

# 5 minutes with... a Gastroenterology Consultant

Dr Udi Shmueli is a Gastroenterology Consultant at Northampton General Hospital.

Since 2016, local Primary Care clinicians have been able to use Telephone Advice & Guidance via Consultant Connect to obtain specialist Advice & Guidance from the Gastroenterology team at their local hospital on patient related queries.

Dr Shmueli talks to us about his personal experience of answering Advice & Guidance calls through the service...

## 1 What would you say are the key benefits of using Consultant Connect Telephone Advice & Guidance in Gastroenterology in addition to other forms of Advice & Guidance?

- Timely advice helps patients get the right care faster. It helps avoid unnecessary admissions and referrals as well as fast track patients who do need to be admitted or referred to hospital.
- The care of patients who don't fit 2ww referral criteria and Inflammatory Bowel Disease (IBD) patients can be expedited.
- It helps bridge the gap between primary and secondary care, improving clinician relationships and communication.

## 2 How has your team's workload been impacted by answering Advice & Guidance calls? How has it helped your department?

- The calls are all brief, a few minutes at most, so time is not an issue. I do sometimes interrupt clinic consultations to answer them, patients don't usually seem to mind.
- I do book extra patients into lists or clinics in response to GP calls that are followed by an email. That does sometimes lead to extra work, but it's work that would have happened anyway. This is just an easier way for GPs to find me.
- The ability to use and share my knowledge, the gratitude of my GP colleagues, and the validation of feeling helpful and improving the care of our patients is very gratifying.

## 3 Have you found Consultant Connect easy to use?

- It is easy to use and if the time of a call is not convenient, I don't have to answer as there are other colleagues on the rota.

## 4 Did you/your team have any reservations/anxieties about using Consultant Connect?

- Some colleagues were initially worried about medico-legal issues arising from the call if no notes are taken. However, the calls are recorded, and it's perfectly clear that primary responsibility remains with the GP.
- I don't accept referrals or take any responsibility for the patient from the phone call, so I don't need to take notes. If I feel I need to see the patient urgently then I will ask the GP to email my office.

## 5 How has Consultant Connect helped with your response to COVID-19? Have you needed to make any changes?

- The delays to normal patient care due to COVID-19 have made better communication with primary care vital.
- Having Consultant Connect in place has made communication with primary care colleagues quick and easy.

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## 6 What do you see as the main benefits to patients? Can you provide a recent example of when you answered an Advice & Guidance call via the service?

- Rapid access to consultant advice has to be the way forward both for patient care and health system finances.
- Examples include what treatment to start for exacerbations of IBD, management of microscopic colitis, post cholecystectomy diarrhoea, interpretation of LFTs or hepatitis serology.
- Questions on how urgent a referral should be? Can I use your advice to support a 2ww wait or CT referral? Or "my patient has a positive FIT test but doesn't want to be referred."
- If a GP in my locality phones with a patient likely to have a new presentation of IBD or something else urgent, then I ask for an emailed referral with the details and arrange appropriate investigation or attendance.

## 7 Do you have any other feedback?

- I really enjoy using Consultant Connect. I'm asked questions I can easily answer, helping improve patient care and the gratitude of colleagues boosts my mood.
- I take about 15 GP calls per week and in any case it is a pleasure to talk to caring intelligent doctors who just need simple advice to move care forward.

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