

# Greater Nottingham Urgent Care Vanguard

Commenced September 2015  
ended March 2017



## Update:

1. Integrated Urgent Care – the ‘funded must do’
2. Primary Care at the Front Door of ED
3. Mental Health Navigation
4. Vanguard Evaluation
5. ROI
6. The system
7. Post Vanguard 2017/18

# IUC Update

- Re-assessment of 111 green calls across Nottinghamshire to reduce conveyance (Green 4 & 2 live and if appointment required booked into the UCC)
- Warm transfer of calls from 111 to mental health crisis team across Nottinghamshire (in place)
- GP led clinical hub operating 24/7 to re-assess ED illness calls, Primary care contact dispositions - OOH NEMS, in hours to GP or booked directly into the UCC. Primary Care speak to dispositions reassessed by NEMS 24/7 and if they require treatment are seen as above
- Direct booking offer for patients requiring an appointment to primary care services (UCC) – appointment availability now up to 32 per day with a view to increase to 50 per day
- Dental (DHU) direct booking into NEDS in place April 17
- Pharmacy (DHU) – pharmacist in DHU to deal with meds queries during OOH periods
- Care and residential home calls to be managed through NEMS to reduce inappropriate outcomes
- Sensely app piloted by Cripps PPG in April, with aim of “big bang” roll out in Freshers week

# Primary Care at the Front Door

- NHS England mandate Primary Care Streaming roll out by September 2017
- Luton model implemented 3<sup>rd</sup> April 2017 at QMC
  - Adults only. Expect Paediatric streaming to commence in June
  - Band 7 ED Nurse to take over streaming
  - Aim is for NEMS to see, treat and discharge 20% of total ED attendances
- Streaming to NEMS 08:00 to midnight Mon-Sun
- GP available in NEMS@QMC between 08:00 and midnight Mon-Sun
- June 2017 paediatric ED patients are streamed to the GP in NEMS where appropriate to do so
- Capital Bid funds secured of £400k to re-configure the front door of ED, to provide a more suitable Primary Care facility by October 2017
- Data showing around 17% of total ED attendances seen by NEMS previous month.  
An improvement of around 6% on previous weekly averages, 600 patients +

# Mental Health Navigation

- Model agreed – Urgent Medical Mental Health Line
- Go live May 8th accessed via 0300 number with info available on the Nottingham Care Navigator
- Initially covering the South of the county only
- Consultant available on the helpline Monday to Friday 9am-5pm
- Nottingham City will come on board in September
- 6 assessment slots daily
- Information leaflet being distributed to all GPs to advise on the process of accessing the line, and types of patients that the dedicated line is aimed at
- Early positive feedback received in first month

# Evaluation

**Evaluation of the Greater Nottingham Vanguard has been completed and the following observations were made:**

## Primary Care at the Front Door

- Time to treatment in ED has decreased significantly in September 2016 and has remained at a lower level since
- Declining trend in both the number and percentages of re-attendances

## Integrated Urgent Care

- Estimated gross saving of £578,000 for the year to date (January 2017)
- Potential gross savings of over £1m as the model becomes further embedded

## **Recommendations included:**

### Primary Care at the Front Door:

- Revisit streaming guidance to reduce “bounce backs” to ED. Bounce backs (patients streamed to Primary Care and then returned to ED) have reduced significantly in recent weeks
- Building in an element of patient education regarding appropriate care

### Integrated Urgent Care

- Introduce cohesive monitoring arrangements to assess change over time against the indicators measuring performance against the 8 `Must do`s`, taking a system wide perspective. The Integrated Urgent Care steering group has formed an analytical sub group that will be responsible for the production of system wide performance against the `must do`s`

## ROI

- Activity reduction at ED on 111 dispositions of 80%
- Activity reduction of green 2 ambulance dispositions see, treat, convey of 81%
- 111 pharmacist to deliver 47% reduction in medication query/repeat prescription activity in OOHs
- Net ROI of 56% over 5 year period (Integrated Urgent Care)

# What does this mean for the system?

Increasing clinical assessment into the urgent care pathway has delivered;

- A reduction in unnecessary follow on treatment
  - Reduced transfers from 111
  - Reduced expense through a reduction in A&E and ambulance dispositions – currently showing a 1% reduction in ED attends from 16/17 levels
- System is better able to manage demand
  - Directly booked appointments supports providers to manage in-flow
  - Patients accessing primary care are the ones who need to be seen
- It didn't deliver the 4 hour standard



# 17/18 post Vanguard

- Next steps 5 year forward view
- Urgent and Emergency Care (UEC) is one of the main national service improvement priorities. The key deliverables for 2017/18 are that
  1. In or before September 2017 over 90% emergency patients are treated, admitted or transferred within 4 hours
  2. The majority of Trusts meet the 95% standard in March 2018
  3. The NHS overall returns to the 95% within the course of 2018.

## UEC Delivery Plan 17/18 – 7 UEC priorities

- Vanguard status ended 31/03/17 – has supported the GN area to deliver on 3 of the mandated areas ahead of national timeline

# UEC Delivery Plan 17/18 – 7 UEC priorities

- 111
- 111 digital
- GP access
- Urgent Treatment Centre
- Ambulances
- Hospital including GP streaming in ED
- Hospital to home

Vanguard work is now incorporated as business as usual and the work is progressed through the 4 executive sponsored work streams which report to the GN A & E Delivery Board