

Improving the wait time of first seizure presentations being seen in the epilepsy clinic

Ms. Teresa McIntyre, Dr Mercedes Munteanu, Dr Faisz Mohamed





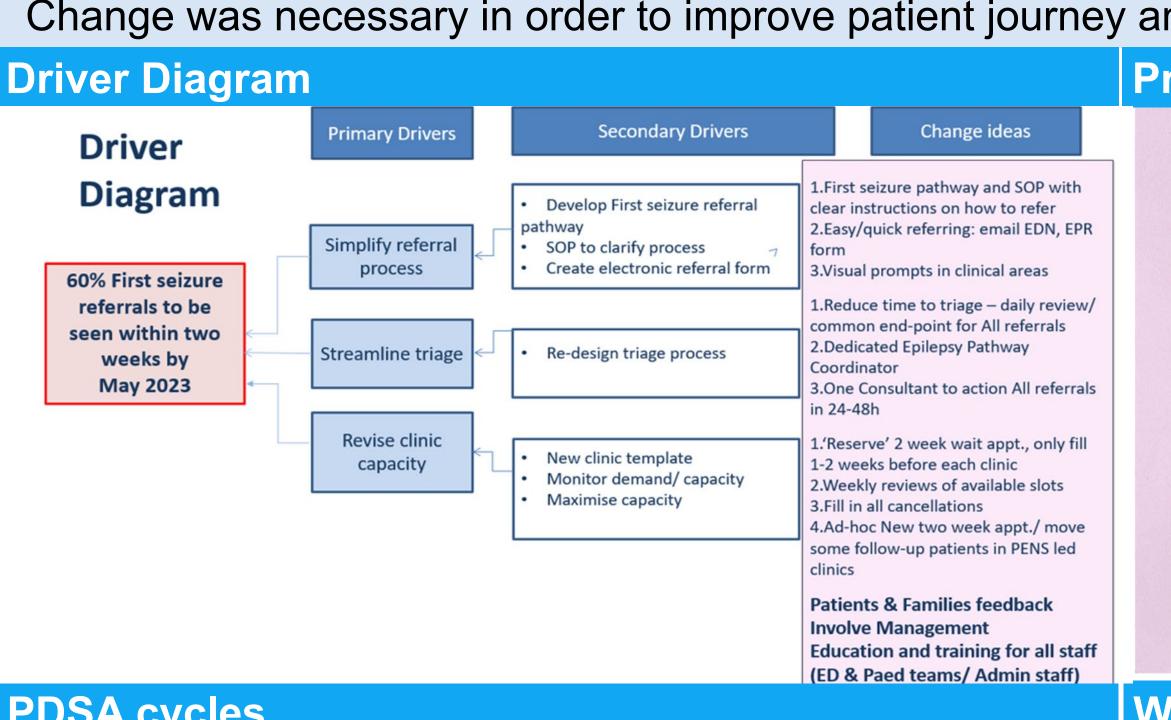
Aim/purpose:

To achieve 60% of first seizure referrals being seen within 2 weeks by May 2023

What is the problem:

As a newly created local service, we identified capacity and processing issues emerging as the service evolved. We did not have first seizure clinics and wait times were increasing as our caseload grew. Referring and triaging processes were too complicated and there was great variation in practice for in-hospital referrals.

Change was necessary in order to improve patient journey and comply with National guidance.

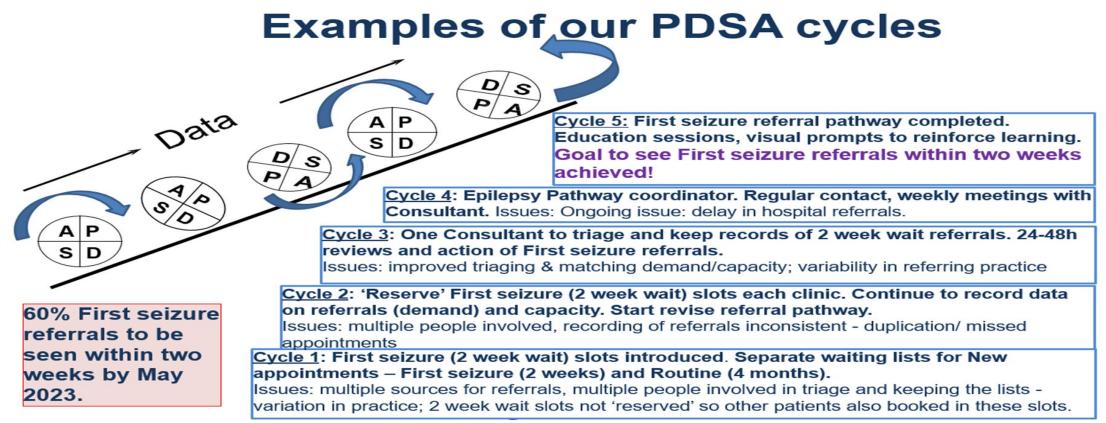


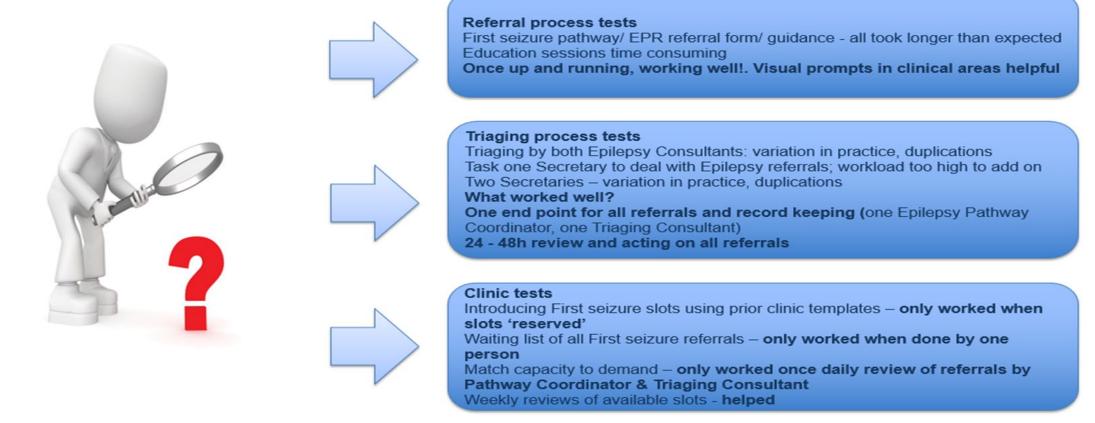
Process map Patient and Family journey after Patient and Family journey before Consultant Referrals **GP Referrals** Consultant Referrals Paediatric Community Referrals Ward Clerks Other Referrals Paediatric Community Referrals **Epilepsy Pathway Coordinator** Triaging Epilepsy Consultant Epilepsy Consultan **Epilepsy Consultan** First seizure clinic First seizure clinic

PDSA cycles



wait time





Data/Results/Patient engagement feedback

Questions for patients and families ■ % seen in 2 wks % Referrals seen in 2 weeks Sept-22 to May-23 33 onger less As expecte Referral source Informed Expectation of

Team personal learning/Team highlights

- We are a newly formed team and EQIP project brought us together quicker - we have learned each other's strengths and worked well to complete the project
- Wide consultation at the beginning and close collaboration with all the interested parties through the project was key
- Breaking down our task in to manageable pieces using a structured framework, setting specific timelines to review changes and being disciplined in doing it helped us achieve our goal
 - Feedback from our patients and their families and seeing that we are making a difference motivated us to keep going

Successes/Challenges

Successes

- We have achieved our goal!
- Improved safety at discharge
- Listened to patients and families
- Enlisted our Service Manager's support early on
- Consulted and collaborated well with other teams
- Kept everybody updated and informed
- Consolidated our service and showcased our success

Challenges

- First seizure pathway/ electronic referral form and disseminating took information longer than estimated
- Project aim changed part through programme meaning lost time in the initial stage
- Patient and family feedback should been gained throughout have process
- **Ambitious** to undertake project whilst setting up new service

Next steps

