

Urgent Care Strategy Delivery Update

Report of the Chief Officer Sunderland CCG

1. Purpose of Report

- 1.1 The purpose of this report is to update Sunderland Health and Wellbeing Scrutiny Committee (OSC) on the progress of the delivery of the Urgent Care (UC) strategy/reform program in Sunderland.

2. Urgent Care Delivery Update

Recovery at Home (RaH) Service

- 2.1 From November 2018 the RaH service continue to provide a 24/7 Nurse and GP home visiting service across the city with no significant issues reported. This service continues to provide patient care in their own homes avoiding hospital admission.

Sunderland Extended Access Service (SEAS)

- 2.2 The full SEAS model has been in place from 1 August 2019 with the addition of minor injury provision within Houghton and Washington sites. Fortnightly service monitoring is in place reporting no significant issues with service delivery.
- 2.3 The service continues to work with local practices across the city to ensure a consistent offer of extended access appointments are provided by practices to patients, as well as the 111 service.
- 2.4 Service reviews are planned between October 2019 and March 2020 to review utilisation across the five hubs including minor injuries. The service is currently reporting low utilisation rates on Saturday and Sundays (mainly Sundays) with low levels of minor injury activity with one patient per day reported across both Houghton and Washington sites. Further clarification of the range of injuries within this reported figure is currently being sought i.e. bite, sting, strain or sprain.

Urgent Care Centre Configuration

- 2.5 Houghton and Washington Urgent Care Centres (UCCs) were safely and successfully changed in line with our Urgent Care Strategy on 1 August 2019. Bunny Hill currently continues to deliver the existing service with no significant issues. A demobilisation plan is in place for the end of November 2019.

Urgent Treatment Centre (UTC) Implementation

- 2.6 The Pallion building and car park works have been completed with a significant improvement identified within car park facilities i.e. more availability of spaces for patients. Although there have been some teething issues with the car park system in place, this is becoming less and less as the parking system embeds.
- 2.7 A public 'walk around' took place on 24 September 2019 with positive feedback regarding the amends made to the building as follows:

- Waiting area is much improved (more space), especially with regards to the separate paediatric waiting area;
 - Assessment and treatment rooms are a good size, well equipped and provide enough space for patients, including those with wheelchairs.
- 2.8 There were recommendations relating to the following and will be addressed by the UTC service:
- External signage (pictorial as well as written);
 - Dementia friendly aspects i.e. carpet colours;
 - More guide rails within the waiting area;
 - Processes for wheelchair access to the building when patients arrive alone.
- 2.9 In line with implementation of the Urgent Care Strategy the change of our system of Bunny Hill UCC and SEAS moving in, as well as the mobilisation of the UTC model at Pallion is on track for implementation for 1 December 2019.

System Minor Injury and Illness Activity

- 2.10 Following the change of Houghton and Washington UCCs, weekly activity reviews have been in place to monitor patient flow across the city. Activity to date, as of 17 October 2019, has seen a reduction of minor illness and injury by 22% and is on trajectory to deliver the predicted activity modelling identified within the Urgent Care Strategy business case (50%) upon closure of the Bunny Hill service.

3. Next Steps for Urgent Care Transformation

- 3.1 Upon delivery of the UTC model on 1 December 2019 at Pallion, the All Together Better (ATB) Alliance via Program Four (Urgent and Intermediate Care) will work to continuously improve the urgent and emergency care system across the city.

4. Recommendation

- 4.1 That the Health and Wellbeing Scrutiny Committee notes the update provided within the report and highlight any key areas for consideration within the final stages of the delivery of the Urgent Care strategy.

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