

Introducing an online self-referral system to improve access to abortion care in Cardiff

Dr Priya Vansia and Dr Caroline Scherf

BACKGROUND

The NICE Abortion Care Guideline 2019 clearly states that women should be allowed to self-refer to abortion services. In Cardiff this was previously done by a telephone service answered by gynaecology administration staff. The advent of the Covid-19 pandemic led to ongoing staff shortages and the phone-line was often left unanswered. Untrained administration staff were often giving out wrong information and unfortunately patients sometimes faced perceived stigma over the phone.

Contrary to NICE guidance, time critical appointments were being delayed and patients were anxious from the communication they received, particularly as they often had to repeatedly call. We also received numerous formal and informal complaints.

NICE states that information about abortion services should be widely available and information to prepare for abortion should be given as early as possible. At this point, access was gained only through telephone call and information about the abortion process was only given at the time of appointment.

An online system was therefore needed to streamline self-referrals and provide patients with accurate and reliable information whilst awaiting their appointment.

METHOD

The system was primarily developed by a trainee doctor with support from the IT department, using a similar system developed for maternity patients booking in for antenatal care as a template. Firstly, the abortion care page for Cardiff and Vale health board was updated and links to supporting services such as contraception and sexual health were added.

Ensuring compliance with information governance, a Microsoft Form on the website allows patients to securely input their demographics, pregnancy details and relevant medical/social history. The form can also be accessed via QR code.

Once the form is completed the sender receives written information about the Cardiff abortion care service. This includes how long to expect to wait for an appointment, how they will be contacted, what their options for abortion are and more links to other recommended services.

The patient details from the form are transferred via power-automate to share-point, which is only accessible by our abortion care nurses and administration staff. A traffic-light system is used to prioritise those of higher gestation. Staff can see the date of referral and use inputted demographics to immediately allocate an appointment via text message or phone call. The form may also highlight medical concerns that nurses need to action prior to appointments. Special notes can be added to the share-point list by staff and when appointment allocation is complete the patient referral is archived.

RESULTS AND DISCUSSION

The system has been running for over a year now and staff can more efficiently manage the 50+ referrals a week. It allows people seeking abortion care to easily access self-referrals at any time of day and they can reassuringly receive specific information about their local service and what they should expect next.

A big difficulty was linking power-automate correctly with the MS Form to ensure submissions "flowed" consistently into the share-point. If resources allowed, the system would have been created much more efficiently by a member of the IT team.

Other challenges included dissemination of the new referral process to GPs and encouraging uptake of the online referral over the telephone. Patients also initially did not always accurately fill out the form, despite reassurance of confidentiality; this made appointment allocation more difficult and time-consuming. There was also some staff reluctance in changing processes.

Despite the glitches, the share-point referral system allows Cardiff abortion care services to better meet the NICE standards of service organisation. It also allows easy collection of data for audit purposes. Due to the nature of evolving services and staff within our service, it has been difficult to assess the time/cost savings with the new online referral. However, future projects could include evaluating patient satisfaction with the new online referral process.

