

Health and Wellbeing Board

15th November 2013

Planned Changes to Urgent Care - Update Report



Joint Report of Dr Stewart Findlay, Chief Clinical Officer, Durham Dales, Easington and Sedgefield Clinical Commissioning Group and Nicola Bailey, Chief Operating Officer, North Durham Clinical Commissioning Group

Purpose of Report

1. The purpose of this report is to provide the Health and Wellbeing Board with and update on urgent care. The report will cover County Durham and specific plans in both Clinical Commissioning Groups (CCGs).

Background

2. Both North Durham (ND) CCG and Durham Dales, Easington and Sedgefield (DDES) CCG have identified urgent care as a priority in their 2013/14 annual commissioning plan. These plans were developed as a continuum of significant work undertaken in County Durham in developing urgent care and services such as 111.
3. As has been reported nationally, there is increasing demand on unscheduled care and in particular within urgent care and emergency departments. The CCGs are currently working in collaboration with County Durham and Darlington NHS Foundation Trust (CDDFT), Tees, Esk and Wear Valley NHS Foundation Trust (TEWV), North East Ambulance NHS Foundation Trust (NEAS) and Durham County Council to respond to the immediate pressures in the system, plan for winter and develop longer term plans for urgent care.
4. NHS England in recognition of the pressure in urgent care and emergency department systems across England has asked CCGs to establish Urgent Care Boards in close collaboration with Local Authorities, Area Teams and Acute Trusts. Urgent Care Boards have responsibility for the overseeing urgent and emergency care and ensuring action is taken to address and manage pressures in the system and coordinate plans.

Urgent Care in County Durham

5. An Urgent Care Board has been established which is led by both CCGs and chaired by Dr Stewart Findlay, Chief Clinical Officer, DDES CCG. Membership includes the organisations referred to in paragraph 3 above and includes senior representations from North Durham CCG and Darlington CCG. The Urgent Care board is one of the sub-groups that supports the system wide Clinical Programme Board.

6. Detailed winter plans for 2013/14 have been developed and agreed for County Durham. These were discussed at the last Health and Wellbeing Board development session in September 2013. The Urgent Care Board has responsibilities for the coordination and oversight of the winter plan across County Durham. As part of these plans both CCGs are working closely with primary care, CDDFT, TEWV and NEAS to ensure there is increased capacity and capability in response to winter surge. For example North Durham CCG is supporting GP practices to open on weekends from October 2013 over the winter period and DDES also plan to open practices on weekends.
7. The local health economy was not identified nationally for funding to support winter planning activities. Both CCGs are however supporting winter through the use of targeted non-recurrent funding to support additional capacity for winter surge in CDDFT and TEWV providers in line with agreed plans.
8. Both CCGs are implementing a series of commissioner visits to the emergency departments. The purpose of the visits is to review the effectiveness of services, quality and safety, patient experience and understanding any system issues. The visits are led by the CCG Directors of Nursing.
9. There are a number of other areas of development that both CCGs are undertaking that support urgent and emergency care:
 - Intermediate care – both CCGs are involved in the service developments that will support the timely discharge of patients and prevent emergency admissions by ensuring that patients have access to consistent intermediate care (short term intervention).
 - GP practice variation – the purpose of practice variation is to use available data and support practices to look critically at variation such as emergency department attendances, emergency admissions and urgent care attendances. This process uses peer review and aims to change referral patterns that ensure patients access the appropriate pathway.
 - Long term conditions – both CCGs are implementing a range of schemes that aim to ensure that patients with long term conditions are managed effectively in their home or in community settings to avoid emergency admissions, for example chronic obstructive pulmonary disease.

Longer Term Urgent Care Planning

10. Both CCGs are currently in the process of either reviewing urgent and emergency care in their geographical area or developing plans for future implementation.
11. DDES CCG are currently undertaking a review of their urgent care arrangements and will be developing plans in the coming months.

12. North Durham CCG has completed its review of urgent and emergency care. The evidence and information collected as part of the review has indicated that a significant number of patients currently accessing urgent care in-hours could be seen in primary care. Similarly around 30 percent of patients currently attending the emergency department in-hours could be seen in primary care. A revised model has been proposed and an outline business case is being finalised along with a service specification. Consultation is planned to commence November 2013 on the outline business case. In summary the key elements of the North Durham model for urgent and emergency care are to improve and develop capacity in existing services:

- Enhance the role, capacity and capability of primary care to enable patients to be seen in-hours within their local community. This includes consideration of a move towards 7 day working.
- Ensure an integrated minor and major pathway in the emergency department providing urgent and emergency care ranging from minor injury to major trauma.
- Ensure effective communication and coordination in the system through effective links with the existing 111 service to primary care and the emergency department.
- Ensure effective unplanned care transport services that are integrated within the model.

13. Within the model outlined above North Durham CCG will be working closely with County Durham and Darlington NHS Foundation Trust and North East Ambulance NHS Foundation Trust to support the on-going improvement of urgent and emergency care services at University Hospital North Durham and Shotley Bridge.

14. DDES CCG has started a similar piece of work reviewing urgent care provision across its area including all urgent care centres and access to GPs outwith the current working hours. This work is due to complete by the end of November 2013. Work is currently concentrating on making better links between the doctors working in the urgent care centre and the patient's own GP as this is felt to be an area that needs urgent improvement. There may be a requirement to consult further with the public if changes are felt to be required to the urgent care centre operating model.

15. Both CCGs are aware of the current national review of urgent care being led by Professor Keith Willett. Early indications from this national review are in line with the proposals being put forward by the CCGs, but the CCGs will adapt plans as further information becomes available.

Recommendations

16. It is recommended that the Health and Wellbeing board:

- Note the content of this report regarding urgent care.

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Background papers: None

Appendix 1

Finance The local health economy was not identified nationally for funding to support winter planning activities. Both CCGs are however supporting winter through the use of targeted non-recurrent funding to support additional capacity for winter surge in CDDFT and TEWV providers in line with agree plans.

Staffing N/A

Risk N/A

Equality and Diversity / Public Sector Equality Duty N/A

Accommodation N/A

Crime and Disorder N/A

Human Rights N/A

Consultation N/A

Procurement N/A

Disability Issues N/A

Legal Implications N/A