

RCGP Fuel Poverty Referral Pilot (Warm and Safe Wiltshire) Data collection

What are we doing?

This pilot seeks to improve the home circumstances of patients at risk of fuel poverty in Wiltshire. We hope this might be a worthwhile scheme that may benefit patients nationwide, so we will need to test the robustness of the referral process by looking at a number of processes, including the effectiveness of the identification process, the effectiveness of the referral process, what patient outcomes are delivered, the patient experience, and whether the whole process represented good value for money.

What information are we looking for?

Patient referral information

Most of the information we collect will be anonymised. However, we will need to collect some patient identifiable data for Warm and Safe Wiltshire (WSW) so they have sufficient details to make contact with your patients.

Patient identifiable data will only be transferred by Ardens, the IT provider of the referral mechanism, to WSW, and will be done on a weekly basis. It will be sent by Ardens to WSW's secure gcsx.gov.uk email address. It will only be passed where a completed referral template confirms consent has been given by the patient or their guardian/carer. The following table summarises the information we are seeking, and why.

Data item	Purpose
Patient name, telephone number	To facilitate WSW to make contact with the household/patient.
Patient's full address	To facilitate WSW to conduct simple background research on the property before first contact: on/off gas, with/without cavity walls, etc.
Consent given by patient or guardian/carer + patient's age	Nature of consent given and patient's age better enables WSW to introduce themselves when they call the household.
Communication difficulties <i>Drop down list in which one item can be selected (Hearing problem; Vision Problem; Speech Problem; Difficulty communicating)</i>	Recognises that WSW will routinely make the first approach by telephone, with the named person whose details they are provided with, unless a specific problem is specified here. If necessary, an alternative method of contact can be arranged.
Primary healthcare team name (i.e. Practice name/community team)	To allow the particular primary care team involved in making the referral to be quoted by WSW when they contact the patient.

When WSW call the patient, they will go through their own consent process, and will also explain how and with whom they would share that information. This minimises the time the referral takes for the healthcare professional during the surgery/home visit.

Primary healthcare team and patient population

Participating practices and community teams also give consent to the following identifiable and anonymised data being collected, to be shared with the pilot's Steering Group:

Source	Data item	Correlated with	Purpose
Registration form	Name of practice / community team	No referrals/month	To examine engagement of healthcare teams and ensure equity of geographic reach across the county - the design of the pilot and/or patient identification tool may be altered to capture more patients if necessary.
		Organisation number	To obtain information about the practice and community team characteristics, such as list size
		List of existing Ardens user	The tool is accessible and free to use to all practices in Wiltshire using SystmOne. We want to check the experience of practices/teams that are not existing Ardens' users so we can assess the validity of the tool for wider roll out.
	Named contact at the practice, their job role, contact details (telephone and email)		Point of liaison for the pilot's local clinical consultant, responsible for survey +/- interview completion.
Help button on referral template / Email or call to Ardens	Number of IT support requests received by Ardens and the reason.		Monitor the ease of use of the patient identification tool and adjust if necessary.
Anonymised patient data automatically extracted from practice system	Responses to the four questions of the referral template	Age Long-term condition	To identify the ratios of patients offered and accepting referral. To identify the population groups that are most commonly referred.
	Ratios of patients identified/not identified by the tool	Numbers of referrals generated for flagged/unflagged patients	Monitor and manage the effectiveness of the patient identification tool.

The Evaluation Process

Primary care participation - Online survey

A short online survey will be circulated to the named contact of each registered practice/community team in the late Summer/Autumn. The process will be managed by the pilot's external evaluation team at Sheffield Hallam University. There will be around six questions with mainly yes/no answers.

Primary care participation - Telephone interviews

A small number of short telephone interviews will be performed to give more detailed feedback. Anonymised results will be reported to the RCGP Steering Group by the team at Sheffield Hallam.

Patient evaluation

WSW will report back to the RCGP pilot the anonymised individual patient journeys and outcomes recorded on their database. Those who receive an extended home visit with an Energy Advisor will complete a questionnaire and the anonymised results will be reported back to the RCGP pilot. Other patients will be invited to volunteer for interviews conducted by Sheffield Hallam University and will receive a £10 high street voucher as a thank you for taking part, the anonymised results of which will be reported to the RCGP pilot.

Further information

Contact Sarah Pollet at the RCGP (sarah.pollet@rcgp.org.uk , 0203-188-7604, Monday-Thursday office hours).