
Health Scrutiny Committee – 19th November, 2015 - Dudley Clinical Commissioning

Group - Report of the Chief Accountable Officer, Paul Maubach

Update on Dudley Urgent Care Centre

1.0 Purpose of Report

Dudley Urgent Care Centre (UCC) became operational on 1st April 2015. The service is provided by Malling Health Ltd. This report provides an overview for Dudley Health Overview and Scrutiny Committee on current activity, performance and future developments of UCC since it became fully operational ten months ago.

2.0 Background

In April 2015 Dudley CCG commissioned a new model of urgent and emergency care for Dudley patients. This entailed closing the Walk-in-Centre at Holly Hall Clinic and commissioning a new 24 hours a day, 7 days a week UCC within Russells Hall Hospital. The UCC has now been operational for ten months and it is agreed between lead clinicians of Dudley CCG and Dudley Group NHS Foundation Trust (DGNHSFT) that the overall clinical model has been a success. Emergency Department (ED) clinicians agree that the streaming is working appropriately and the right patients are being seen in the Emergency Department. DGNHSFT has consistently achieved the national 4 hour emergency care wait target since February 2015, which coincides with the pilot opening of the UCC. The Trust has also remained in the top 3 performers in England for this important emergency target year to date since 1st April 2015. In 2014/15 DGNHSFT was ranked 109th. Finally, Dudley UCC is now being held as a best case example regionally and nationally with CCG and Trust delegates being asked to speak at regional and national events on the model. The UCC is also currently participating in a detailed research project by Health Education West Midlands into best case examples of Urban UCC's.

3.0 Report

UCC activity

The latest activity data for the UCC (1st April – 31st September 2015) show that over **51,900** patients have been seen by Malling Health streaming clinicians within the UCC. Of this total, **27,900** were streamed by the reception nurses to the Emergency Department and **23,500** were directed to the UCC for primary care assessment and treatment. Also provided by the UCC during this period have been nearly **1500** out-of-GP hours home visits and **5500** GP telephone consultations with patients. There have been just **3** four hour wait breaches within the UCC 1st April 2015 to date.

UCC Performance

Malling Health and UCC performance are managed through monthly CCG contract review meetings. To date, the provider has shown clear competence in delivering the service and Key Performance indicators are being met. Patient complaints received by the CCG on the UCC have also been very low (less than 1 per 1000). The UCC continues to be refined and developed through a monthly Governance Steering Group which includes representation from the CCG, DGNHSFT, Malling Health, West Midlands Ambulance Service, NHS 111 and Healthwatch.

It is also recognised that the UCC has contributed significantly to the very strong performance of Russells Hall Hospital in regards to their 4 hour emergency care wait target. In England, Russells Hall is currently the leading hospital provider for this important performance target (week ending 30th October 2015). This being particularly significant as just over a year ago they were near bottom of the national ranking table.

As graph 1. below confirms, 2015/16 Winter predictions by DGNHSFT suggest that the Trust will continue to achieve the 4hr target throughout the winter with the UCC in operation.

Graph 1.

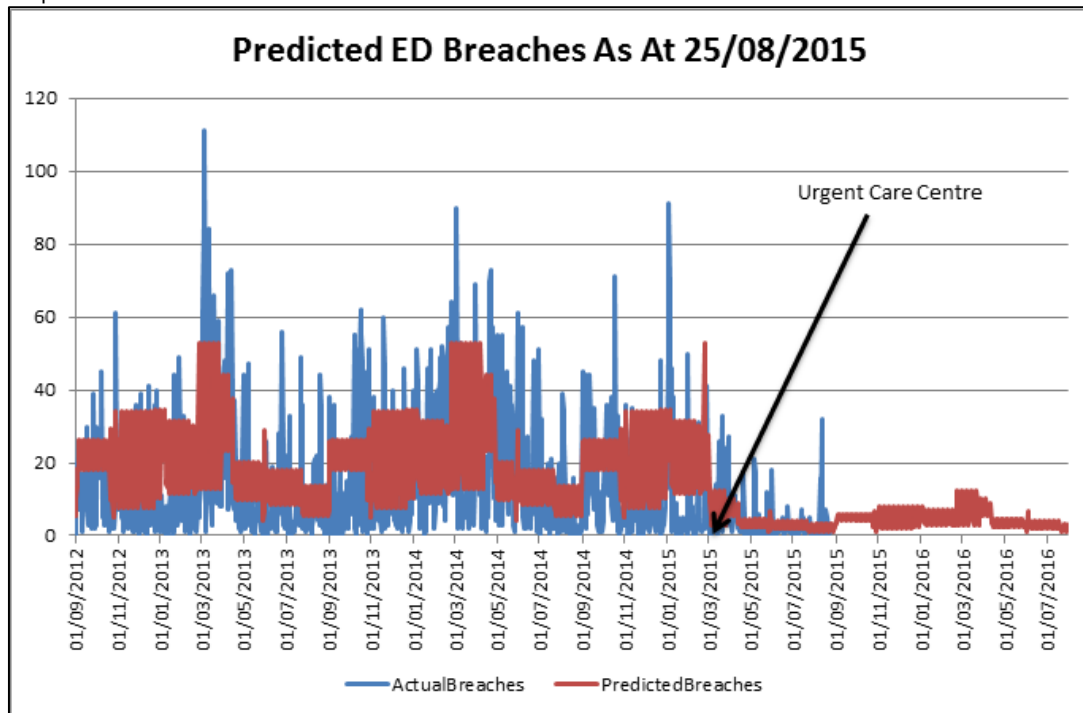


Table 1. below gives a breakdown of the top 20 presenting complaints seen in the UCC during April – October 2015. It is clear that the UCC is successfully streaming primary care and minor cases away from the ED and has also reduced overall activity within the emergency patient pathway by **10%**.

Table 1.

Presenting complaint	% of Activity
Sore Throat	12%
Rash	8%
Abdominal Pain	6%
Cough	6%
Uti/urinary symptoms	8%
Back Pain	4%
Chesty Cough	3%
Ear Pain	3%
Insect Bite	3%
Abdominal Pain	2%
Diarrhoea	2%
Fever	2%
Chest Infection	2%
Vomiting	2%
Chest pain	2%
D&V	2%
Knee Pain	2%
Medication Request	2%
Earache	1%
Headache	1%

UCC areas for development

As the Committee will recall, the initial plan was for the UCC to operate from a new modular building solution adjacent to Russells Hall Hospital ED. It became clear however following assurance work undertaken by Capita Ltd throughout Q3 2014/15 that the premises solution for the UCC would not be ready for April 1st 2015 and exceed initial costs assumptions.

Throughout Q4 2014/15 the CCG, Malling Health and the Trust worked together to identify an interim premises solution which would allow the UCC to become operational from 1st April 2015. As a result an interim UCC premises solution was designed and established by allowing the UCC primary care staff to be located in two areas of the outpatient department within Russells Hall Hospital. Whilst the interim solution allowed the UCC service to open 1st April 2015 and the majority of the service specification to be delivered, several significant compromises on the full service offer had to be made:

1. The first being that the interim solution delivers the streaming system for ambulatory patients (those walking into ED), but not the ambulance conveyed patients. Streaming ambulance conveyed patients for minor and primary care treatable cases will provide the optimum benefits set out in the UCC service specification and further reduce pressure on ED staff.
2. Secondly, the UCC streamers are being accommodated in an ED reception desk and waiting area which was not designed or intended for the number of staff it currently must accommodate. The current configuration is also very poor in regards to patient access and confidentiality.
3. Thirdly, in August 2015 the UCC provider undertook a review of the interim premises it currently occupies. Whilst Malling Health acknowledge that the interim solution is operationally and clinically safe, they confirmed that the current premises constraints are compromising the UCC's full potential, limit its service delivery and provide capacity challenges at peak times (weekends especially).
4. Finally the interim premises solution does not deliver the full extent of public and political expectations on the new UCC service.

Throughout September and October 2015 the CCG has been working closely with Malling Health, Acute Trust clinical and operational leads, Summit Health Ltd (the PFI landlord of Russells Hall Hospital) and architects Seymour Harris to complete a feasibility study into the potential options available to meet the operational and patient experience challenges outlined above. This work has culminated in a feasibility study and recommendations which will be considered in a paper at the private session of Dudley CCG Governing Body meeting on the 12th November.

The feasibility development outlined above has also been underpinned by a recent and extensive patient audit undertaken by Health Watch. Dudley Healthwatch have been key partners in the design of the UCC from its earliest development. As part of their on-going support for the UCC, in July 2015 Healthwatch offered to undertake an extensive patient audit of the UCC service provision. From 20th to 26th of July 2015, Healthwatch volunteers carried out morning, afternoon and evening time slots over a 24 hour period to obtain a detailed view of people's experiences of using the UCC. The focus was on listening to people and understanding their journeys whilst using urgent and emergency care at Russells Hall Hospital. In total 170 people shared their views through the questionnaire survey that sought information on the hospital environment, interactions with staff, and patient streaming. The results of the survey have been used throughout the feasibility study process.

4.0 Recommendations

Members are asked to note the contents of the report. The key findings of which are as follows:

- The UCC operational model is working well and is regarded regionally and nationally as a model of best practice.
- The performance of DGNHSFT against the ED 4 hour wait continues to be above the national target and nationally the Trust is one of the best performers in England throughout 2015.
- The current interim UCC accommodation is adequate, but there are areas in which it needs to improve. The current premises solution stops the UCC from achieving its full potential and as the Healthwatch audit confirms, does included compromises in patient experience.
- On the 12th November Dudley CCG Governing body will consider feasibility study findings on developing a new and permanent premises solution for the UCC which will meet the recommendations of the Healthwatch survey and help the UCC to realise its full potential.