ECP2GP: A Secure Referral Pilot

Aim Statement:
"By January 2018, 100% of patients discharged by an Extended Care Paramedic will have a referral letter sent securely to and received by their general practitioner."

Background to problem worth solving
According to the Sydney North Primary Health Care Network (NSPHN), the General Practitioners in the area were reporting that patients were being referred to their practices by NSW Ambulance Extended Care Paramedics with no contact, referral letters or clinical information provided.

Team members
- **Sponsors** (Guidance Team)
  - Michelle Shiel: A/Chair - Clinical Innovation, NSW Ambulance Clinical Services
  - Cynthia Stanton: General Manager - Primary Care Advancement and Integration, Sydney North PHN
- **Quality Advisors**
  - Delia Clark
  - Clare Walker
- **Project Team**
  - Malcolm Lau: Team Leader – ECP Clinical Lead
  - Helen Punty
  - Anna Carroll
  - Mitch Baker
  - Adam Betteridge
  - Bernadette Staude

Results continued
Process measures
The ECP2GP secure electronic messaging solution was identified as being **High Impact** but **Hard to Implement** in the Driver Diagram.

Early in the PDSA cycle we already identifying that the success of the solution may be affected by the GPs understanding of the HealthLink secure messaging software.

The key impact is that the project team is changing the PDSA plan to reflect that the solution:

- Increase PHN training for GP practices not fully utilising EHR messaging features

Balancing measures
The ECP Team members have successfully introduced the E-Referral and secure messaging software into their referral procedures.

In doing so, the supply of a hard copy of the referral letter to the patient has declined.

The project team, having identified this impacts on the ability of the GPs to receive a referral letter if the electronic copy is not received.

As a balancing measure, a hard copy of the referral letter will be supplied to the patient to take to their GP appointment.

Overall Outcome of Project:
The project is still in the installation phase and not due to be completed until the January 2018.

Unfortunately progress has moved away from the stretch goal in the early stages.

With the implementation of other prioritised solutions identified in the project the team is predicting a move back towards the stretch goal.

Plans to spread /share change
Done: Submitted to the ACI Innovation Exchange

Planned:
The use of electronic secure messaging in the NSPPhN is being compared with a similar solution currently being tested by NSWA ECPs in the Central and Eastern Sydney PHN (CESPHN).

Further planning for spreading will be developed as the project moves towards completion if the solutions tested lead to clinical improvements.