

“Right Patient, Right Specialty, Right Time” – A Specialty Referral Guide

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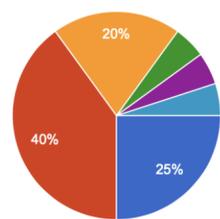
Introduction

Between 24/25 patients wait an average of 7.5 hours from arrival to admission
 Each delay in discharge would cost ~£400 per patient/day

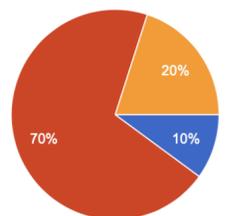
An identified cause of delay is patients awaiting specialty input prior to discharge

A survey among resident doctors showed:

- 30% waited >2 hours or struggled to reach teams
- 90% experienced delays in discharge
- Only 10% felt very confident making referrals



- Less than 1 hour
- 1 - 2 hours
- 2 - 4 hours
- More than 4 hours
- Variable depending on what speciality
- This has never happened to me



- Yes, frequently
- Yes, occasionally
- No, never

This results in:

- Longer inpatient stays and delayed discharges
- Delays in diagnosis and treatment
- Bed blockages as delayed movements leads to fewer beds available causing a backlog and overcrowding in ED
- Impact on patient confidence and emotional wellbeing
- Poor patient and staff satisfaction
- Medicolegal consequences of delayed or suboptimal patient care

Stakeholder engagement

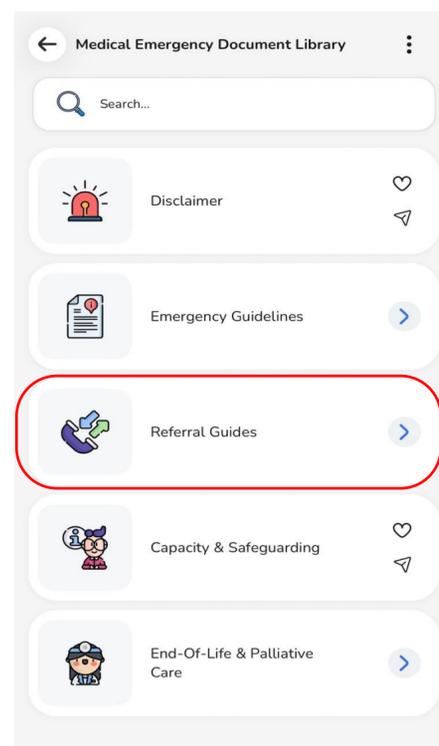
The following individuals and teams were engaged to ensure this project was developed and delivered:

- Senior Trust Leaders (e.g. CEO, CFO, Chief Nurse, Medical Directors) to identify key allies and sponsors for change
- Clinical stakeholders (consultants, registrars, resident doctors) to collaboratively define current pain points and co-design the ideal referral workflow
- Administrative teams to develop scheduling frameworks aligned with referral and test timelines
- Operational manager to analyse impact on bed flow, throughput and care delays
- Digital services to embed referral tools into EOLAS and live clinical systems

Solution

The creation of a referral guide on the EOLAS app (already embedded into UCLH)

Referral Guide on EOLAS App



- ✓ Centralised, up-to-date referral information for all specialties
- ✓ Accessible via EOLAS mobile app and desktop version
- ✓ Includes clear steps for referring during normal hours and out-of-hours
- ✓ Out-of-hours guidance: on-call registrars, rapid access clinics, and emergency pathways listed
- ✓ Covers inpatient and outpatient referrals
- ✓ Contact details, bleeps, emails, and escalation policies in one place
- ✓ No cost to organisation; EOLAS already used for MEDL and Antimicrobial stewardship

Key Impacts

Cost Savings

£400 Per Bed Day	600 Bed Days Saved	£240K Annual Savings
Average NHS cost per excess inpatient bed day	Annual reduction from 50 avoided discharges monthly	Estimated financial impact per year

Increased Efficiency

Time Saved Per Referral	Monthly Impact	Annual Benefit
Resident doctors previously spent up to 4 hour per referral chasing information, creating significant workflow inefficiencies.	Across 100 monthly referrals, the system saves approximately 400 clinician hours every month.	Potential for up to 4800 hours/year freed for direct clinical care rather than administrative tasks.

Discharge & Patient Flow



Digital & Sustainability Impact

Zero Ongoing Cost Embedded within existing EOLAS infrastructure with no additional expenditure required	Real-Time Updates Fewer errors from outdated documents or intranet pages, ensuring accuracy	Digital Maturity Supports UCLH's strategic goals for digital healthcare transformation
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Staff Experience

Increased Confidence 60% increase in confidence when referring across specialties	Ease of Use 80% rated the referral guide as "easy" or "very easy" to use	Reduced Interruptions Significant drop in bleeps to inappropriate teams
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Next steps

- Trust wide expansion
 - Identify specialties: Map all remaining clinical areas
 - Complete coverage: Achieve full trust wide implementation
- Epic Integration
 - Embed links: Direct access to referral guides within clinical workflow, reducing time spent searching for information
- Onboarding new staff
 - Induction packs: Include comprehensive guide and materials in all resident doctor orientation materials
 - Digital promotion: Share via intranet resources
- Maintaining accuracy
 - Team verifications and process updates
- Measuring success
 - Referral response times, delayed discharges, staff confidence, misrouted referrals
- Long term sustainability
 - Project champions, Governance Integration, Institutional support