

Urgent care



BNSSG Urgent & Emergency Care Strategy

Vision	Themes	Objectives	Projects/Deliverables	5YFV	Outcomes
<p>"I needed help, I called a service and they helped me to where I needed to go. No waiting, no having to repeat history – someone helped me first time."</p> <p>Ambition – 2023</p> <p>By prioritising self-care, strong integrated services in the community and by targeting prevention services at those who need us most, we have much lower demand for urgent care or emergency admissions.</p> <p>We waste no time getting patients the right urgent and emergency care service to meet their needs – it is so simple, for patients, carers and staff.</p> <p>We are one system, joined up to offer the right treatment or solutions based on a full understanding of a patient's circumstances – a system where patients never have to tell their story twice, where they are safe.</p>	<p>Integration</p> <ul style="list-style-type: none"> Integrate primary, community, social and voluntary sector at a local level. Integrate commissioning to enable patient-centred planning. Universal access to health records 	<ul style="list-style-type: none"> Integrated Locality teams Extended access to GP appointments Commissioning plan to support closer integration of services Connecting Care/shared systems 	<ul style="list-style-type: none"> GPs 	<ul style="list-style-type: none"> Improve Health outcomes 	
	<p>Targeted Prevention</p> <ul style="list-style-type: none"> Deliberately design and target services for populations most likely to need urgent care. 	<ul style="list-style-type: none"> Population segmentation RESPECT pre-deterioration plans Multi-agency high impact user case workers Targeted urgent care services, e.g. homeless, children's step-up care 		<ul style="list-style-type: none"> Reduce demands form target groups 	
	<p>Simplification</p> <ul style="list-style-type: none"> Make our system easy to access. Offer common assessment at all 111 Online service access points. Make it easier to access diagnostics and advice out of admitted settings. 	<ul style="list-style-type: none"> Integrated Urgent Care/Clinical Assessment Service for 111 111 online service Common assessment at every entry point (linked with Clinical Streaming and 111 Directory of Services) Ambulance Response Programme Services to support reduced conveyance 	<ul style="list-style-type: none"> NHS 111 online NHS 111 calls Ambulances 	<ul style="list-style-type: none"> Shorten end to end journeys Deliver constitutional standards 	
	<p>Consistency</p> <ul style="list-style-type: none"> Standardise urgent care services – MIU/MIC/UCC Reduce our reliance on beds – acute beds for acute need. Protect A&E for accidents and emergencies. 	<ul style="list-style-type: none"> Commissioning plan for UTCs (aligned with Locality Hubs plan) Develop directory of services Shared assessment/ diagnostic function aligned with Ambulatory Care offer/Frailty assessment, etc. Improved digital capabilities to link up professionals and services with patients – eg Apps 	<ul style="list-style-type: none"> Urgent treatment centres Hospitals 	<ul style="list-style-type: none"> Manage without a budget Reduce occupied bed days 	



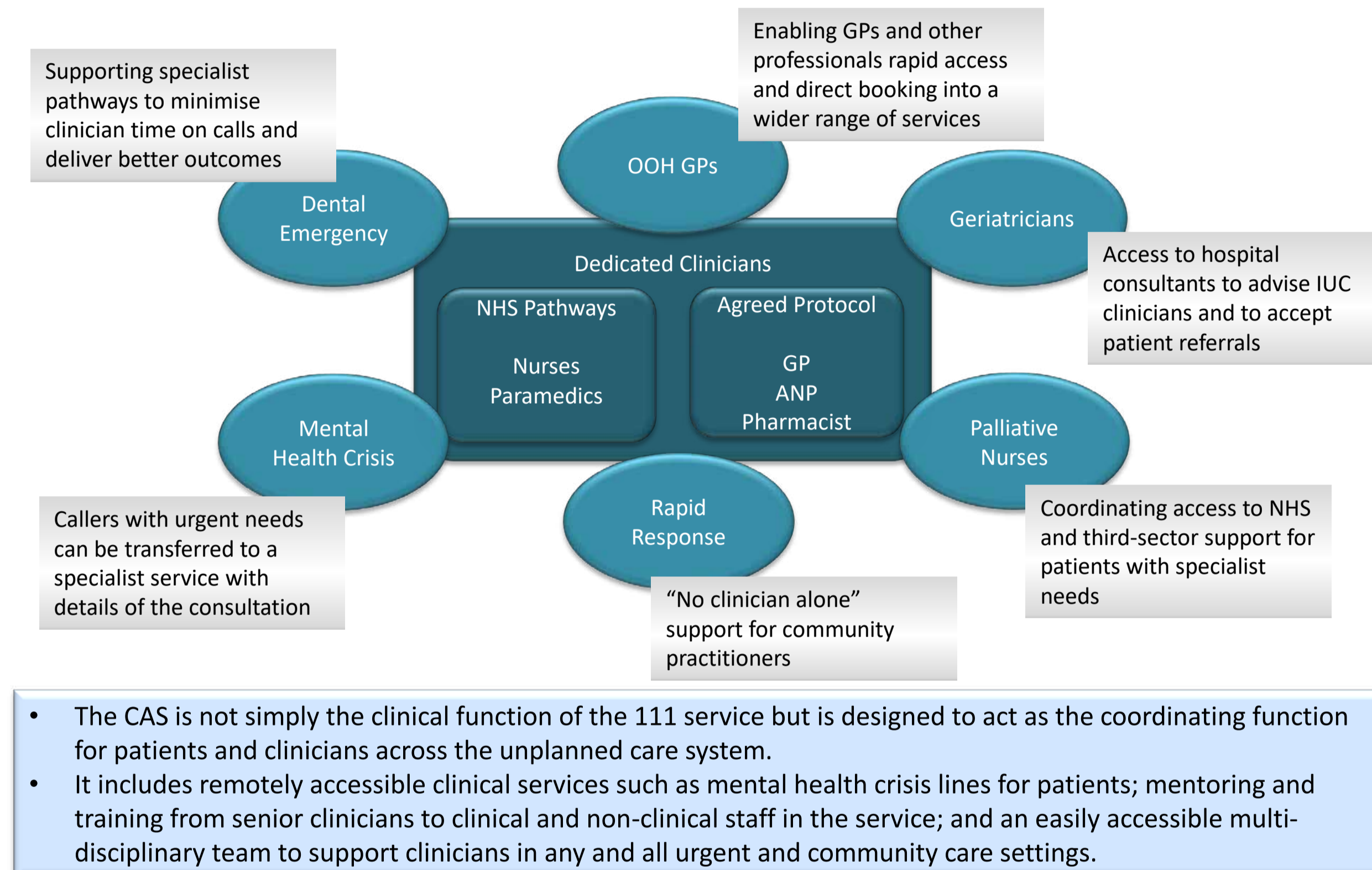
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Our achievements to realise the vision:

- We have asked patients and the public to tell us what is important to them in urgent and emergency care provision – in addition to 201 direct contacts about the strategy itself, we have reviewed 31,730 other pieces of patient and public feedback relevant to urgent and emergency care to help us focus on what matters to users
- We have specified and procured a provider for a new, improved NHS 111 Service in Bristol, North Somerset and South Gloucestershire
- Clinicians in our system have already been recognised nationally for their ground-breaking work to keep patients safe – initially in busy A&E departments – with the transfer of National Early Warning Scores (NEWS) between all settings of care that help identify deteriorating patients
- South Western Ambulance NHS Foundation Trust was the first ambulance service to trial the new national Ambulance Response Programme (ARP) standards. Since SWASFT started the trial more than a year ago it has seen improvements in productivity and efficiency with less vehicles being sent, on average, to each incident, freeing up resources to attend more patients.
- Urgent and Emergency Care in BNSSG was the test-bed for the Connecting Care programme, which now enables over 3,500 registered clinicians to access 17,500 patient records per month – providing instant access to clinical information crucial to rapid decision making in an emergency.
- We are developing and implementing a system-wide pathway for the diagnosis and management of pyelonephritis

IUC Clinical Assessment Service (CAS)



Quotes for Connecting Care:

"I would just like to say how incredibly useful Connecting Care is proving to be... it represents a quantum leap for out of hours." Clinicians, practitioners and pharmacists involved in stage one"

"It was amazing having this resource over the long weekend. I was able to access information about a patient's usual insulin regime when she was severely unwell and not able to communicate with us". Joanna Latimer, Pharmacist, North Bristol Trust



Quotes from attendees at the strategy development half-day:

"It's really exciting to be involved in shaping change and it is so important to listen to views from those who have been directly involved in experiencing problems/difficulties"

"The activities were interesting and kept everyone engaged and the event facilitation was great"



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