



Northumbria Healthcare
NHS Foundation Trust

Winter planning and delivery

Helen Ray, Chief Operating Officer

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To cover

- Current state of readiness and testing
- Reset dates and plans
- Activity and performance
- Risks and mitigations
- Reminder on gears
- Hexham urgent care centre
- Whalton Unit

Current state

- Local plan written and signed off through Trust Board
- System plan written and reviewed – broadly very well received
- Plan stress tested during recent period of performance dips - lessons:
 - Bed occupancy – focus positive but further action on reducing occupied bed days is needed. Audit of measures and actions in place
 - Nursing gaps remain a concern (North Tyneside is a hot spot). Work with nurse bank underway to review deliverables. Matron support to review and gap closure
 - Escalation is often contained to small group – needs wider emphasis. Communication team support and routes to clinical teams to be refined
 - The Northumbria length of stay drifting – focussed action group in place and regular review of impact undertaken
 - Seven day service challenge remains
 - Walk-in patient conversion rate to inpatient appears high - reviewing streaming to address
 - Healthwatch audit results awaited

Reset days

(12/13 December and two full weeks in January)

- Command and control focus
- Clinical leadership and community focus
- Supporting patients to go home as soon as they are well enough
- All sub-specialties have well developed individual plans
- Table top exercise completed to test these – system wide attendance
- Third table top undertaken 26 November 2018
 - Flash cards for key staff
- Vital that this is acute and community focus
- Winter room leadership from 1 December 2018
- Our aim was to have 85% bed occupancy during reset weeks – results from December very positive
- Communication to communities (Choose well)

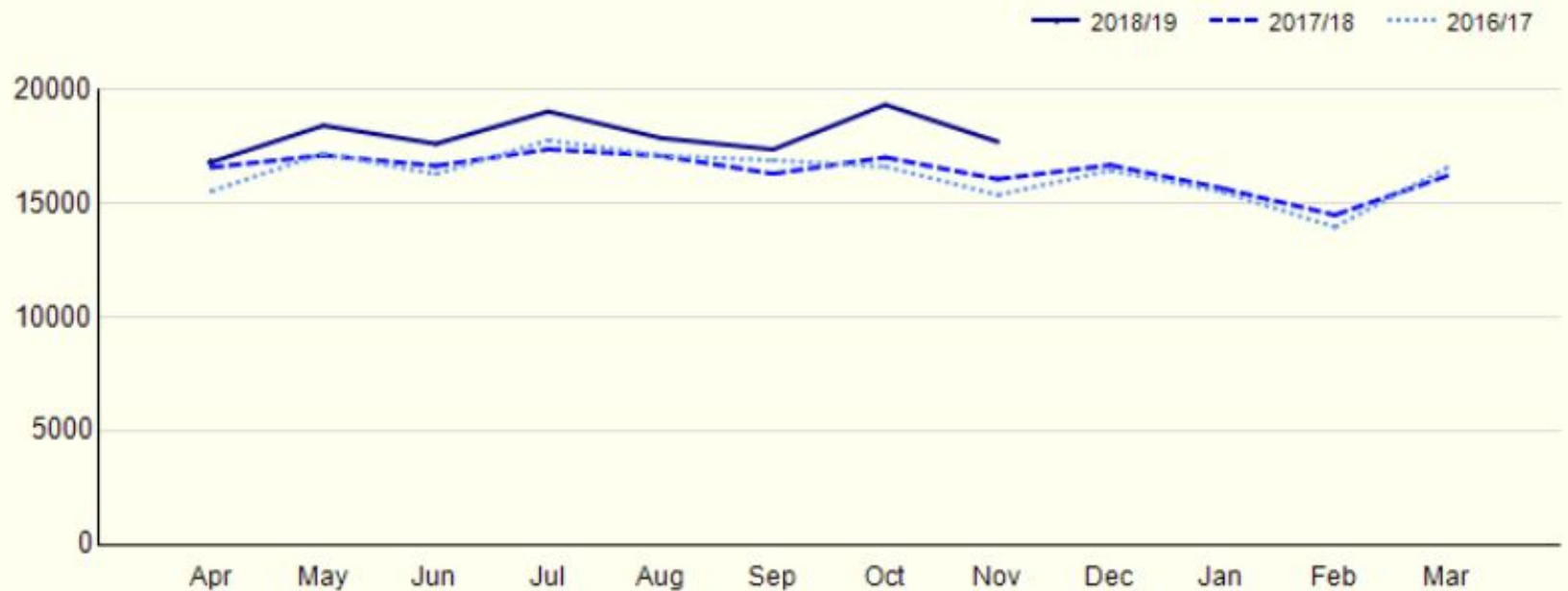
Quarterly performance – last three years

	2016/17	2017/18	2018/19
Q1	95.8	93.4	98.3
Q2	95.8	95.1	96.8
Q3	91.4	93.5	95
Q4	92.3	90.8	

Excellent improvement and better when we appreciate we have seen 10,000 more patients through our emergency and urgent care centres this year compared to last

A&E attendances

Year to date 144113; same period last year 134147; 7.4% increase in activity.



2018/19	16799	18415	17609	19030	17867	17363	19329	17701				
2017/18	16572	17110	16641	17369	17088	16296	17015	16056	16675	15648	14479	16209
2016/17	15523	17190	16282	17763	17098	16887	16604	15365	16440	15498	13953	16566

Risks and mitigations

- Staffing – still some minor shortages on medical rota and some significant gaps in nursing
 - Working with nurse leads to fully determine specialty and matron cover arrangements – focussed to reset to optimise results
 - Quality of care at the centre
- Ambulance flows – still a challenge
 - Up to 130 ambulances per day present at The Northumbria
 - Meeting with NEAS undertaken – support teams in place at points of pressure
 - Consultant triage to support paramedic decision making to be re-established for winter
- Domiciliary care provision
 - On-going discussion with providers– short term support teams providing outreach
 - CCG support in place for short term placements
- Thresholds for patient transfers
 - Reviewed with commissioners and flexible approach agreed

Short-term planning 2018/19: Gears

- **Gear 1:** From 1 October to 31 March (potentially brought back for Easter): lower-level plans covering a six month period
- **Gear 2:** Additional measures brought into effect from December to end February, covering anticipated seasonal surge period
- **Gear 3:** Further measures in response to high levels of escalation – any time of year; in line with OPEL framework

Hexham urgent care centre

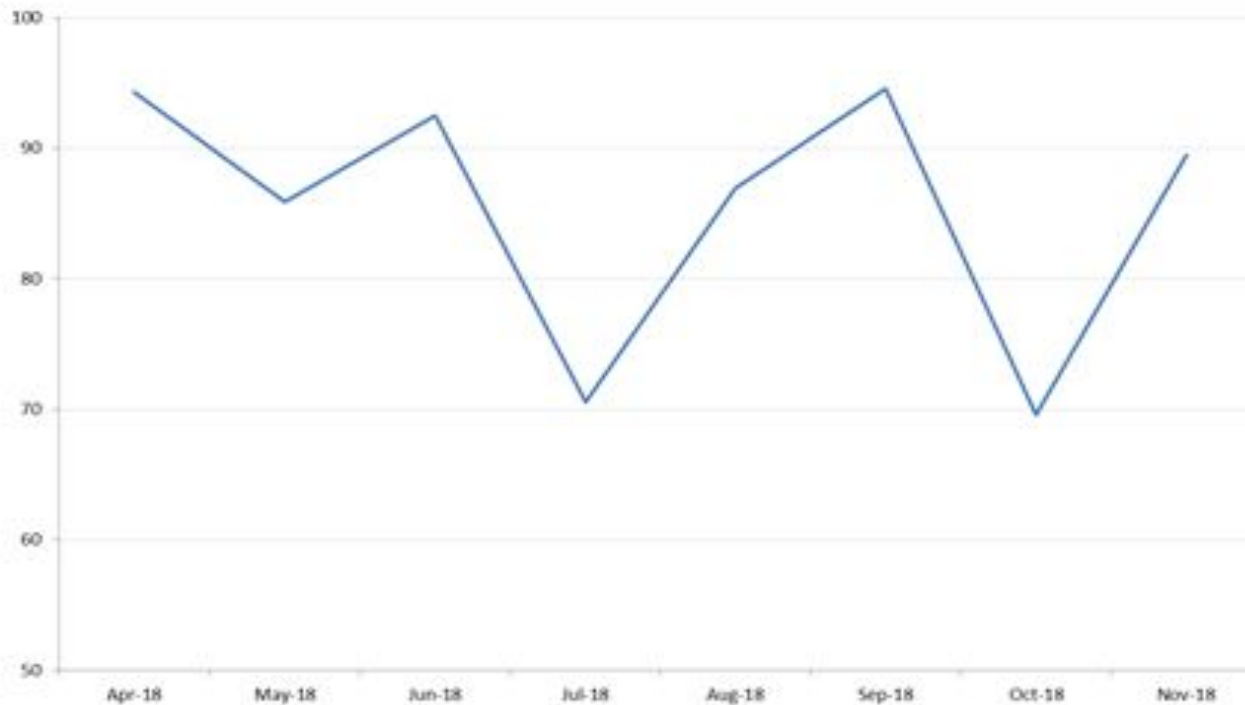
- Temporary suspension of overnight urgent care – November 2018
- Should note that on average, fewer than two people attend the department overnight
 - Staffing pressures among highly-trained specialist nursing team which deliver this service are the main issue
- Repeated efforts were made to keep this open overnight
- The urgent care centre continues to operate as normal – as a walk-in service – between 8am and 10pm

Whalton Unit

- Temporary relocated – as a unit – to ward 8 at Wansbeck General Hospital on 19 December
 - To ensure adequate staffing to cope with the expected increase in demand over the winter months as the unit has faced significant recruitment issues for both nurses and doctors
- Being based within Wansbeck is helping us to provide a stronger level of cross-cover and support to the Whalton team making the workforce more resilient and flexible – teams have settled in very well
- Easier for inpatients to access other hospital services such as diagnostic tests
- Transport solution in place for relatives who may find it difficult to get to the hospital
- Review of longer term location to be undertaken in March 2019

Activity

Midnight bed occupancy (%) for Whalton Unit





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Any questions?

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Clinicians commissioning healthcare for
the people of Northumberland

Winter planning and delivery

Siobhan Brown
Chief Operating Officer



Use of GP Extended Access: Christmas and New Year

- Almost 1,000 GP Extended Access appointments between 21 December 2018 and 2 January 2019
 - These were a mix of pre-bookable, urgent same day and NHS111 appointments
 - And in addition to GP Out of Hours appointments
- A&E, UCCs and GPOOH had information on these services and how to book patients into available slots
- Just over 70% of the GP Extended Access appointments were filled



GP Extended Access: Appointment utilisation

All Hubs	Available appointments	Appointments used	Utilisation rate
Friday 21st December	47	36	77%
Saturday 22nd December	286	237	83%
Sunday 23rd December	12	0	0%
Monday 24th December	37	18	49%
Tuesday 25th December	25	6	24%
Wednesday 26th December	39	26	67%
Thursday 27th December	80	58	73%
Friday 28th December	77	69	90%
Saturday 29th December	241	166	69%
Sunday 30th December	12	0	0%
Monday 31st December	27	12	44%
Tuesday 1st January	25	8	32%
Wednesday 2nd January	78	60	77%
TOTAL	986	696	71%



Urgent and emergency care: future planning

Simple to navigate high quality care

Reduced duplication of delivery

- Working with our population and providers to establish urgent treatment centres (required nationally) and how to better integrate minor injuries, and primary care including out of hours care and GP extended access services
 - Working through what that means for each geographical area of our system that meets local needs
- Urgent care centres at Wansbeck and Hexham are broadly compliant with urgent treatment centre requirements – next steps include:
 - adopting the urgent treatment centre directory of service (DOS)
 - NHS 111 direct bookable appointments



Future planning: navigation to Primary Care

- To help Urgent Care Centres manage demand, primary care and Wansbeck UCC have developed a referral 'back to primary care' protocol
 - For non-worsening symptoms of more than 72 hours
- This is currently a 'manual' process
 - Involves calling patient's practice or extended access hub for appointments
- This referral process could be streamlined if all providers were using SystmOne and EMIS
 - We are discussion with urgent care and primary care providers about use of SystmOne and EMIS in their services
 - This would allow direct booking into primary care using unfilled NHS111 appointment slots in primary care and extended access services
 - Clinicians working in urgent care services would benefit from being able to view the full patient record



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Northumberland
Clinical Commissioning Group

Any questions?

**NHS Northumberland
Clinical Commissioning Group**

County Hall
Morpeth
Northumberland
NE61 2EF

Tel: **01670 335 178**

Email: **norccg.enquiries@nhs.net**

Web: **www.northumberlandccg.nhs.uk**

Twitter: **[@NHSNLandCCG](https://twitter.com/NHSNLandCCG)**

Facebook: **[@NHS_Northumberland_CCG](https://www.facebook.com/NHS_Northumberland_CCG)**

