

Appendix 1

Integrated Urgent Care Services

Briefing August 2018



Service Delivery Models pre re-design – North Tees

Minor Injuries Unit (NTHFT)	Walk In Centre (Virgin Care)	GP Out of Hours (NDUC)
Access: 24/7. Face to face consultation/treatment for adults and children	Access: 8am-8pm 7 days a week. Nurse led triage and face to face GP or Nurse treatment for adults and children	Access: 5:30pm – 8am 7 days a week. Telephone contact initially, possibly telephone consultation and GP face to face or Home Visiting treatment for adults and children
Locations: Hartlepool One Life	Locations : Tithebarn Stockton and Hartlepool One Life	Locations: Teesdale Business Park Stockton and Hartlepool One Life
Staffing: Nurses, Emergency Practitioners and medical staff review clinics	Staffing : General Practitioners, Nurses (GP Led Service)	Staffing: General Practitioners, Dental Nurses (GP Led Service)
Conditions Treated: Minor injury services such as cuts, lacerations, sprains, strains, minor fractures, bites and stings, infected wounds, minor head injuries and soft tissue injuries	Conditions Treated: Urgent initial treatment of emergency medical conditions, unscheduled care of minor injury and illness such as: superficial cuts, abrasions and bruises, minor burns, insect bites, minor head injuries, muscle and joint injury, strains and sprains, high temperatures, headaches/dizziness, coughs and colds, hay fever, ENT infections, stomach ache/vomiting, rashes,	Conditions Treated: Provision of services so that patients with urgent conditions receive timely care of primary medical advice/care/treatment. Management of calls from 111 including dental triage, cover for GP training sessions, prison service provision
Other: Onward referrals to consultant clinics and physio/therapies teams. Therapies team also review notes and actively follow up patients where required. Receive some ambulance patients where appropriate	Other: Service spec also includes a number of GP enhanced services that are for routine registered GP bookable patients and home visits. These are not part of this new model. Arranges required diagnostic tests and offers onward referral where required	Other: Requirement to provide transport facilities to certain patients where required. From 11pm – 8am, further clinical assessment by a GP is always undertaken over the phone before an appointment is offered Uses Systmone
Requires access to x-ray facilities	Uses Systmone	
Uses A&E IT system and will move to Trackcare in September 2015		
Exclusions: Major Trauma, Rape victims, primary child protection cases, head injuries with RGCS less than 15, major medical emergencies, mental health/self harm, extensive burns	Exclusions: None specified in the contract	Exclusions: None specified in the contract

- 3 Providers
- 3 locations of service delivery
- 3 different times of service access
- Differing access to services based on condition presenting



Service Delivery Models pre re-design - Darlington

GP Access Fund	Urgent Care Centre	GP Out of Hours
Access: Monday to Thursday 6:30pm – 9.00pm Friday 6.30pm – 8.30pm Saturday 8.00am – 2.00pm Sunday: 9:00am – 1.00pm	Access: 24 hour 7 days a week via NHS 111 or walk in. Appropriate advice, information, reassurance and treatment service to patients seeking urgent and immediate help	Access: 6:00pm – 8am 7 days a week. Telephone contact initially via NHS 111, possibly telephone consultation and GP face to face or Home Visiting treatment for adults and children
Location : Dr Piper House	Location: Darlington Memorial Hospital	Location: Darlington Memorial Hospital
Staffing: GPs, Practice nurses and health care assistants (HCA)	Staffing : General Practitioners, Nurses (GP Led Service)	Staffing: General Practitioners, (GP Led Service)

Conditions Treated:

Monday to Friday 1x GP and 1x Nurse/HCA Session Saturday 2 x GP, 1 x Nurse and 1 x HCA Session Sunday 1 x GP, 1 x Nurse/HCA Session Pre-bookable Appointments available 2 weeks in advance, same day appointments as required and 2 GP appointments per session will be reserved for use by UCC / A&E / NHS 111

Other: Community nursing staff are also able to contact the clinic using the mobile telephone number to request advice from clinicians. The GPs in the clinic have full access to the patient's primary care medical record via SystmOne and can liaise with community nursing staff to determine an appropriate management plan to prevent possible UCC or ED attendance.

The intention for the future is to locate alongside UCC and ED to have a single point of access at weekends to fit with the Darlington Vision 2020.

Exclusions: Patients not registered at a GP practice within Darlington

emergency medical conditions, unscheduled care of minor injury and illness such as: superficial cuts. abrasions and bruises, minor burns, infected wounds, minor head injuries, muscle and joint injury, strains and sprains, soft tissue injuries, allergic reactions abdominal pains

Conditions Treated: Urgent initial treatment of

Other:

Uses SystmOne

Exclusions: Patients requiring access to emergency services. Any non-urgent GP primary care routine checks and planned treatment. Patients requiring treatment for injury at the scene of a road traffic or other accident or already in hospital. Women requiring interpartum care

Conditions Treated: Provision of services so that patients with urgent conditions receive timely care of primary medical advice/care/treatment. Management of calls from 111 including telephone based clinical assessment and advice, face to face consultation and treatment

Other: The Provider is responsible for the provision and cost of all transportation of clinicians and service staff to and from patient home visits and other service related scenarios.

Uses SystmOne

Exclusions: Patients requiring access to emergency services. Any non-urgent GP primary care routine checks and planned treatment. Patients requiring treatment for injury at the scene of a road traffic or other accident or already in hospital. Women requiring interpartum care

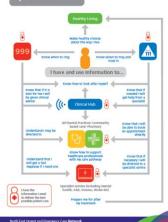
- 2 Providers
- 2 locations of service delivery
- 2 different times of service access
- Differing access to services based on condition presenting



Vision

GP led urgent care service provision 24 hours a day, 7 days a week, 365 days a year providing:-

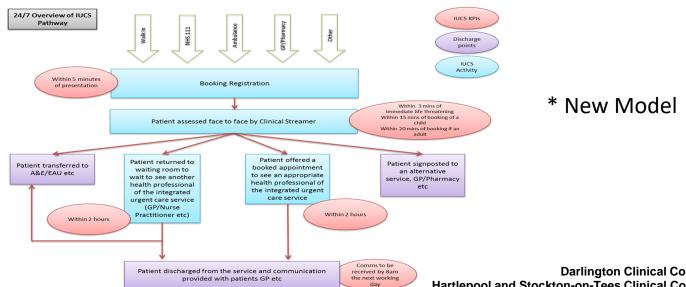
- Walk in and bookable appointments for
 - clinical assessment
 - face to face consultation
 - home visiting
 - prison visiting services
- Timely assessment and referral to appropriate mental health services
- Diagnostics and referrals





Implementation

- HaST Model implemented April 2017
- Darlington Model implemented April 2018
 - Staged approach to change across Darlington
 - Learning from success across HaST





Impact

- 111 increased usage 'talk before you walk'
- Reduction in A&E attendances
- Improved performance in waiting times
- Improved patient experience
- Service shortlisted for the Excellence in Urgent and Emergency Care Award (HaST)



GP RECRUITMENT



^{*}The following slides outline GP numbers however it must be recognised that there are differing models of staffing within primary care that deliver primary care services in practice i.e. nurse practitioners, pharmacists, healthcare assistants

Staffing Levels

Current GP Staffing

AGE GROUP	Number of GPs [Head count] Darlington	Number of FTE GPs	Number of GPs [Head count] HAST	Number of FTE GPs
<45	31		72	
45 – 55	33		61	
56 – 60	3		16	
61 – 66	6		4	
>67	1		7	
TOTAL	74	53.3	160	127.5



Average No of Patients per GP

CCG	AVERAGE Number OF PATIENTS PER GP [Head Count]	NORTH EAST AVERAGE
Darlington	1,865	1,414
Hartlepool and Stockton- on-Tees	1,741	
CCG	AVERAGE Number OF PATIENTS PER GP [FTE]	NORTH EAST AVERAGE
CCG Darlington	PATIENTS PER GP	



Eligibility to Retire in Next 10 Years

	NO 55+ [FTE]	NO 55+ [Head count]
Darlington	9.25	10
Hartlepool and Stockton-on-Tees	23.15	27



GP Vacancies

CCG	Vacancies
Darlington	3
Hartlepool and Stockton- on-Tees	Hartlepool – 2 Stockton – 3



International GP Recruitment Programme (IGPR)

- National NHSE programme
- Darlington and HaST CCGs part of the CNE scheme;
- Objective to recruit 100+ GPs across the region;
- Recruitment Agencies are working regionally across the country;
- ID Medical appointed by NHSE working across the North East, Greater Manchester, Cheshire and Merseyside

IGPR - Progress to date

- Recruitment commenced in May this year
 - 93 applications,
 - 23 shortlisted,
 - 11 expressed interest in North East, of which
 - 2 progressed to 1st stage interview and both progressed to 2nd stage [September 2018]
 - 3 awaiting clarification around English language assessment,
 - 6 have language exam dates booked



Next Steps

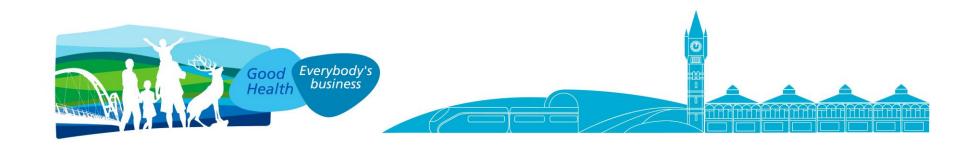
- Recruitment Events commencing September in a number of countries including:-
 - Bulgaria, Romania, Poland, Lithuania, Latvia,
 Portugal, Hungary, Croatia, Germany, Greece, Spain,
 Italy and Holland
- Majority of applications to date received from Romania, Portugal, Bulgaria and Spain





Financial Allocation

Briefing August 2018



- The government has recently announced that an additional £20 billion in real terms will be made available for the NHS in England by 2023/24, though it's unclear how much money will be spent on health overall.
- The £20 billion of additional funding for the NHS in England will be spread out over the five years to 2023/24. This means an average increase on the NHS's budget of around 3.4% a year, taking inflation into account.
- However it is important to note that although this represents a larger increase in funding for the NHS than we have seen in the last 8 years, it remains below historical average growth in UK health spending.
- The CCGs have not yet received any indication from NHS England as to how the new NHS funding will be distributed across the NHS system.
- The CCGs are unclear until further announcements if there is any expectation of additional commitments to be delivered from the allocation.
- Once the CCGs have received clarity planning will be undertaken in line with our annual planning cycle as is reported to Health and Wellbeing Boards.

