

Northumberland County Council Health and Wellbeing Overview and Scrutiny Committee

Tuesday 16th January 2018

Purpose of this Presentation

- Describe pressures across the health sector;
- Set out the initiatives to help address those pressures, including handover delays;
- Set out alternatives to conveyance to hospital;
- Set out ideas being explored across the health sector.



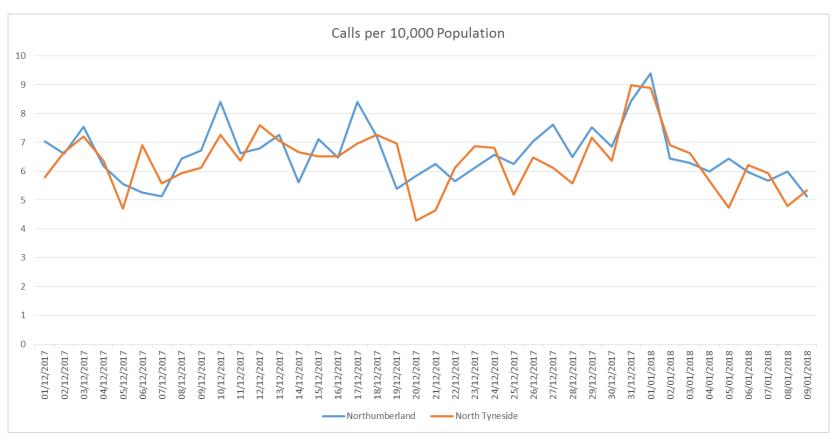
Issues and Pressures in the Healthcare System

- Increased volume of calls to 999 and 111;
- Handover delays at Accident and Emergency departments;
- Lack of alternative dispositions.



999 Call Volumes (per 10,000 population): Northumberland versus North Tyneside

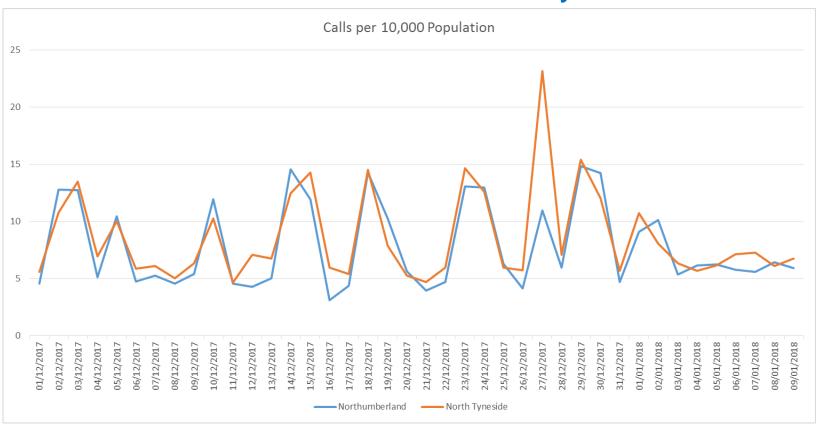
Period 1st December 2017 to 9th January 2018





111 Call Volumes (per 10,000 population): Northumberland versus North Tyneside

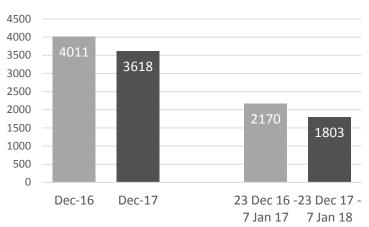
Period 1st December 2017 to 9th January 2018



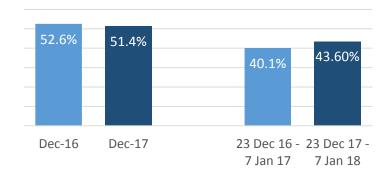


AMBULANCE SERVICE AND HOSPITAL INTERFACES Handover Performance – NSECH Comparative Data, 2016 and 2017

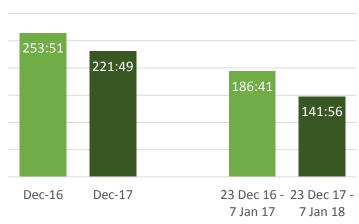




% Handovers within 15 mins



Hours Lost to Handover



Ambulance arrivals at NSECH have reduced compared to the previous year with almost 10% less arrivals in December 2017 compared to December 2016.

Improvements have been seen in handover performance during the winter period with fewer hours lost to handover compared to the previous year.

Handovers completed within 15 minutes saw an improvement over the Christmas and New Year period, although a small reduction was seen in December 2017 overall.



Addressing the Healthcare Pressures

- GP Direct Booking;
- Improved Hear and Treat;
- Improved See and Treat;
- Community Services Urgent Response Service;
- Handover initiatives to more quickly release ambulance crews, including implementation of a Standard Operating Procedure (SOP);
- Weekly conference calls.



GP In-Hours Direct Booking – How It Works



111 triage disposition results in the need for the patient to contact or speak to a primary care practitioner within a timeframe that falls inside the patients home GP opening hours (Appendix 1)

OF SERVICES







Directory of Services profile will instruct the call handler that these surgeries offer face to face appointments only. The call handler will attempt to book an appointment at the patients home GP and will advise the patient of the appointment time and location.

(Appendix 2- Face to face call handler instructions)

Directory of Services profile will instruct the call handler that these surgeries offer telephone consultations only. The call handler will attempt to book a call back from the patients home GP and will advise the patient of the time the call back is booked for , to allow up to 1 hour after this for delays and to keep their phone line free. (Appendix 3-Telephone slot call handler instructions)

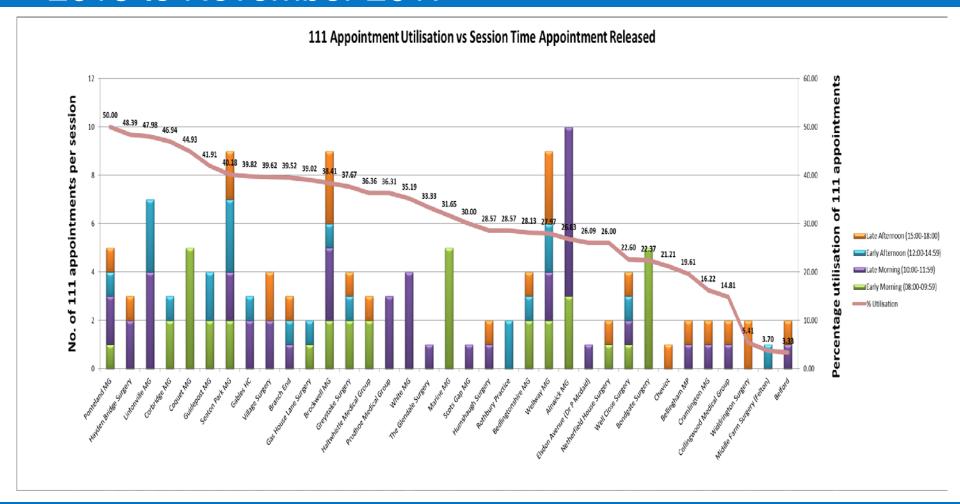
Directory of Services profile will instruct the call handler to ring the surgery in hours for 111 appointments.

The call handler will attempt to book an appointment/call back at the patients home GP and will advise the appropriately.

(Appendix 4- Verbal referral call handler instructions)

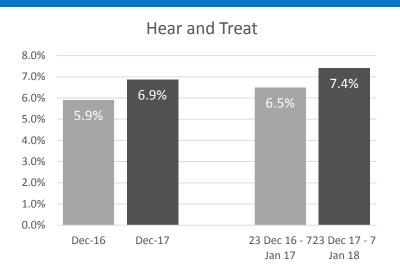


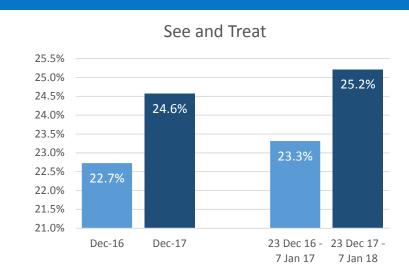
AMBULANCE SERVICE AND HOSPITAL INTERFACES GP In-Hours Direct Booking – Performance, June 2016 to November 2017

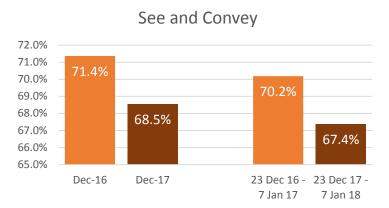


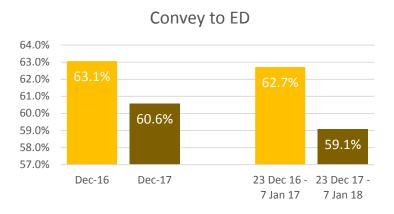


Outcomes – Northumberland and North Tyneside CCG











Community Services Urgent Response Service

- Started 21st December 2017;
- Aim is to help identify alternatives to conveyance to A&E Departments, thereby reducing pressures;
- Telephone support for ambulance crews, provided by Northumbria Healthcare;
- Team consists of Community Nurse/Matrons,
 Therapists and Social Workers;
- Available 24/7, every day of the week



Handover Initiatives

Single PIN;

Dedicated ambulance patient area at Northumbria.



Collaborative Working – Commissioners, Northumbria Healthcare and NEAS (1)

- Process improvement event held in October 2017;
- Data analysis to aid understanding;
- Identification of improvement opportunities, including:
- ✓ More alternative dispositions planned across Northumbria;
- ✓ Better use of Foundry House service;
- ✓ Consistency and more information of current alternative dispositions, e.g. at Urgency Care Centres.



Collaborative Working – Commissioners, Northumbria Healthcare and NEAS (2)

- Continuing the Process Improvement work by:
- ✓ Developing an "improvement dashboard" with key indicators;
- ✓ Site visits to other acute trusts to discover if anything can be learnt and implemented in Northumbria;
- ✓ Ongoing monitoring and drill down into key performance data.



Questions?



