‘Development of an Integrated Referral Pathway for Male Lower Urinary Tract Symptoms (LUTS): A Multidisciplinary Approach Spanning Primary & Secondary Care’

Eamonn Rogers (1); David Hanlon (2); Ita Hegarty (2); Sean Diver (4); Colette Nugent (5); Gregory Johnston (6); Mary Flynn (1); Brendan O’Shea (6); Jamie Logan (6); Ollie Plunkett (6).

1: HSE, RCSI, National Clinical Programme in Surgery. 2: HSE Primary Care NCAGL. 3: HSE, Outpatient Services Performance Improvement Programme (OSPIP). 4: HSE, Letterkenny University Hospital. 5: HSE, Office of the CIO. 6: Irish College of General Practitioners (ICGP).

Introduction

The HSE Outpatient Services Performance Improvement Programme (OSPIP) in collaboration with the National Clinical Programme in Surgery (NCPS) and Primary Care and other targeted stakeholders are working to develop a full suite of integrated referral pathways that will provide appropriate services to patients in the right location, at the right time. Urology has been chosen as the pilot specialty within which the broader process will be tested and trialed.

Methodology

- Agree clinical priority criteria and timelines for LUTS conditions with OSPIP working group, as part of the broader Urology referral pathway
- Agree alternative access routes for LUTS patients
- Work up algorithms to enable GPs to direct the patient electronically into specialist care, and work with OCIO to develop an e-Referral system
- Establish a ‘demonstration project’ in a chosen site
- Move to sustainability and national transferability taking on board learning from demonstration site.

Highlights

- An agreed referral pathway for LUTS patients requiring acute management and/or advice and support
- An integrated model of shared care between primary and secondary care
- Decreased waiting times for LUTS patients for outpatient services
- Increased quality and safety due to introduction of electronic referral and electronic triage and processing of patient’s care
- GP and acute hospital networking and shared care model

Outcomes & Impact

- This new pathway will be the first integrated model of care delivered by OSPIP and its stakeholders. This will improve quality and safety, wait times and patient experience.
- Routine patients will be seen expeditiously while, at the same time, granting quicker access for urgent patients.
- The demonstration project learnings will allow this pathway to be rolled out nationally, to bring a standardised approach to the management of LUTS nationally.
- This is the first of several Urology condition pathways. Future planned pathways are for:
  - Haematuria
  - Scrotal pain
  - Incontinence

The new pathway will introduce an electronically-enabled process to assist GPs to: Prioritise LUTS patients who require urgent access to specialist urology care using the International Prostate Symptom Score (IPSS), the IPSS will:

1. Identify patients suitable for management in Primary Care
2. Provide support to GPs seeking additional advice concerning patients whom they choose to manage medically utilising:
   i) Consultant advice to GP, ii) Specialist nurse-led diagnostics, iii) virtual clinics & prioritisation process
3. To improve access times for patients with non-urgent conditions to outpatient services

Throughout the years 2013 – 2016 there has been an increase in referrals to urology in the region of 30% (BIU). This is likely to increase in future years if significant changes are not made to the manner in which we deliver care. Demand is increasing naturally due to an ageing population and this is compounded by a shortage of experienced Urology Consultants.

Data extracted from Letterkenny University Hospital in the Saolta Hospital Group show that lower urinary tract symptoms (LUTS) comprise the single largest group of presenting complaints. Traditionally these patients wait long periods of time to be seen in a hospital outpatient setting, with appropriate guidance, many of these patients can be effectively managed in primary care.