

ANP Led Clinic Maintains standards of care for IBD patients during Covid-19 pandemic

Siofra Bennett, John O'Grady, Anne Fennessy, Sarah Gleeson, Catriona O'Sullivan, Martin Buckley, Carthage Moran, Jane McCarthy, Kathleen Sugrue
Mercy University Hospital, Cork, Ireland



Introduction

During the third wave of the covid-19 pandemic, hospital management cancelled all outpatient clinics. After discussion with the gastroenterology consultants, the advanced nurse practitioner (ANP) conducted review of the inflammatory bowel disease (IBD) outpatients for a defined period.

Aim

- To quantify the number of outpatient clinic appointments prevented from cancellation.
- To assess outcomes from ANP-led virtual clinic

Method

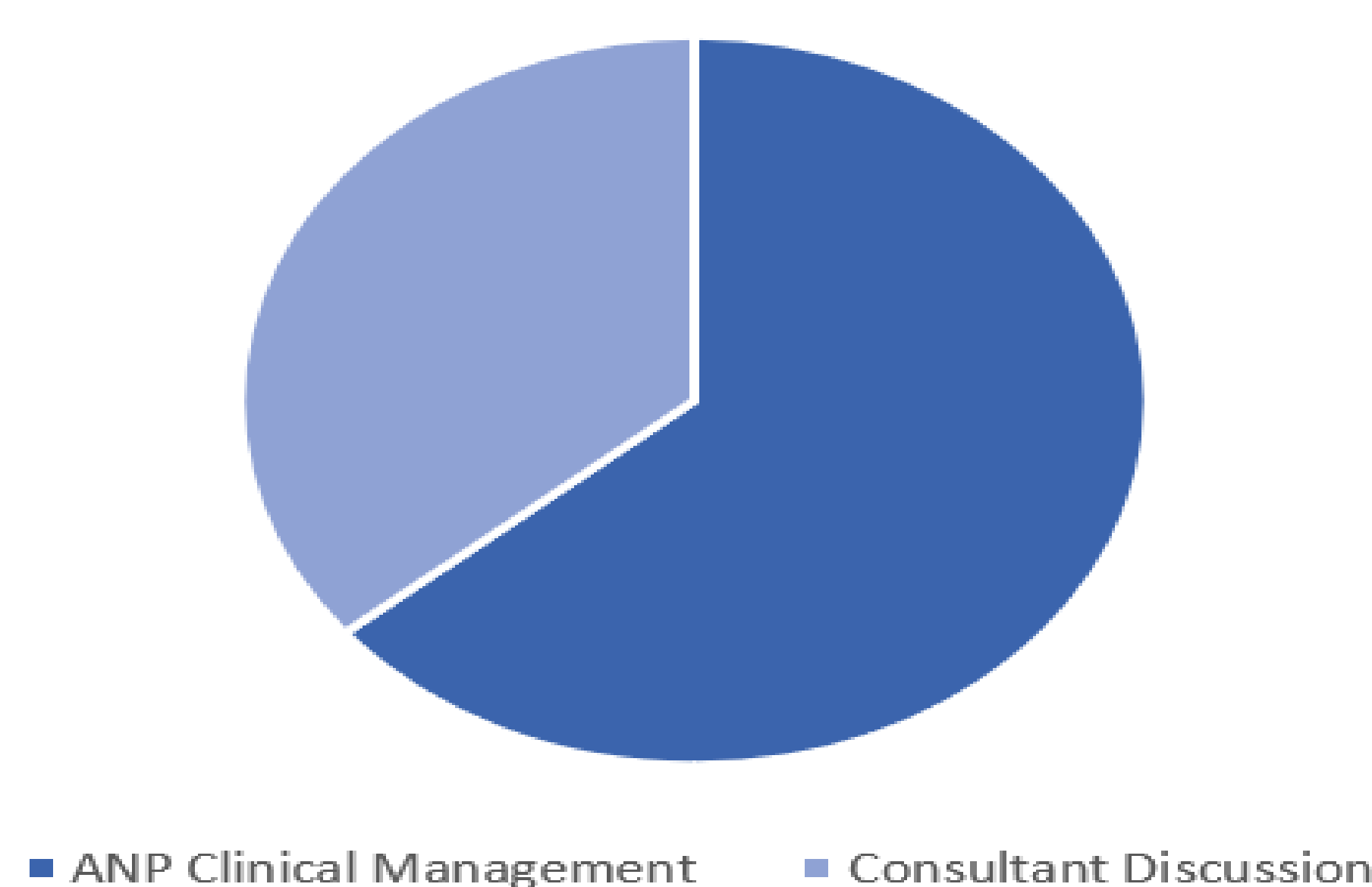
3 gastroenterology clinics are held weekly. The ANP identified the IBD patients due to attend using the letters on the online dictation service (TPRO) and records of patients maintained by the service. From there the patients were telephoned for a virtual consultation. We then audited the outcomes from these interactions.

Results

- In total 336 patients were phoned over a two month period (Jan, Feb 2021).
- Of these, 215 were managed with ANP clinical management
- The other 121 (36%) were discussed with the consultant.
- Reasons for consultant discussion included:
 - decision to start or switch biologic agent
 - decision regarding dual-biologic therapy
 - complex cases
 - comorbidities

These were outside the scope of practice of the ANP.

Case distribution



Discussion

- 336 clinic appointments were prevented from being cancelled.
- This ensured ongoing safe care and prevented a future backlog and potentially additional hospital attendances.
- It also demonstrates the benefit of virtual clinics, allowing us to increase access to face- face clinic appointments clinics for the complex IBD patients.
- This maintained the usual standard of IBD care during a challenging time.

Conclusion

- ANP-led clinics are a safe and acceptable way to manage IBD and this could potentially be expanded in future.
- Virtual clinics are a feasible alternative to the traditional model of outpatient care

References

- Taylor NS, Bettey M, Wright J, Underhill C, Kerr S, Perry K, Cummings JF. The impact of an inflammatory bowel disease nurse-led biologics service. *Frontline Gastroenterol*. 2016 Oct;7(4):283-288. doi: 10.1136/flgastro-2016-100696. Epub 2016 Jul 7. PMID: 28839869; PMCID: PMC5369502
- Molander P, Jussila A, Toivonen T, Mäkkeli P, Alho A, Kolho KL. The impacts of an inflammatory bowel disease nurse specialist on the quality of care and costs in Finland. *Scand J Gastroenterol*. 2018 Dec;53(12):1463-1468. doi: 10.1080/00365521.2018.1541477. Epub 2019 Jan 2. PMID: 30600722.
- Greveson K, Woodward S. Exploring the role of the inflammatory bowel disease nurse specialist. *Br J Nurs*. 2013 Sep 12-25;22(16):952-4, 956-8. doi: 10.12968/bjon.2013.22.16.952. PMID: 24037398.
- Martinez-Vinson C, Le S, Blachier A, Lipari M, Hugot JP, Viala J. Effects of introduction of an inflammatory bowel disease nurse position on healthcare use. *BMJ Open*. 2020 May 11;10(5):e036929. doi: 10.1136/bmjopen-2020-036929. PMID: 32398339; PMCID: PMC7223342.