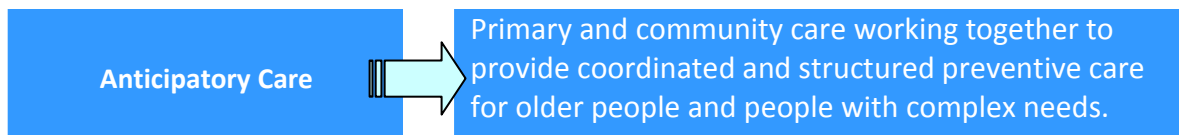


Update for HWOSC – September 2013

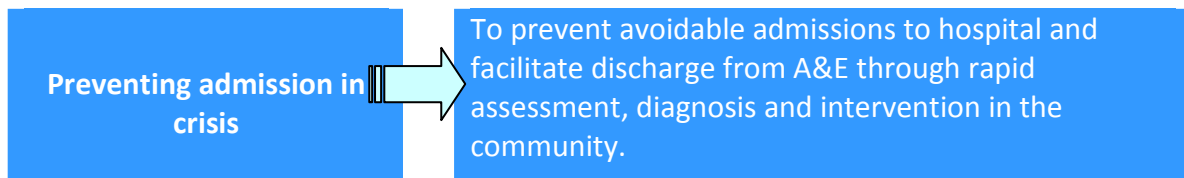
The purpose of this paper is to provide an update to the HWOSC regarding work currently underway to support improvements in the local urgent care system. In particular, it describes progress in the work streams delivered by the wider system partners and is intended to be complimentary to the update provided by BSUH.

The wider system work streams focus on 4 key areas:

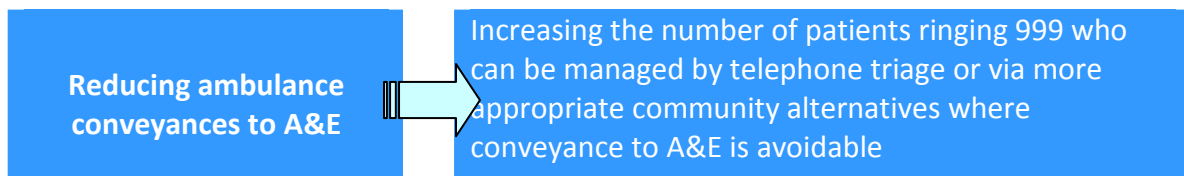


- The Integrated Primary Care Teams (IPCTs) which provide care for older people and those with long term conditions within the city will soon have dedicated social workers working across the three localities.
- Mental health nurses are also being recruited to work with IPCTs in the west locality and central Brighton.
- GP practices are now having regular meetings with their IPCTs using a computer based risk stratification tool to review their top 10% of patients who are at the highest risk of admission to hospital
- A plan has now been agreed with Sussex Community Trust and Sussex Partnership Trust to upload care plans for patients with dementia, nearing end of life, with continence issues or on the caseload of the IPCTs onto a computer system known as IBIS. This enables the ambulance service to see and support their care plans should they phone 999.

Appendix Two

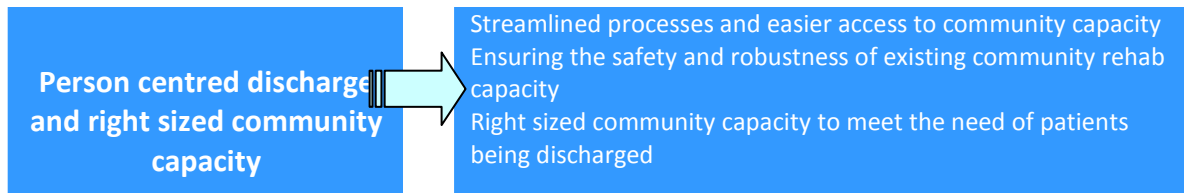


- More people are using community services that prevent admission e.g. Community Rapid Response Service (CRRS) and Rapid Access Clinic for Older People and we **will** create additional capacity in both services over the winter period
- Recruitment has started for the additional staff to enable the CRRS team to look after people who need intravenous therapy or catheter care.
- We will be piloting new services aligned to Integrated Primary Care Teams across the city to prevent avoidable admissions in specific patient groups including:
 - Coordinated support for patients in care homes
 - In-reach nursing to hostels.



- The number of patients being managed by telephone triage e.g. hear and treat are above expected levels at 12%
- Overall ambulance service activity in Brighton and Hove is lower than the same time last year however more patients than expected are still being conveyed to hospital
- We are working with SECAMB on a supported conveyance pilot which provides ambulance crews with advice and support to help them use community services as an alternative to A&E.
- The local NHS 111 service was passed by NHS England for full 'go live' on the 13th August 2013. The two main performance targets, calls answered within 60 seconds and abandoned calls, are being met on a daily basis. Both the Sussex and Brighton and Hove CCG NHS 111 clinical governance groups continue to monitor provider performance and clinical risks, healthcare professional and patient feedback

Appendix Two



- The number of patients whose discharge is delayed from BSUH remains very low (currently 4 patients) and the main reason for delay seems to be patients waiting for long term care home placements.
- A team of clinicians are about to undertake an audit of need for patients either waiting to go into or already in our community rehabilitation beds. The outputs of this audit will inform the future size and scope of bed based rehabilitation services within the city and ensures we have the right mix of services available in time for winter.
- A task and finish group has been set up to streamline access to and from bed based services.
- We have seen an increased number of patients going home with support rather than to bed based rehabilitation. There are currently no patients waiting to go to a community rehabilitation bed.
- Knoll House, one of sites from which community rehabilitation beds are delivered, remains partially closed but an improvement plan is well underway and the beds are likely to reopen at the end of August

The Urgent Care Clinical Forum led by the CCG Chair Dr Xavier Nalletamby and the Chief of Clinical Leadership, Dr Naz Khan has met again and discussions focused on how we can work together to improve urgent care services for **frail and** older people. The forum identified a number of key areas to prioritise over the winter period.

We are also working with key stakeholders in the system to develop a robust plan for the forthcoming winter which will include extra resource in key services including primary care and an escalation plan to more effectively manage peaks in demand.

The CCG is planning a comprehensive communications campaign around urgent care services informed by our learning from the recent public engagement event and the findings of the Healthwatch review of A&E. This will include a mobile phone app for the public on how to access urgent care services locally.

