



Integrated Clinical Advice Network

Cinapsis 
SmartReferrals

xyla elective care
Part of Acacium Group

Xyla Elective Care and Cinapsis

Xyla Elective Care is the largest provider of clinical staffing in the UK and Europe. We place in excess of 21,000 nurses, doctors and allied health professionals in NHS and private hospitals per week. As such, we have unique capabilities to support delivery of services to local Trusts and across an entire Integrated Care System. Our clinical, operational and governance capabilities are well established and proven.

Xyla Elective Care, part of Acacium Group, is a trusted NHS elective care delivery partner with a range of services that can be tailored to the needs of individual NHS organisations. These services include: demand optimisation; clinical capacity via insourcing and community services redesigned and delivered via innovative care delivery models.

Cinapsis is a clinical communication tool that revolutionises how primary, community and secondary care services and clinicians work together remotely; enabling smarter triage, faster decision making, and reducing the unnecessary referrals burden.

Cinapsis SmartReferrals is overhauling an inefficient referrals system by enabling primary care clinicians to share images, video, voice or instant messages about a patient's condition with specialists, so they can decide on the best next step in a care pathway collaboratively. All information shared is automatically uploaded to a patient's medical record. This exchange of advice and guidance ensures patients get to the care fast, without unnecessary hospital visits or long waits for outpatient appointments.

Across Integrated Care Systems, the use of Cinapsis has seen unnecessary A&E referrals drop by 83% and 70% of dermatology referrals managed without a face-to-face or through a virtual hospital appointment, thanks to effective triaging and closer communication between primary and secondary care teams.



Integrated Clinical Advice Network (ICAN)

National Database. Local Referral Knowledge & Advice

During the NHS response to COVID-19, Advice & Guidance (A & G) services have been integral in the management of patients in primary care and equally to the restoration and recovery of elective services across local health systems. The Third Phase of NHS Response To Covid-19 document produced by NHS England states that clinicians should avoid asking patients to attend physical outpatient appointments where a clinically-appropriate and accessible alternative exists. A & G services provide an alternative to traditional outpatient referral routes. A & G strengthens decision making as well as personalised approaches to care and is designed to be used when the referring clinician needs advice on management in primary care or is unsure whether a referral is needed.

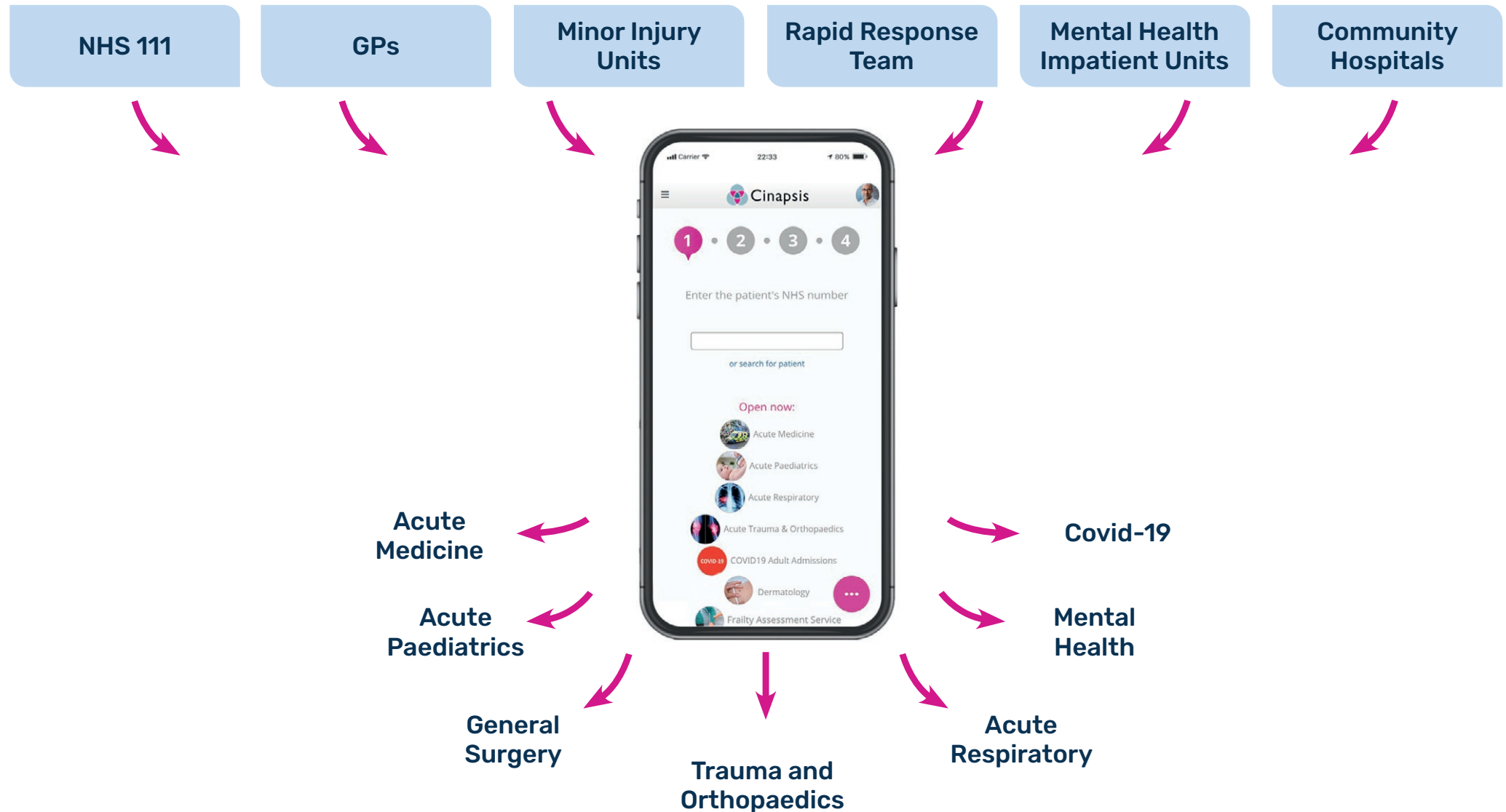
The innovative ICAN supports the NHS Elective Care Transformation Programme's work to ensure patients see the right person, in the right place, first and every time. The ICAN can support the safe and effective delivery of care alongside COVID-19 activity.

This collaboration between Cinapsis & Xyla Elective Care will mean that hundreds of referrals are diverted away from secondary care each week resulting in significant cost savings across the system.

Traditional models of Advice & Guidance allow GPs in primary care to have immediate access to specialist advice from the local hospital's consultants, specialist nurses and allied health professionals (AHPs). **However, in circumstances where local clinicians are unavailable or there is limited or no local coverage in a specialty, GPs can now access the ICAN.**



Who can access Advice & Guidance via the ICAN



Key features

Improved Communication



Easy set-up and use for both GPs and specialist clinicians. 24 hour support from Cinapsis

GP able to view consultant's profile which is based on verified NHS scope of practice and subspecialist expertise

GPs can provide immediate feedback following each consultation

Advice delivered by senior clinicians who are all subjected to Xyla Elective Care's rigorous recruitment & compliance checks

Enhanced Analytics



Working patterns and direct dial details are managed via the Cinapsis platform to ensure accurate routing of calls

Robust information & clinical governance framework

Comprehensive data capturing functionality with option to design GP training and development modules

Local referral criteria and clinical guidance incorporated into Cinapsis

All calls recorded and a report generated for the medical record

Specialties covered

Acute Medicine

Cardiology

(including review of ECG and other cardiac diagnostic results)

Clinical Haematology

Dermatology

(including image review)

Diabetes and endocrinology

Elderly care

ENT

Gastroenterology

General Medicine

General surgery

Gynaecology

Haematology

Mental Health

Neurology

Oncology

Ophthalmology

(including image review)

Orthopaedics

(including image review)

Paediatrics

Renal Medicine

Respiratory Medicine

Urology

Vascular Surgery



Hours of operations

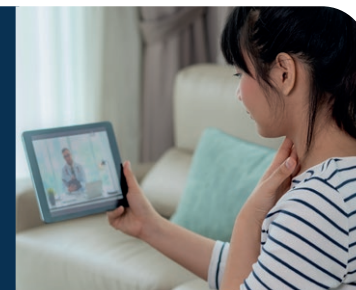
Monday To Friday
8am To 8pm



What are the benefits?

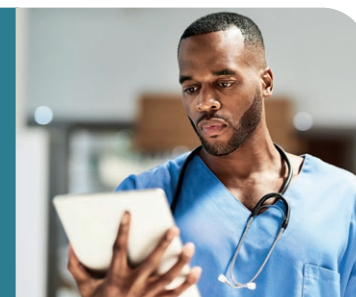
For the patient

- They receive faster access to specialist Advice & Guidance
- They only attend hospital if it's necessary and have a better experience overall
- Enabled to make more informed decisions about specialist care
- Improved access to services
- Improved patient experience
- Reduced patient journeys, transport costs and pressure on hospital car parks



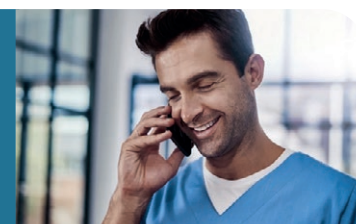
For requesting clinicians

- Quick and easy access to specialist Advice & Guidance by telephone, video or instant messaging
- They are enabled to deliver the right care for their patients first time
- Rapid access to specialist advice for individual patients
- Reduced unnecessary referrals into secondary care
- Reduced risk of re-directed or rejected, unnecessary referrals
- Improved knowledge and expertise to support future management of patients



For secondary care

- Reduction in the number of inappropriate referrals, enabling patients who do need to attend hospital to be seen earlier
- More cost-effective use of clinical time and expertise
- Increased flexibility of service delivery
- Improved integration and relationships between primary and secondary care

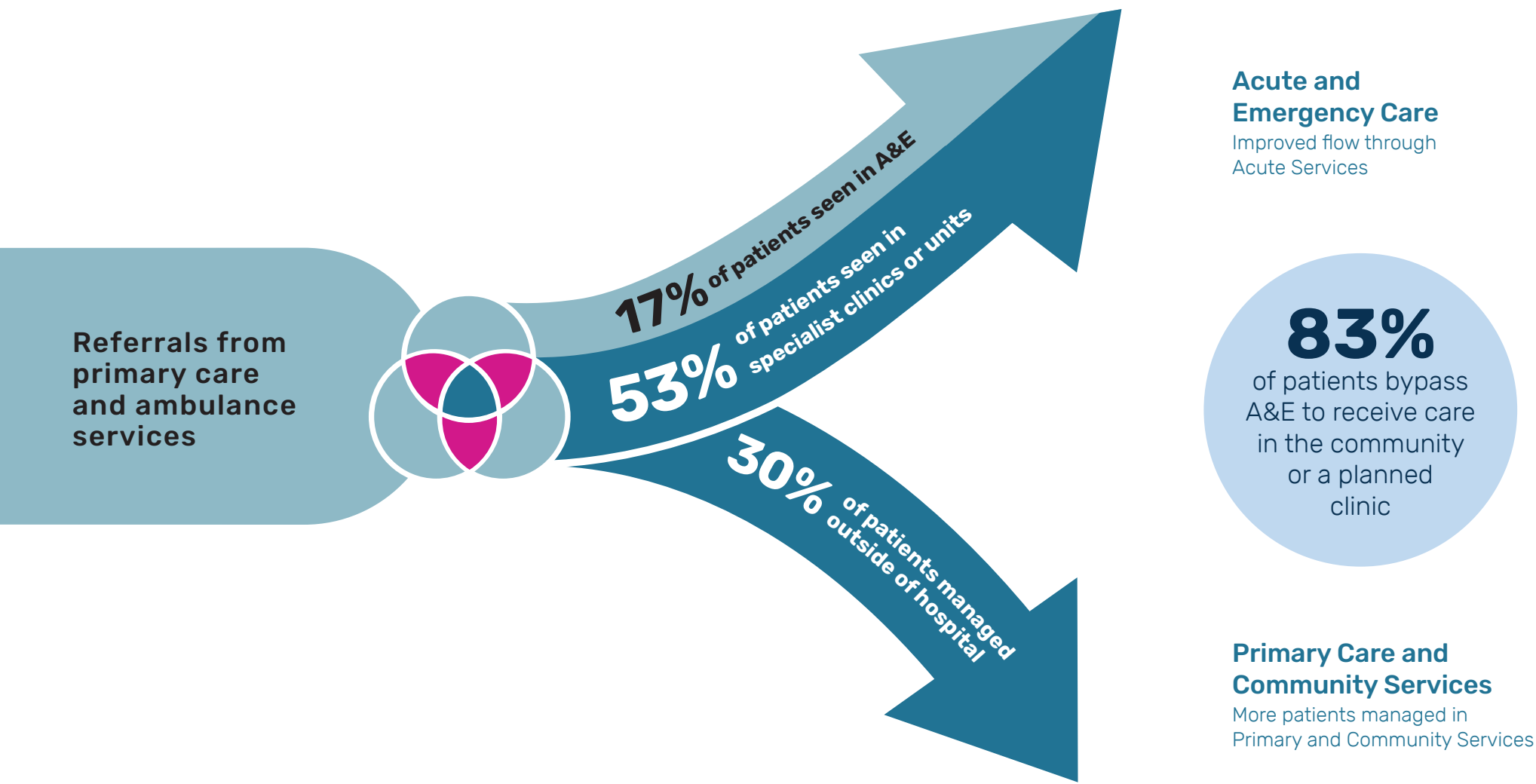


For commissioners

- Greater confidence that referrals into secondary care are appropriate
- Reduced cost of outpatient attendances
- Patients managed outside the hospitals seating for longer
- Increased co-ordination between GPs and hospitals



Impact of Cinapsis on Acute and Emergency Care



A&E performance is affected by poor patient flow

Emergency Departments are struggling to cope with demand

Challenge

Patients are waiting longer than ever in A&E. For the past six years, the 4-hour target has been missed in hospitals across England. 330,000 patients waited longer than 12 hours in A&E in 2018.¹

This increases the workload for an already understaffed healthcare workforce, contributing to burnout and vacancies. Between 8 and 12% of full-time positions are currently unfilled in the NHS.²

Data from NHS Digital shows that at least 11% of first time attendance in A&E could have been avoided.³

Preventing non-urgent A&E attendances has never been more crucial than now. Maintaining social distancing is a logistical challenge that hospitals must meet in order to prevent avoidable virus transmissions.

Solution

Cinapsis SmartReferrals is a brilliantly simple Advice & Guidance platform that removes non-urgent attendances to A&E and takes pressure off waiting lists.

GPs and other clinicians in the community can make decisions jointly with specialists so that more patients are managed in the community or are referred into the appropriate service first time.

"Cinapsis enables us to turn Emergency Care into Urgent Planned Care, setting up the beginning of the patient journey for a whole range of acute medical conditions before they even arrive at the hospital."

Emma Wylie

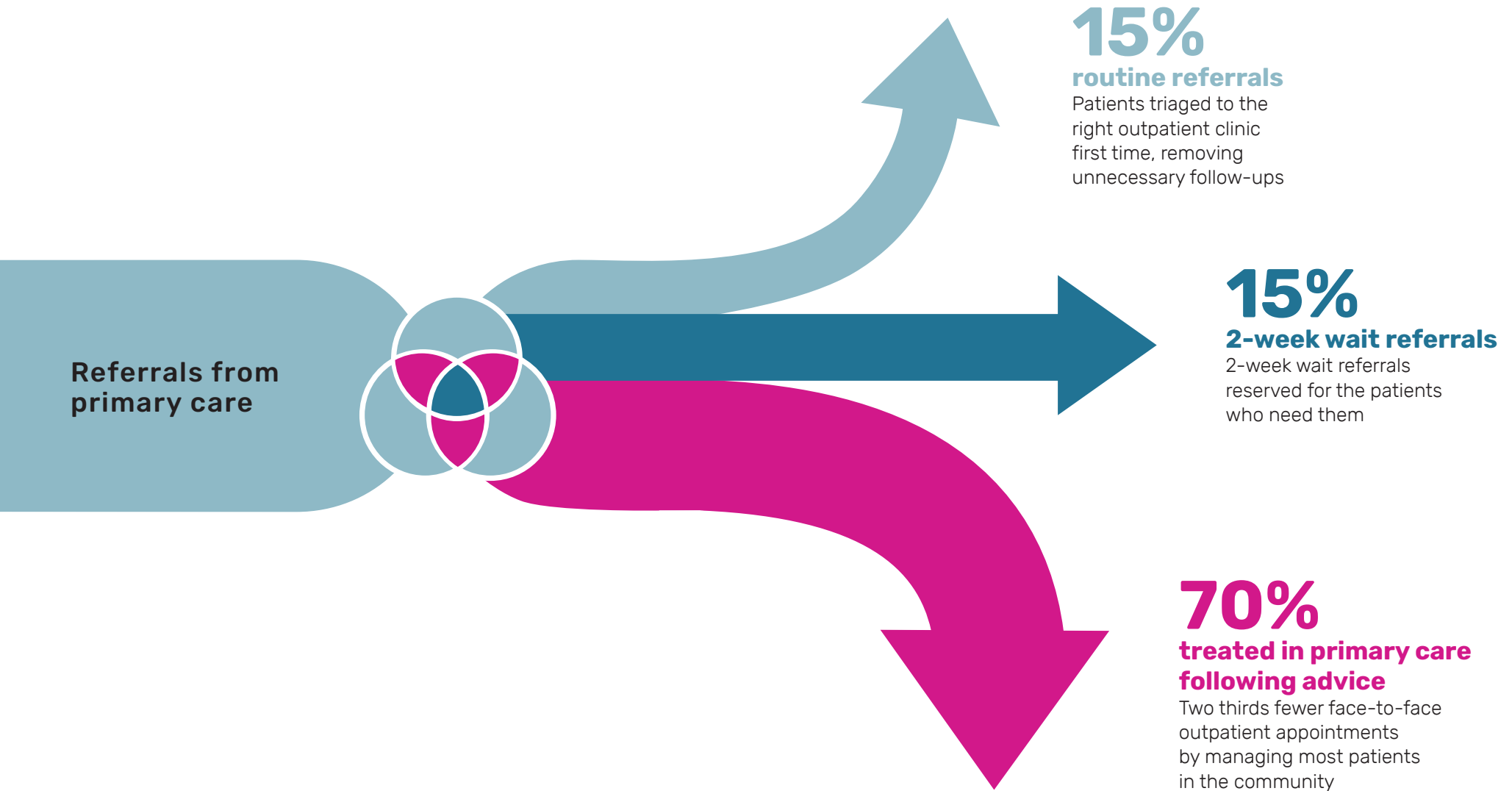
Clinical Lead for Acute Medicine

¹NHS Digital. 2019. Hospital Accident & Emergency Activity 2018-19

²Nuffield Trust. 2019. The NHS workforce in numbers

³NHS Digital. 2019. Non-urgent A&E attendances

Impact of Cinapsis on Dermatology



Now, 100% of cases are complete with image and clinical information

Case study – Gloucestershire ICS Teledermatology

Challenge

One Gloucestershire Integrated Care System (ICS) wanted to improve the triage of dermatology referrals. Despite the CCG buying digital cameras for all GP practices, 90% of 2-week wait referrals were sent without an image attached.

One problem was that the digital cameras were often left in one consulting room and weren't easily available when they were needed by GPs during a consultation in another room.

Gloucestershire ICS wanted **a platform that made it easy for GPs and nurses to take photos securely using only their smartphone and share them with dermatologists at the local hospitals.**

At the same time, the dermatologists reported that they found the system that they were using was slow and cumbersome. **They wanted a faster platform that allowed them to work from anywhere and provide advice quickly.**

Solution

The CCG commissioned Cinapsis to develop a mobile app that solved problems for GPs, nurses and specialists. The Cinapsis SmartReferrals app allows GPs and nurses to use their mobile phone to capture images in a quick and secure way. **Prior to Cinapsis, only 10% of 2-week wait referrals had an image attached. Now, 100% of cases are complete with images and clinical information.**

Also, consultants are working remotely for the first time and are completing Advice & Guidance cases in minutes or hours rather than days. GPs get notified when a response is complete and 70% of patients are managed without a face-to-face outpatient referral.

"Saw patient with suspicious skin lesion. Sent summary and 3 photos via app to dermatology team. Diagnosis and management back within 1 hour. Impressed."

Dr Mark Porter

GP and anchor for BBC Radio 4's Inside Health



Get started quickly with 24-hour support on hand

9.2 / 10



based on feedback
from 400 users

“The responsiveness to clinician feedback is second to none with suggested development improvements sometimes implemented within days.”

Dr Thomas Kus
Consultant Paediatrician



Once you decide to join Cinapsis, we will onboard users and go live within days.



We're here when you need us to make sure you get the best out of Cinapsis.



When you join Cinapsis, you will get bespoke training and access to helpful online resources so that you're ready to use the service from Day 1.

Why talk to us?

Cinapsis and Xyla Elective Care are both clinically-led organisations with tools and services designed by senior NHS clinicians. With combined organisational experience of over 20 years working with the NHS across CCGs and acute trusts, this collaboration is well placed to optimise the value of referrals and help reduce pressure in the system.

Find out more

To discuss how we can help you rapidly deploy the ICAN in your area, contact:

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