

CONFERENCE ABSTRACT

An evaluation of HealthPathways and its impact upon quality of referrals received by a tertiary paediatric allergy and immunology service

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Introduction: HealthPathways is an online information portal for general practitioners and other health professionals, providing localised clinical management and referral information for a range of conditions. The program aims to improve the quality and appropriateness of referrals received by hospital departments, and reduce avoidable Emergency Department presentations. The Western Sydney HealthPathways program is a joint initiative between WentWest (Western Sydney Primary Health Network), Western Sydney Local Health District and The Sydney Children's Hospitals Network (SCHN). In 2014, the Allergy and Immunology Department at The Children's Hospital at Westmead (CHW) underwent redesign as part of the Re-ACT project. Under the integrated model of care developed, changes in referral criteria saw the acceptance of direct GP referrals for children with anaphylaxis. HealthPathways was one method utilised to communicate this system change.

Methods: The quality of referrals provided by GPs and other health professionals were audited before and after the implementation of the allergy and immunology clinical and referral pathways, using a tool adapted from the Hunter New England evaluation¹. Domains assessed include legibility; reason for referral; completeness of clinical information; and the inclusion of patient and referring doctor's details. Forty-three referrals from the period prior to the implementation of the pathways and 42 referrals after implementation pertaining to Western Sydney patients were randomly selected using data obtained from the SCHN Management Support Analysis Unit.

Results: There was little difference in the completeness of administrative details or details provided about the patient's history, presenting problem or medications between the referrals audited before and after the implementation of HealthPathways. Of the 42 referrals in the post-HealthPathways period, 9 met the criteria specified for referral as directed in the pathway. Referrals were mainly received via a letter from the referring doctor, with the specific allergy and immunology or outpatients referral forms rarely used. The proportion of GP initiated referrals increased from 60.5% to 71.4% in the post HealthPathways period (not statistically significant), as did the number of referrals that named a specialist ($P < 0.05$).

Discussion and lessons learned: Although GP access to the allergy and immunology clinic increased, the limited difference in referral quality post development of the pathways warrants attention. Further engagement with general practice through education about HealthPathways and the referral criteria articulated is required to support GPs to use HealthPathways appropriately. Practitioners who refer via HealthPathways need online fillable forms to guide them through the referral process and prompt them about the eligibility criteria, to avoid unclear hand written referrals or referrals not meeting the clinic criteria.

Limitations: The referrals included in this audit were for patients whose referrals had already been accepted and appointments made. As the audit was completed retrospectively, it was not possible to assess the quality of rejected referrals; referrals sent back to GPs for further information; or diverted to general medicine, prior to acceptance.

Suggestions for future research: The methodology applied to the evaluation of the allergy and immunology pathways can be applied to the evaluation of other pathways implemented for paediatric patients.

Keywords: healthpathways; referral quality; paediatric; evaluation
