referral criteria the usual service for tinnitus patients is still available through ENT.

For further information please contact:

Lawrence.white@nuth.nhs.uk for e:Referral enquiries, and Kathryn.rankin@nuth.nhs.uk (Chief Audiologist) regarding the clinic.

**Melanoma Screening Clinic**

Did you know there is a weekly, consultant-led Melanoma Screening Clinic in Cramlington, run by the Newcastle Hospitals?

Newcastle’s Dermatologists at the RVI have certainly seen demand for their expertise grow steadily in recent years, and estimate that the rate of cases in the North East alone has trebled over a 20 year period.

In order to address this demand by providing a better service for Dermatology patients in Northumberland, the Newcastle Hospitals have introduced a weekly Melanoma Screening Clinic at the Manor Walks Outpatient and Diagnostic Centre in Cramlington.

The clinic will run alongside the screening clinic held at the RVI and provides a specialist clinic for patients whose GP wishes to rule out the possibility of a suspicious mole or other skin lesion being a skin cancer.

Patients should be referred via NHS e:Referral.

Search under 2WW Specialty and choose 2WW Skin Clinic Type.

Under ‘Organisation or Site Name’ type in NUTH and the option of ‘Newcastle Hospitals at Cramlington’ will come up.
Pulmonary Rehabilitation:
“Steps to breathe better” at Benfield Park Healthcare and Diagnostic Centre, Walkergate

Did you know GPs can directly refer patients with respiratory conditions such as COPD, Asthma, Bronchiectasis and ILD to the Newcastle Hospitals’ Pulmonary Rehabilitation Programme delivered from our community venue in Walkergate?

The Benfield Park Healthcare and Diagnostic Centre is one of the Trust’s easily accessible community sites with ample free parking and easy access via public transport. Home to GP Surgery – the Benfield Park Medical Group – Benfield Park also provides a range of Newcastle Hospitals’ clinics, including our Pulmonary Rehabilitation Programme.

Running for the past three years, this successful service is led by an Advanced Specialist Respiratory Physiotherapist and a Physiotherapy Technical Instructor who have worked with patients with a variety of respiratory conditions for a number of years.

Favourable results following recent national audit

Results from the first national audit of pulmonary rehabilitation (PR) conducted by the Royal College of Physicians (RCP), The British Thoracic Society (BTS) and Healthcare, Quality and Improvement Partnership (HQIP) in England and Wales were published in December 2015.

During a four month period our Trust gained consent from 41 patients with Chronic Obstructive Pulmonary Disease across the three sites which deliver our PR programmes – Benfield Park, the RVI and Freeman Hospital.

Key results show that waiting times for patients to be enrolled to PR following receipt of referral are highly variable nationally. In Newcastle, 92% of patients were enrolled within 90 days compared to 63% of patients nationally.

92% of our participating patients increased their six minute Walk Test (6MWT) distance by 30m or more following the 8 week programme, compared to 70% nationally, with a local median increase of 93m compared to the national median of 50m.

The data analysed demonstrated that patients in Newcastle wait 37 days on average from receipt of referral to assessment. This compared to 50 days nationally. Our patients are offered the assessment appointment upon receipt of referral.

Average experienced waiting time (days)

For more information or to send a referral please email the PR team at: tnu-tr.PulmonaryRehab@nhs.net or send by post to: Pulmonary Rehabilitation Team, Benfield Park Healthcare and Diagnostic Centre, Benfield Road, Walkergate, NE6 4QD.

Direct Telephone: 0191 213 9733 or 0191 282 6453/ FAX: 0191 276 5731.

Patient quotes

“Before I was spending a lot of time in the house but being out of the house for 3 hours twice a week has given me confidence to go out more by myself and be around other people”

“I feel I have lost the sense of anxiety and fear about my breathlessness - I have accepted it and can control it better, overall I have more confidence”

“One of the things that I have learned is that to get out of breath a little bit is good. I think I had a fear before about getting breathless but now I have control”

“I am back to doing things I never thought would be possible. I am able to go for walks with my beloved dog again and am able to potter in my garden - two passions of mine that I thought were out of my reach forever”

<table>
<thead>
<tr>
<th>Where was the patient referred from?</th>
<th>National Audit</th>
<th>Newcastle Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Consultant (or clinical team)</td>
<td>21%</td>
<td>58%</td>
</tr>
<tr>
<td>GP/practice team</td>
<td>51%</td>
<td>28%</td>
</tr>
<tr>
<td>Hospital Specialist COPD team</td>
<td>11%</td>
<td>15%</td>
</tr>
<tr>
<td>Community Services</td>
<td>12%</td>
<td>0%</td>
</tr>
<tr>
<td>Specified post-AECOPD early PR pathway</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Source of referrals

One of the audit results where we didn’t come out on top nationally was our GP referral rate. With your help we can change that.

Newcastle Hospitals receives 28% of the referrals from GPs compared to 51% nationally. The majority of our referrals are internal and sent to our hospital based programme at either the RVI or the Freeman Hospital.

With GP Direct Access to Benfield Park in Walkergate, we encourage GPs within Newcastle to refer patients who would benefit from this service in the community.
Mr Justin Chatterjee joins the RVI’s Plastic Surgery team from the renowned Canniesburn Plastic Surgery Unit in Glasgow.

Specialising in Breast Cancer and Reconstruction, as well as Hand Surgery, Mr Chatterjee explains why he was attracted to Newcastle: “The Breast Unit at the RVI is well known both nationally and internationally for being superbly well integrated, and its pioneering approach. The Plastic Surgery Department as a whole has an extremely close affiliation with Newcastle University and is part of one the largest teaching Trusts in the country which offers exciting prospects in terms of both research and teaching.” Mr Chatterjee is keen to help further develop the Breast Unit including bringing accreditation to Newcastle to train surgeons for the EBSQ Examination in Breast Surgery. He is also involved in the Hand Trauma service at the RVI, and plans to practice elective Hand Surgery here in Newcastle.

Miss Tsveta Ivanova has joined the Newcastle Eye Centre’s team of Ophthalmologists as a substantive Consultant following the retirement of Mr Stannard.

Miss Ivanova is originally from Bulgaria where she graduated 11 years ago, and specialises in vitreoretinal surgery including retinal detachment, diabetic tractional detachments, macular holes and complicated cataract surgery. The considerable national reputation of the Centre at the RVI attracted Tsveta to Newcastle. She explains her aspirations: “The Newcastle Hospitals is extremely well regarded in the clinical field in terms of teaching and research and I would very much like to further develop our ophthalmological work in these areas. From a clinical perspective, I will be very much involved in helping to further improve the quality of service we provide to our patients with retinal conditions, developing a more rapid, and increasingly daycase approach.”

The Newcastle Hospitals has been sending discharge summaries (called Intimes) exclusively electronically for some time to GP surgeries which are able to receive them.

Intimes has been well received as it more convenient and quicker than using standard mail. We are keen to expand this service, both to include other communications from the Trust and to all GP practices in surrounding CCGs. If your practice does not currently receive summaries electronically but would like to, please contact our ICE Administrator at Katrina.Walker@nuth.nhs.uk

We plan to start sending discharge summaries from the Emergency Department (ED) and the Eye Emergency Department (EED). We are piloting this service, starting in EED from Wednesday 18th May. We would then like to introduce Intimes in the RVI’s main ED on Wednesday 6th July 2016.

For the time being, this change will not apply to Walk-in Centres as they use SystmOne for producing discharge information. This will mean an end to paper copies which has been a long standing request from GP colleagues.

At the same time we will introduce an Admission Notification of in-patients as an added service. These shall not contain any clinical information but just a notice that one of your patients has been admitted to the Trust.

In the next few months we plan to send Notification of Serious Diagnosis and Clinic Letters electronically. Both of these different communications will be clearly labelled within the ICE system. We will need to carry out further detailed pilots to ensure that these changes work well for both primary care and the Trust - these will be taking place in NCCC and Ophthalmology. We will of course let you know when these next changes are planned.

Dr Nick Thompson, Consultant Gastroenterologist
Graham King, Chief Information Officer

All queries should go to: Katrina.Walker@nuth.nhs.uk - Newcastle Hospitals’ ICE Administrator