

MEETING OF THE KIRKLEES HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL – 12 FEBRUARY 2019				
AMBULATORY EMERGENCY CARE (AEC) AT DEWSBURY DISTRICT HOSPITAL (DDH)				
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Purpose (Highlight)	Approval	Decision	Assurance and Information	
			To Review and Discuss	To receive
Action Required	To receive and discuss			
Does this paper mitigate risk included in the Trust Risk Registers? <i>please outline</i>	N/A			
Resource implications	Consultant and Advanced Nurse Practitioners			
Legal and Equality and Diversity implications	None			
Trust Strategy	Keep our patients safe at all times			x
	Provide excellent patient experience and deliver expected outcomes			x
	Be an excellent employer			x
	Be a well-led and governed Trust with sound finances			x
	Have effective partnerships that support better patient care			x
	Provide excellent Research, Development and Innovation Opportunities.			x

AMBULATORY EMERGENCY CARE AT MID YORKSHIRE HOSPITALS TRUST

1. PURPOSE OF REPORT

This paper provides the Kirklees Health and Adult Social Care Scrutiny Panel with an updated SitREP on Ambulatory Emergency Care (AEC) services being provided at Mid Yorkshire Hospitals Trust. It is intended to be a follow-up paper to that discussed at the Committee in September 2018.

2. BACKGROUND

AEC is same day emergency care, offering patients easy access to diagnostic tests, consultants and staff. The service is designed to see and treat patients in a day-case setting avoiding the need of admission to an inpatient bed. The service offered at Mid Yorkshire Hospitals is consultant-led, supported by Advanced Nurse Practitioners (ANP).

The original paper presented to the Panel in late September 2018 outlined a number of challenges being faced in delivering safe AEC services across two Hospital sites – Dewsbury and District Hospitals and Pinderfields Hospital. These challenges included a high vacancy rate within the service. Although this is being mitigated through the use of locum consultants and other staff, it makes the service highly unreliable for referrers, staff and patients.

There is a recognised shortage of Acute Physicians and currently with an establishment of 9.5 WTE Consultants, the Trust is reporting 4.0 WTE vacant posts. These are currently covered by locum consultants. Throughout the last 12-18 months, the Trust has seen a high turnover in its ANP workforce. There is an ongoing recruitment campaign however new appointments are considerably more junior (with the majority of staff still in training). The Department is funded for 16.25 WTE. 5.92 WTE posts are currently vacant.

In view of the challenges described above, with the benefit of advice from the clinical body, the Trust made a recommendation to centralise its resources onto the Pinderfields site with the primary aim of maintaining a safe and reliable service for all patients attending Mid Yorkshire Hospitals. Alternative options were considered as part of this original appraisal.

ASSESSMENT

The section below provides a performance, safety and quality overview of the service at present.

Activity and Performance

Despite the centralisation, access for patients to the service remains the same. Over 75% of North Kirklees patients accessing AEC do this via their General Practitioner (GP) through direct contact with the service. Patients are offered an appointment at a convenient time and where appropriate, tests organised on the same day providing patients with a one-stop-shop experience. The

centralised service is open 12 hours per day, seven days a week providing patients with a wider range of access options.

There has been a reduction in the number of calls in to the operations centre at Mid Yorkshire Hospital in recent months. November and December 2018 shows a reduction in calls made by North Kirklees GPs to the Acute Medicine Service over the last 12 months. The table below provides a monthly breakdown of the number calls¹ made which amounts to approximately 5 patients per day.

Month (2018)	NK GP calls
Jan	154
Feb	153
Mar	162
Apr	157
May	158
Jun	136
Jul	175
Aug	140
Sep	155
Oct	155
Nov	123
Dec	119

Fig. 1 – Monthly calls from NK GPs to AEC

Outcomes for patients

Throughout the last 12 months, the Division of Medicine has invested heavily in the frailty pathway at Dewsbury Hospital. Patients are now able to directly access the frailty unit bypassing the Emergency Department through collaborative work undertaken with the Yorkshire Ambulance Service (YAS). Frail patients attending Dewsbury Hospital Emergency Department will therefore not need to travel between sites to access the centralised AEC service and will continue to benefit from an enhanced local service.

¹ The reduction noted in December 2018 is consistent with an overall reduction in GP calls made to the service throughout this month.

Complaints and experience measures from patients, GPs and staff

We continue to monitor the quality aspects of the centralisation and we have received no complaints from patients, there are no quality concerns regarding the service being provided.

Since the centralisation of AEC in August 2018 there have been no complaints received.

Workforce

The challenges described in the earlier section of this paper remain. Recruitment remains a high priority for the service. To support this, there is a rolling advert for the recruitment of Physicians. The service also works closely with the Yorkshire Deanery with the aim of retaining talent and appointing doctors training locally once they have completed their training.

2.0 WTE consultant appointments have been made in the last 12 months however the Department continues to carry significant vacancies and heavily reliant on Agency consultants.

We have successfully appointed 3 trainee ANPs as of January 2019, however this still leaves vacancies within the team. A workforce training plan has been developed and it will take approximately 36 months to train the new ANPs to a level where they can work unsupervised.

Transport

The Quality Impact Assessment (QIA) completed to support the proposal for centralisation, identified that a number of patients would be required to travel between Hospital sites if they are referred to AEC from the Emergency Department at Dewsbury. Patients are able to access the free Trust shuttle service to travel between sites.

We have received no complaints with regards this.

3. CONCLUSION

- 3.1 In view of the remaining staffing challenges, a centralised model continues to offer a safer and more resilient service for all patients needing to access the service at this time.
- 3.2 North Kirklees patients needing AEC services remain able to access the service benefitting from longer opening hours and access at weekends on the Pinderfields site.
- 3.3 There does appear to have been a reduction in the number of patients accessing the service from our region, which includes GP referrals from North Kirklees and this reduction is being monitored weekly. We continue to encourage all GPs to refer patients via the Ops Centre.

3.5 There have been no complaints from GPs, patients or transport services.

4. RECOMMENDATIONS

In view of the continued workforce challenges, which are unlikely to resolve over the short term, the recommendation is to maintain a centralised service model with a further review in 6 months.

Linzi Jo Thackeray
Deputy Director of Operations
31 January 2019

APPENDICES

Scrutiny panel paper dated 09 October 2018