

SUPPORTING THE NHS ELECTIVE CARE TRANSFORMATION PROGRAMME



Around the country STPs and CCGs have created local pathway guidance to support GPs in deciding how to treat and refer their patients.

In most cases this guidance is on paper (or electronic paper such as PDFs). The GP does not have the time to read the guidance or to memorise the 70-100 sets of guidance available to many practices. Locum GPs are even less likely to use it.

Recently the task of reviewing referrals has been passed to Hospital Consultants. Is this the best use of their time?

Vantage OPT takes local pathways and builds them into an automated triage process requiring little or no clinical or administrative time. The pathways operate in the background, checking the guidelines for each patients' individual circumstances and offering a choice of appropriate services to the GP and patient.

The service is fully integrated with eRS so [referrals to hospitals](#) follow the standard NHS process. It is launched from EMIS or SystemOne so is a seamless addition to the referral process.

Analysis has shown that the number of referrals queries, redirected or rejected (currently estimated to average 60% of all referrals) fall dramatically. Saving clinical and administrative time for both referrers and providers, whilst reducing delays for the patient.

The service is now used by 22,000 users across the NHS and is saving millions of pounds in addition freeing years of clinical time better spent on patient care.

Our work with GPs and GDPs shows the potential for savings in excess of £200 million per annum and clinical time equating to £180 million per year.