

Hertfordshire

Integrated Urgent Care Update

14th January 2020



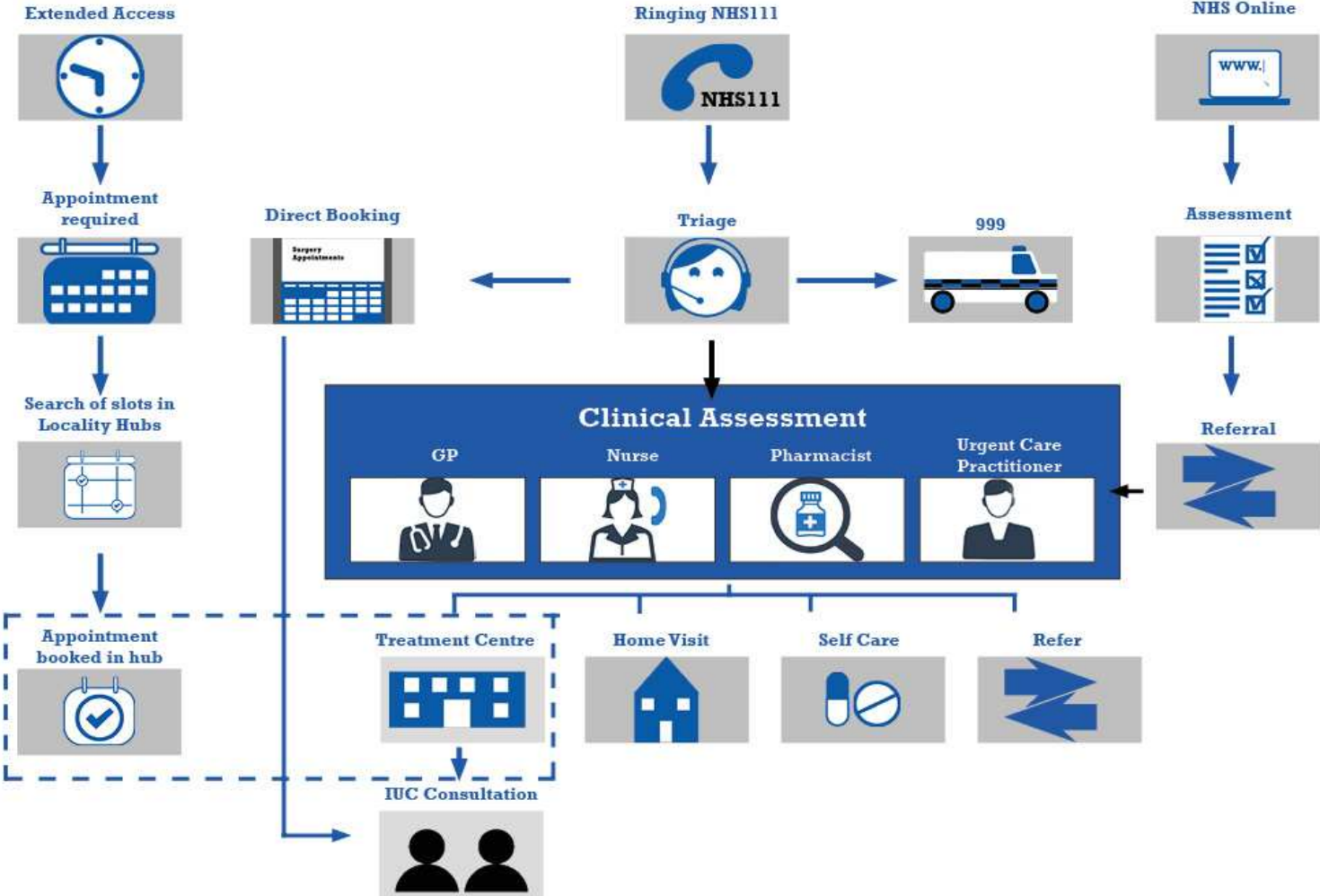
Putting the patient at the start and heart of our care



Integrated Urgent Care

- Combining Out of Hours Services with NHS 111 and adding in Multi-Specialty Clinical Assessment Service (CAS) and Acute In-Hours Visiting Service (East and North Herts CCG)
- Single, free to call telephone access 24/7
- CAS comprising of:
 - GPs, Nurses, Clinical Advisors, Prescribing Pharmacist, Dental Nurses, Palliative Care Nurses, Paramedics
- Direct booking from NHS111 into IUC Treatment Centres
- Integrated with NHS 111 Online for digital access 24/7
- Home visiting service

Simplified Model



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Activity



The following figures are based on average monthly activity:

Hertfordshire	
Calls to 111	31700
Calls to CAS	4500
Calls to OOHs	11500
Advice Calls	4200
PCC Visits	5600
Home Visit	1500
NHS 111 Online	440
Dental	1200



Key Performance Data

The following table is a summary of key performance metrics that have wider system implications:

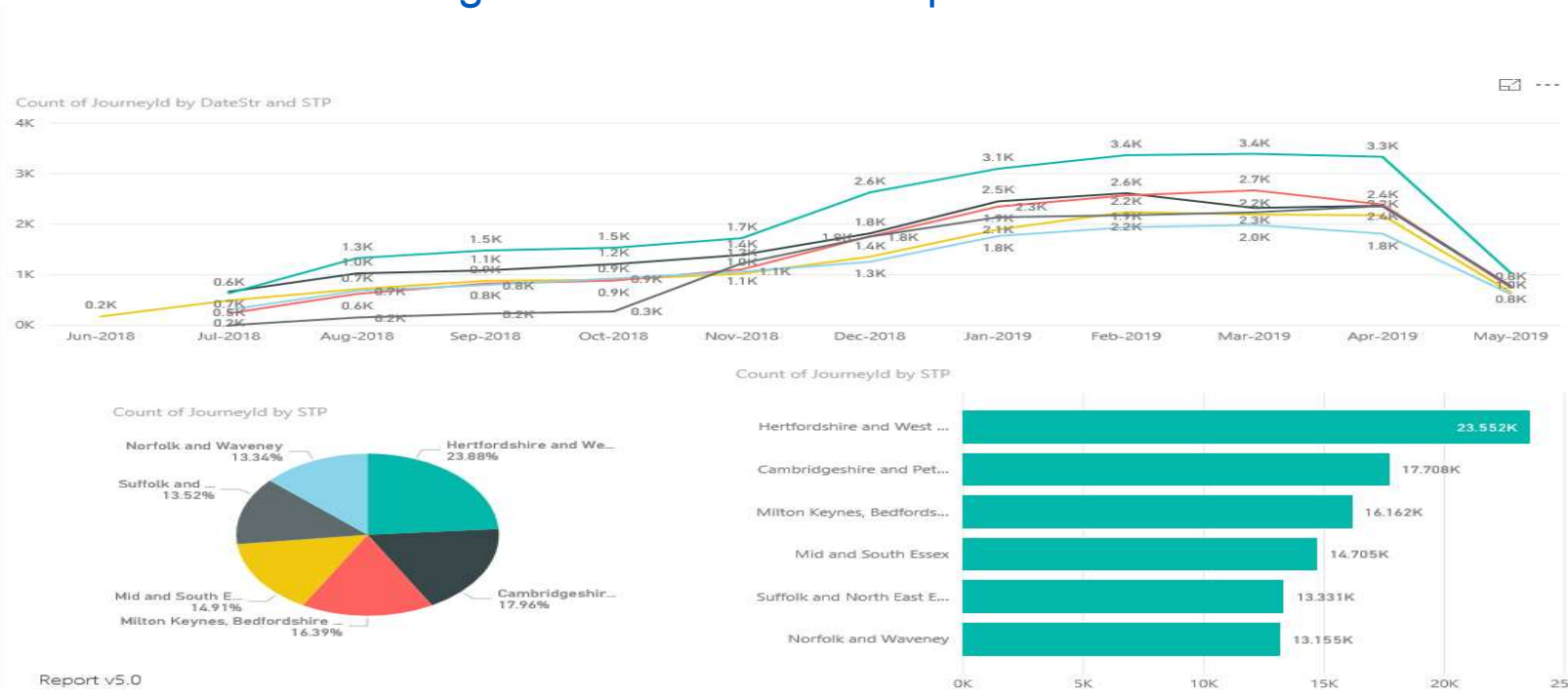
	Hertfordshire	National
Time to Answer	33 seconds	35 seconds
CAS Validation of ED	97.5%	40%
CAS Validation of 999 (C3+C4)	98.1%	79%
999 Referral	8.2%	13%
ED Referral	7.5%	9%
Time to triage	14.35 mins	KPI 60 mins
Time for home visit	4.2 hours	KPI 6 hours

Impact of the CAS shows on average (Combined) 89% of Ambulances referrals were managed without referral to EEAST and that 78% of ED referrals into the CAS were managed without further referral.



NHS 111 Online Activity

The various charts and histograms illustrate NHS Online activity by STP across the Eastern region from June 18 to April 19



- The majority of activity takes place at weekends and when used during the week the higher period of use is between 18.00 and 20.00
- 10% of triage now taking place on-line, yet no channel shift

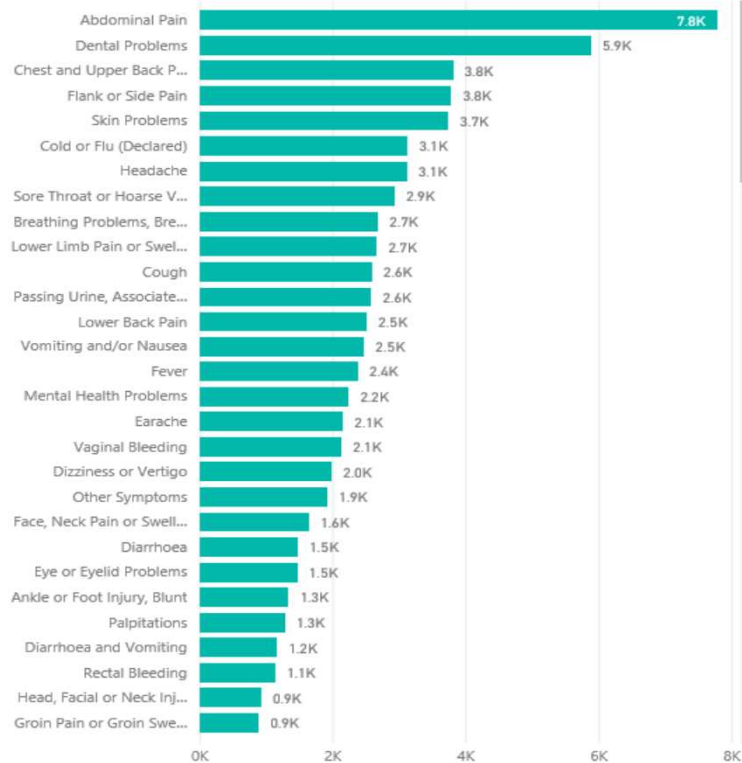
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Symptoms and Outcomes

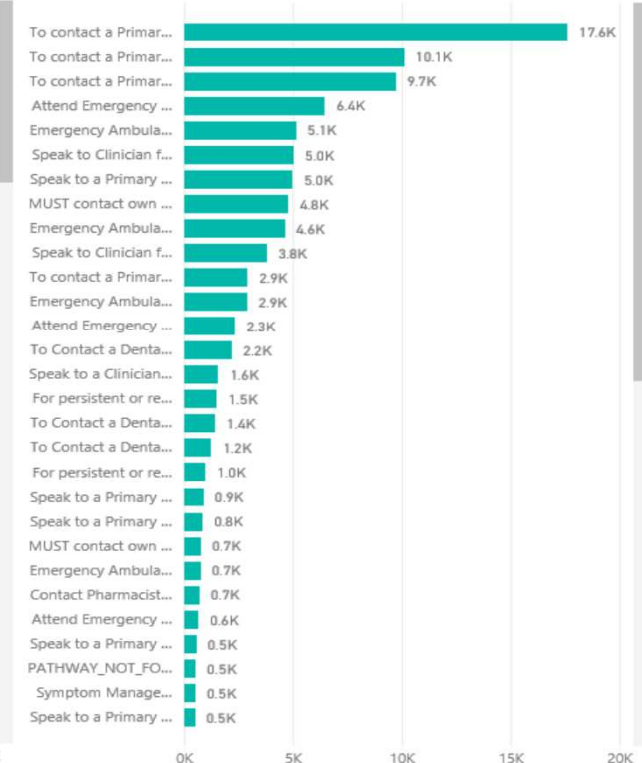


Symptoms and Outcomes

CompletedTriages by StartPathwayTitle



CompletedTriages by FinalDxDescription



Only the Herts IUC CAS nationally is validating online ED and 999 outcomes all other areas direct the patient to call 999 or directly attend ED

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Challenges



- Workforce
 - Shrinking clinical workforce prepared to work unsocial hours
 - Change to VTS training removing mandatory 108 hours OOHs
 - High turn over of contact centre staff- ‘call centre culture’
 - Risk of mitigation associated with unplanned care
 - Market forces – multiple service competing for limited workforce
 - Competing services requiring the same clinical workforce
- Acuity of cases and impact on the delivery model
- Level of national scrutiny and performance targets
- Increasing activity and patient expectation
 - National media campaigns
 - NHS 111 Online
 - Volume of patients that need to be seen

Plans and Opportunities



- Remodelling of both OOH elements in light of the impact of the CAS and case acuity
- Development of a regional nurse triage function to manage post 111 triage
- Development of direct pathways from 999 to support EEAST
- Increased integration with Primary Care for the deployment of GP Connect
- Countywide use of NHS111 as EA access facility
- Use of NHS111 as a true single point of access across a wider health and social care services/providers
- Integration and co-location with UTCs and MIU provision
- Increased use of IT to support personalised care provision and streamlined access – Natural Language Processing pilot

Questions and Comments



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