

## NHS Forth Valley

### *Primary Care Whole System Working*

Laboratory managers participated in a Primary Care Whole System Working project in 2011/12 within NHS Forth Valley. The aim of such work being to use a dashboard to provide targeted feedback and identify variation by clinicians requesting diagnostic investigations.



One of four priority areas for this project was laboratory and radiology services. This included a review of biochemistry requesting of cholesterol tests.

The aim was to encourage adherence to the NHS Forth Valley Lipid Lowering Guideline which recommends that for primary prevention of cardiovascular disease there is no need to recheck cholesterol levels. The project ran between May 2011 and March 2012 with the GPs providing feedback on the workstreams in September 2011.

The laboratory worked with Forth Valley Information Services department to provide data to GPs on their requesting of laboratory tests and allow comparison with other practices in Forth Valley.

The project encouraged best practice and resulted in a sustained reduction in primary care cholesterol requests, with the clear benefit to patients and laboratories of reduced unnecessary testing.

The project also provided an opportunity for GPs to reflect on clinical behaviour through the use of comparative data which demonstrated variation. The project subsequently promoted and provided best practice guidelines and an evidence base.

The inclusion of laboratory tests was encouraged through the Community Diagnostic Users Group – a group established in 2009 to improve communications between diagnostic and primary care and to help inform primary care of new developments and best practice. Laboratories, radiology, cardiology and endoscopy are represented along with service managers and GPs. This highlights the need for appropriate governance to support service change and improvement.

Areas chosen to prioritise were those where guidance exists or was being developed:

- The use of Lumbar Spine X rays in Lower Back Pain
- The use of Abdominal Ultrasound
- The use of B12/Folate assays
- The use of MSSU in non-pregnant women with simple UTI
- The 'Treat and Forget' strategy in Primary Prevention of Cardiovascular Disease

The NHS Forth Valley Lipid Lowering Guideline v4 (2010) was used to inform the Treat and Forget part of the workstream and cholesterol requesting was reviewed.

GPs were asked to reflect upon their own activity levels compared to that of other practices in NHS Forth Valley. Practices were also asked to undertake sample audits of their own clinical practice to inform their reflective learning. Information on requesting rates for cholesterol were provided. The Treat and Forget strategy augmented significant levels of work already undertaken by the Forth Valley prescribing team.

The majority of GPs were happy to now adopt the Treat and Forget strategy although some remained concerned as the change is hard to explain to patients who have undergone many changes in their lipid management.

Data collected by the laboratory show a reduction in the use of cholesterol following the project. The Whole System Working project 2011/12 report contained chart 1 below:

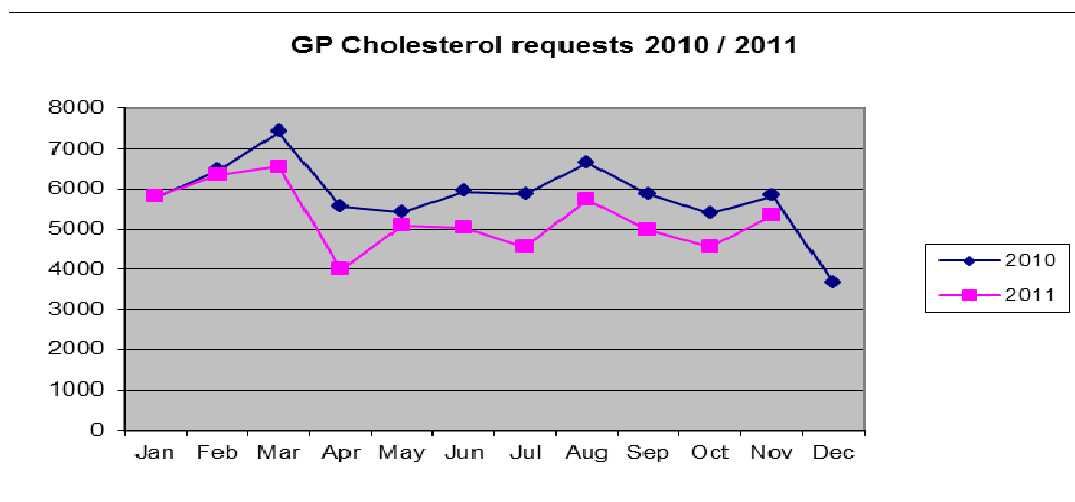


Chart 1. Cholesterol activity 2010/2011 taken from the Whole System Working 2011/12 Output Report. .

Updated data on GP cholesterol requests is shown in chart 2 below:

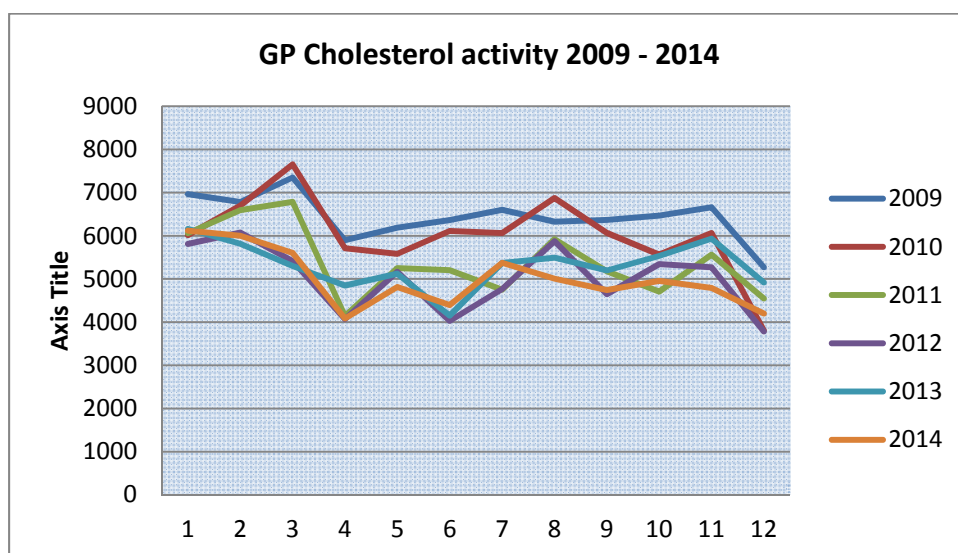


Chart 2. GP cholesterol activity 2009 – 2014.

The percentage reduction in annual GP cholesterol activity in 2014 compared to 2010 is 16.8%, just over 12,000 tests a year. The project has been completed and the change to requesting cholesterol has been sustained.

Laboratory testing was included again in the 2012/13 Whole Systems Working project but not since then.

The Community Diagnostic Users Group continues to meet regularly and provides an invaluable communication link to primary care including discussion about requesting in relation to patient pathways. The introduction of a direct ordering system in Forth Valley over the past 12 months has involved this group in agreeing test groups for primary care and approving any changes.

Unfortunately no such group currently exists for secondary care diagnostics users due in part to the variety of specialities and the difficulty of providing an agenda that would be of interest to all.

Access to up to date laboratory test data is very important when reviewing the effect of changes on demand e.g. when new guidelines are issued. A dashboard is being developed by the Forth Valley Information Services

department which currently holds primary care requesting information. A similar dashboard for secondary care will be the next development, which will be a key enabler in the identification of waste and variation.