Increasing the safety of patients with Inflammatory Bowel Disease (IBD)

Case Study: The IBD Big Room





How the team were working



Staff at Lancashire recognised that, due to the complex nature of patients with IBD, there were inconsistencies in how patients were experiencing care.



The Big Room was established as they wanted to streamline and enhance the services available to meet the growing demands of the local population.

Aims of the Big Room



Empower patients to manage their own condition



Improve patient quality of life



Minimise the amount of flare ups



Reduce the time between a flare up and a patient receiving contact



Reduce the time between the decision to initiate biologic treatment and administration of first dose



Streamline services and provide better access to care



Safe prescribing and monitoring of IBD medications



Build confidence in patients and teams



Reduce the amount of waste

What the team has achieved

By testing change using Plan-Do-Study-Act (PDSA) cycles the Big Room has successfully:

Ensured patients receive the right care for their conditions



A Virtual Biological Clinic (VBC) has been established. Here staff undertake a review of patients prior to their biological treatment doses and any recommendations are recorded in a patient management plan.

As part of the clinic, a monitoring dashboard and standard IBD email have been set-up so that any referral or query can be seen easily and be responded to directly rather than writing and posting a letter. This has reduced treatment start time significantly.

This has meant increased safety for patients as:

Prescription duplication across teams is minimised

Patients are better equipped to manage their condition from home

They are more closely monitored and can be reassessed more regularly

Those who are on regular biological treatment doses are reviewed to ensure they are taking the best possible medication for their condition

Staff now feel more confident in managing patients with complicated IBD in the clinic with additional support



The number of patients who have received a regular review of their biological therapies and treatment doses has increase by 47%.



On average the VBC has saved £1,628 per clinic as the team has been able to reassess patients medication needs. This could be a potential annual saving of £84,690.



Want to know more? Visit the FCA website flowcoaching.academy

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Provided earlier access to care



A weekly virtual clinic has been established to discuss patients who need to start biological therapy.



The clinic prioritises these patients, so they receive their first dose of therapy in under 28 days.



The median wait time for patients has reduced by 42% (from 35 days to 20).

Strengthened support to staff by...



Producing prescribing guidance so staff feel reassured in how to safely prescribe the best treatment for a patient

Running joint nurse and GP education events to provide further information on how to support those with complex IBD

Producing communications about prebiological screen tests so patients can be better monitored

Median time from decision to start biological therapy to administration of first dose 75 50 25 Median time from decision to start biological therapy to administration of first dose 75 Key: Median 28 day goal

Enhanced communication with patients by...



Creating a new template to speed up the process of issuing patient letters



Establishing an IBD flare-line which patients can call to discuss symptoms



Developing a new standard reminder letter that explains how to return samples so medication is monitored



Enhancing information available online through the set up of a new dedicated website and on social media

Allowed patients to access care outside the hospital



Through shared agreements, the team have worked to empower GPs to takeover prescribing specialist medicines. This has meant patients can access prescriptions and medication closer to home.

What are the benefits to patients? They...

Receive more consistent care

Are reassured that they are taking the most appropriate medication

Are further involved in their personalised care plan

Spend less time waiting for their first treatment

Are regularly communicated with

Can contact an IBD specialist if they are experiencing a flare-up

Next Steps

The team are currently looking to standardise patient self-management plans, patient initiated follow up pathways and to set up further educational events for patients newly diagnosed with IBD.

