



SEPT 2022 IN THIS ISSUE

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### **EDUCATIONAL EVENT**



The next educational evening event **Video Consultations and Case Studies by Dr Haroon Pardes is on 22nd September 2022 6.30pm-8pm via teams.** Please contact your training department for more details. The evening will be an opportunity to discuss some cases. If you have any cases, you wish to discuss please contact Rachael Ingram <a href="mailto:rachaelingram@nhs.net">rachaelingram@nhs.net</a>

We would encourage clinicians to take an active part in this session to share experiences. Remember these are your events.



### **CAS SERVICE UPDATE:**

## **GM Mental Health helpline. Direct Number 07435927273**

This is a direct number to the MH practitioner for referrals and was used during the Adastra outage, but this number can still be used to ensure ease of referrals

Pennine Mental health helpline 0800 014 9995.

For Stockport patients consider a referral to Stockport open door.0800 138 7276

Wigan helpline -0800 051 3253

## **ADASTRA OUTAGE**

### **CAS BULLETIN**

A big thank you to everyone who has worked hard during the national outage of Adastra. We appreciate your ongoing support and resilience and we have seen evidence of fantastic teamwork acriss the alliance. Timescales for full recovery (i.e the use of the UEC function for booking ED and speciality slots) haven't yet been confirmed but we will keep you informed on a regular basis and we hope this will be shorlty.

# Clinical Guardian\_

## **CLINICAL GUARDIAN** During the last quarter 1st May-31st July 2022

Total consultations worked 92,424

Total consultations audited in this period 2,554

Clinicians who worked in this period 310

	EXCELLENT	GOOD	SATISFACTORY	FOR REFLECTION	CONCERN
CAS 111	12 (1.4%)	687 (78.7%)	152 17.4%)	22 (2.5%)	0
CAS 999	18 (1.9%	766 (82.4%)	133 (14.3%)	13 (1.4%)	0



### **COGNITIVE BIAS AND MEDICAL ERROR**

In the last few decades, we have recognised the importance of patient and clinic led factors associated with medical errors. Standardised approaches to acute management including ABCs for cardiopulmonary resuscitation, anaphylaxis algorithms and Advanced Trauma Life Support have led to better outcomes by decreasing medical errors.

However, we should also consider how cognitive bias can lead to diagnostic error and negative impacts on patient outcomes. As clinicians, we frequently start consultations, which have been assessed by an external third party including 111, NWAS, District Nurses and Care Home staff etc prior to our consultation.

Does the third-party involvement in cases increase the risk of medical misdiagnosis and error due to cognitive bias.....?

One of the most commonly reported cognitive bias is 'anchoring'. As we have been 'handed over' a request or diagnosis by a third party there is an increased tendency to anchoring bias whereby we prematurely anchor a diagnosis or request based on a few important features of the initial presentation and fail to adjust or consider new information which becomes available. Our clinical reasoning can become impaired, and this can lead to error, complaints and poorer patient outcomes.

If we have a 111 case that states constipation in an elderly patient, we should consider all differentials involved and complete a full remote clinical assessment of the symptoms. If we have prematurely anchored a diagnosis of constipation or gastroenteritis without considering a full history and red flag symptoms there is an increased risk of error.

### **CAS BULLETIN**

As an alliance, we strive to work collaboratively with our fellow colleagues. If we can acknowledge the cognitive bias involved in our clinical reasoning, when a third party makes requests or a medical diagnosis, we can minimise the risk impaired by anchoring a premature diagnosis.

Remember where possible speak to the patient as this may provide more valuable information that changes your management plan.



# **GMMG ANTIMICROBIAL GUIDANCE**

Please note the guidance is up for review this month so there maybe some changes in the GMMMG guidance in September 2022.



# **NICE GUIDANCE UPDATES**

Please find links to NICE guidance that might be of relevance

Urinary Tract infection I under 16s: diagnosis and management updated July 22

https://www.nice.org.uk/guidance/ng224

Pneumonia in adults: diagnosis and management Updated July 22

https://www.nice.org.uk/guidance/cg191

Gout: diagnosis and management updated June 22

https://www.nice.org.uk/guidance/ng219



If you have any ideas about future training events or bulletin articles, please contact rachaelingram@nhs.net