

# Out of hour's health care provision: Report for Amesbury Area Board

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## **OUT OF HOURS HEALTH CARE PROVISION: REPORT FOR THE AMESBURY AREA BOARD**

### **1 EXECUTIVE SUMMARY**

- 1.1 This report has been produced in response to the Amesbury Area board request on for an update on Out of Hours Care in Amesbury and the surrounding villages. In particular the area has board have expressed the feeling that at present “there is very little provision, the nearest walk in centre providing Out of Hours Care being in Salisbury. For the sick, elderly, vulnerable or the financially disadvantaged this can be very difficult”.
- 1.2 This report will cover the current out of hour’s health care services that are provided, how they are accessed and also the current levels of activity in each of the service providers.

### **2 BACKGROUND**

- 2.1 Traditional out of hour’s provision within primary care services is classified between the hours of 18:30 to 08:00 Monday to Friday, weekends and bank holidays. It should be noted that some GP practices do offer extended access provision outside these hours to their registered patients, and for the whole population of Wiltshire there has been an ‘improved access’ service from the 1<sup>st</sup> October 2018 which is accessible for all patients to access a routine GP appointment, seven days a week but not necessarily at their own individual practice.
- 2.2 For the purpose of this report however, the focus will be on out of hour’s service provision and the providers that delivery the service in Wiltshire and particularly for Amesbury and the surrounding villages. Access to primary care out of hours is either through NHS 111 or patients self-presenting at Walk in Centres or Minor Injury units.

### **3 INTEGRATED URGENT CARE (NHS 111, CLINICAL ASSESSMENT SERVICE AND OUT OF HOURS)**

- 3.1 Since 2013 access to an out of hours GP service has been through the NHS 111 service, with patients dialling the 111 telephone number and healthcare advisors triaging patient calls using NHS pathways to identify the most appropriate health service and timeframe to meet the patient’s healthcare need. If the patient needed to see a GP, then the 111 provider would transfer the case to the local out of hour’s service for the patient to be seen. The out of hours service would contact the patient and arranged for the patient to either been seen as a face to face appointment within 1,2 or 6 hours based on urgency or as a home visit.
- 3.2 From 1<sup>st</sup> May 2018, the Integrated Urgent Care (IUC) service has been delivered in Wiltshire by Medvivo group ltd. Wiltshire CCG Commissioned the service from Medvivo to:

“to deliver a more functionally Integrated Urgent Care Access, Treatment and Clinical Advice Service model by aligning existing service specifications for NHS 111 and the GP OOH service, in line with the national direction. It is not simply the bolting together of existing services (NHS 111 and GP out of Hours) but in fact the introduction of a new, functionally integrated service that includes a new clinical advice element: the clinical hub. This model will offer service users who require it access to a wide range of clinicians, both experienced generalists and specialists. It will also offer advice to health professionals in the community, such as paramedics and emergency technicians, so that no decision needs to be taken in isolation. The clinicians in the hub will be supported by the availability of clinical records such as Special Notes, Summary Care Record (SCR) as well as locally available systems; and co-ordination of health and social care resources, OOH, community and social care beds, palliative care, acute trust liaison, and Health Care Professionals”

3.3 The Integrated Urgent Care service is a 24/7, 365 day service, with the out of hours primary care service operating for face to face or home visit appointments operating in the traditional out of hours service.

### 3.4 Early Exit Pathways

3.4.1 The new IUC service recognises that for patients over the age of 80, undergoing a full NHS Pathway assessment is not in the best interest for the patients and speaking directly to a clinician within the Clinical assessment service (CAS) is more beneficial.

3.4.2 Therefore once the service started, an early exit pathway was created for patients over the age of 80 which means that patients dialling 111 will undergo an initial risk assessment as part of the NHS pathways module zero which rules out life threatening/ emergency conditions e.g. Heart attack or Stroke, before being transferred to a clinician to discuss their urgent complaint further and reach the most appropriate outcome.

3.4.3 The new service has also built in a bespoke pathway for patients aged 5 and under. Following the NHS 111 health care advisor triage, if the outcome is that the patient needs to speak to a clinician the parent or carer will be offered a face to face appointment with a clinician to save the need to speak to a clinician before booking an appointment.

### 3.5 Palliative Patients

3.5.1 Prior to the start of the new IUC contract, any palliative patients that were likely to need out of hours support would have been given a contact number (either by their GP practice, community team or palliative nursing team) to directly contact the GP out of hours service to avoid calling NHS 111 and going through an NHS pathways assessment.

3.5.2 Wiltshire CCG wanted palliative patients to still have access to the same support as part of the IUC service and Medvivo have continued to provide this service to patients.

3.5.3 Medvivo work closely with the hospices and the palliative teams to ensure patients are supported with the most appropriate care during the out of hour's period.

### 3.6 Healthcare professional access to the IUC service

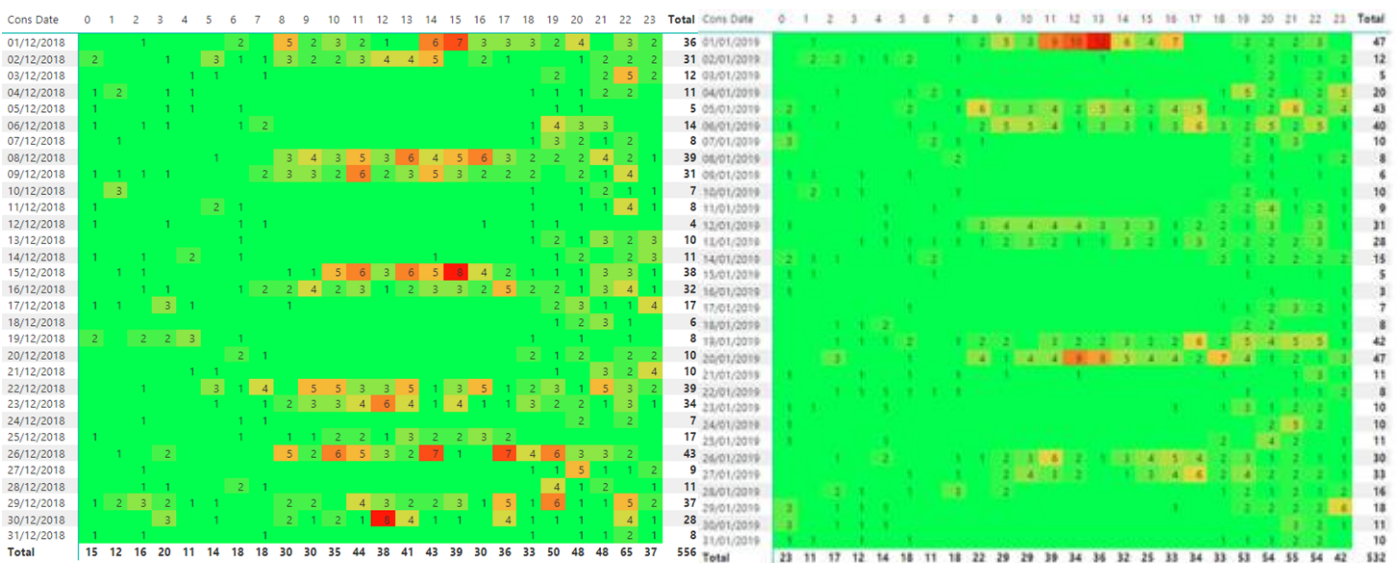
3.6.1 Similar to the access of palliative patients, all healthcare professionals within Wiltshire have access to the clinical assessment service as part of the IUC service. This also includes access for staff in Nursing and Residential homes, as well as paramedic crews, pharmacists and community teams.

### 3.7 Location of Out Of Hours face to face provision

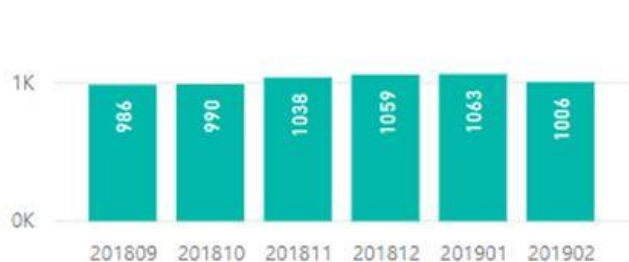
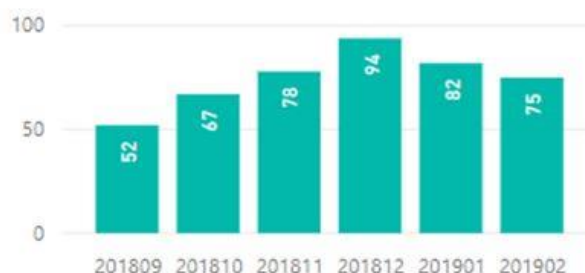
- 3.7.1 Wiltshire CCG specified a need to identify proposed premises/locations and fleet to deliver the service to meet the vision for care closer to home to maximise service user experience.
- 3.7.2 Medvivo took time to consider location, opening times and staffing configuration influence the effectiveness of the service. The siting of bases and mobile resource is dependent on location, accessibility, facilities, cost and proximity to other services. Poor choice of site impacts on patient satisfaction as well as other service areas (e.g. increased requirement to visit) and services (ED/Ambulance Trust). In contrast, well-designed integration and co-location optimises face-to-face delivery, preventing hand-offs and duplication.
- 3.7.3 Following a review of all activity for the IUC contract and based on the evidence of historical activity, Medvivo have kept all primary care Out Of Hour's bases in Wiltshire because those bases still provide equitable access to the greatest number of patients.
- 3.7.4 They are at the following locations; Marlborough, Chippenham, Devizes, Trowbridge, Warminster, Salisbury. The nearest face to face base for patients within the Amesbury Area board is Salisbury. This service is currently based at Salisbury district hospital.

### 3.8 IUC Activity for Amesbury Area

- 3.8.1 The IUC activity below is based on activity from September 2018- February 2019 and is based on the following postcode Sectors - 'SN10 3', 'SP4 7', 'SP3 4', 'P011 0', 'SP2 09', 'SP4 8', 'SP4 9', 'SP4 6', 'SP4 0', 'SP2 0'
- 3.8.2 In total 6142 cases have been triaged by the IUC service through NHS 111.
- 3.8.3 The heat map below demonstrates the example of when cases from the area have come into the IUC service. These are just based on December 2018 and January 2019, and demonstrate that most of the contacts in the service are during the evening in the week when GP practices are closed or on the weekends.



3.8.4 The chart below shows the number of cases and home visits per month for patients registered address in the postcode sectors in paragraph 3.8.1. The total number of cases is approximately 10.9% of the total Wiltshire IUC activity, and 7.29 % are seen as Home visits. There is an increase in Home Visits in December but this is as a result of the Christmas period.

**Cases by Month**

**Home Visits by month**


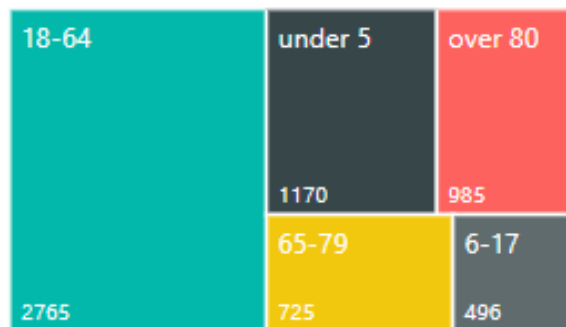
3.8.5 Approximately 23.7% of patients were seen face to face at any one of out of hour's bases across Wiltshire, with the vast majority travelling to the Salisbury out of hour's base at SFT.

3.8.6 The table below shows the location of where patients were seen. (It should be noted that patients may have been in other locations at the time of the 111 call, and 'Blank' Location is due to a recording system issue and is currently under investigation by the provider.)

ConsultationLocation	201809	201810	201811	201812	201901	201902	Total
BSW OOH - Salisbury Hospital	171	183	156	217	210	196	1133
BSW OOH - Chippenham Hospital	20	23	28	22	16	16	125
BSW OOH - Trowbridge Hospital	14	10	11	14	11	11	71
BSW OOH - Devizes Hospital	5	5	21	16	14	7	68
BSW OOH - Savernake Hospital	2	3	7	8	2	3	25
BSW OOH - Devizes Hospital	3	1	2	7	1	6	20
BSW Dental		2	1		1		4
BSW OOH - RUH		1	2			1	4
BSW OOH - Warminster Hospital		2				1	3
BSW OOH - Fox Talbot House - HQ			2				2
Devizes Car			2				2
BSW OOH - Moredon Health Centre						1	1
BSW OOH - Swindon Health Centre						1	1
Salisbury Car						1	1
<b>Total</b>	<b>215</b>	<b>230</b>	<b>232</b>	<b>284</b>	<b>255</b>	<b>244</b>	<b>1460</b>

3.8.7 IUC cases by age groups:

Cases by age\_category



3.8.8 Approximately 16% of the IUC cases were for patients aged 80 or over from the Amesbury Area board postcodes.

3.8.9 In terms of outcomes, almost 30% are given self-care advice but this varies between age groups. In term of referral to ED Facilities, approximately 8.4% are referred to ED and 13.8% referred for an ambulance. This is higher than the figures within the overall contract but comparable to national rates of referral. Failed encounters are when the service has failed to make contact with the patient and has followed the agreed contact policy before making a risk assessment on how the case should be managed further.

New outcome group	1.Under 5	2. 6-17 yrs	3. 18-64 yrs	4. 65-79 yrs	5. over 80	Unknown	Total
Self Care	443	164	711	180	342	1	1841
Recommended to Contact Primary Care	282	130	783	194	214		1603
Referred for an Ambulance	159	43	344	150	156		852
Recommended to ED	119	84	257	37	18		515
Recommended Non Clinical	40	22	205	40	57		364
(Blank)	18	9	90	48	89		254
Recommended to Attend Other Service	56	20	89	29	60		254
Dental & Recommended to Dental / Pharmacy	3	12	173	22	4		214
Recommended to Speak to Primary Care	43	9	85	20	43		200
Failed Encounter	7	3	28	5	2		45
<b>Total</b>	<b>1170</b>	<b>496</b>	<b>2765</b>	<b>725</b>	<b>985</b>	<b>1</b>	<b>6142</b>

Note - Blank Outcome is where a case does not have a disposition or a CAS outcome and is a data quality issue with the IT system.

3.9 NHS 111 Online

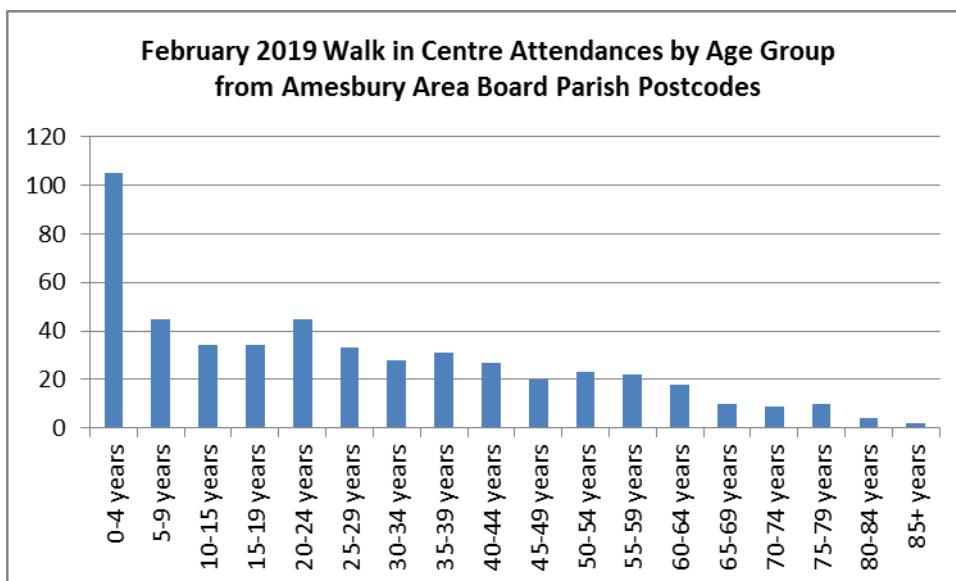
- 3.9.1 Patients are now able to access NHS 111 online to seek healthcare advice 24/7. It is accessible through the following address <https://111.nhs.uk> or through the NHS App.
- 3.9.2 At the start of the online consultation, patients are asked to put in their postcode which should allow, patients are signposted to the appropriate service for their healthcare need at the end of the consultation. In some cases a call back will be offered to the patient, which will come directly from our local IUC service.
- 3.9.3 Unfortunately due to the nature of the activity, we do not have access to any patient identifiable information which will allow us to show the number of patients within the Amesbury area board who have accessed the NHS 111 online service.

**4 SALISBURY WALK IN CENTRE SERVICE**

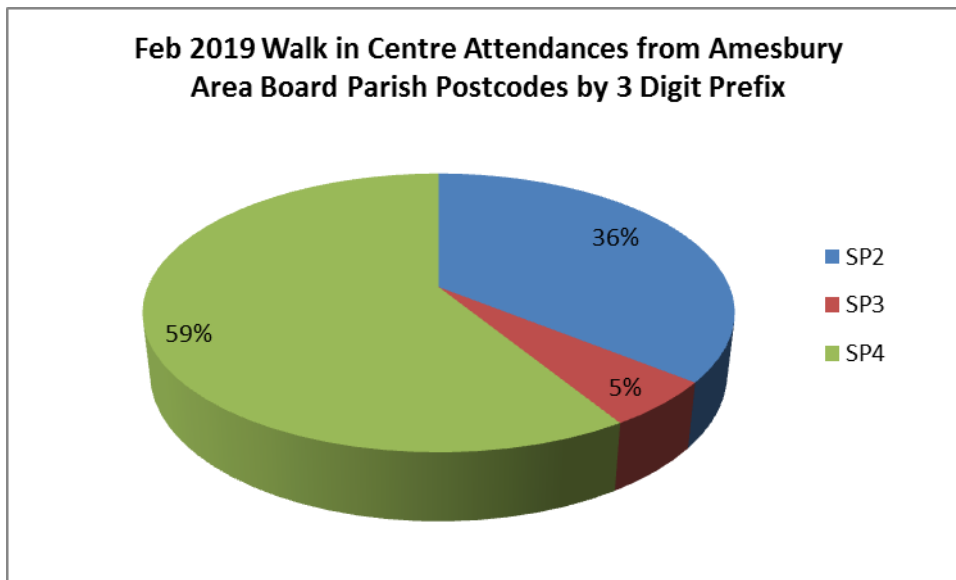
- 4.1 The walk in service is based at the Millstream Medical practice. The hours of operation are 18:30-22:00 Monday to Friday and 08:00-20:00 on weekends and bank holidays.
- 4.2 The majority of Patients self-present to the service, which is referred to as ‘Walk –in’ and are seen by a GP. Alternatively patients can also be directed to the walk in service through another for example the IUC service after calling NHS 111, or through contacting the ambulance service via 999.

**4.3 Activity at the Walk in Centre for Amesbury Area:**

- 4.3.1 During February 2019, approximately 31.6% of the 1581 walk in centre attendances were from patients registered at addresses within the Amesbury area board parish postcodes
- 4.3.2 Of which 7 patients were referred by NHS 111 and the rest self-presented at the walk in centre.
- 4.3.3 In terms of the age of patients attending from the area, 21% of the activity was for patients aged 0-4 years; and 5% were aged 70 years or older.



4.3.4 Almost 60% of the patients attending from the Amesbury area board attended from postcodes starting with SP4 prefix, and 5% from an SP3 prefix. This likely demonstrates the proximity and access to the Walk in Centre from patients' residence.



4.3.5 Full data analysis for reason for attendance and comparison of access to other areas will not be available until the end of the quarter.

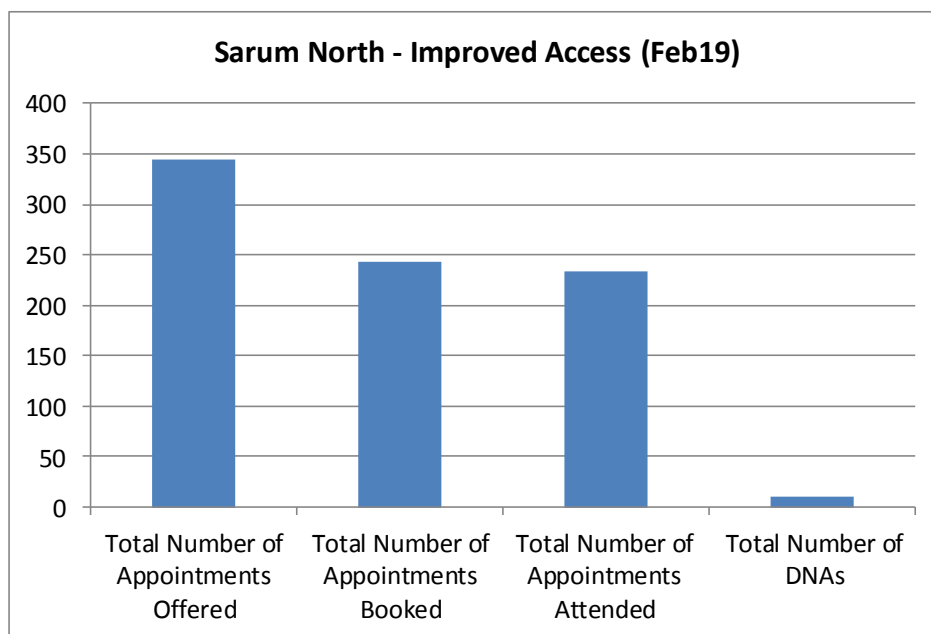
## 5 IMPROVED ACCESS

- 5.1 From 1 October 2018 people registered with a Wiltshire practice have been able to book routine appointments to see a GP, practice nurse or other health professional in the evenings from 6.30pm to 8pm, and at weekends and Bank Holidays.
- 5.2 Across the population of Wiltshire there is an additional 235 hours per week of clinical time in this move to improve access to health services.
- 5.3 To use the service patients just need to call their own GP Practice. Patients won't always be able to see their registered GP and may need to go to a different local practice in the area to take up the after-hours and weekend appointments



5.4 Based on the population size, the number of additional primary care hours provided per week is 19 hours and this covers patients registered at the following practices: Avon Valley Practice, Barcroft Medical Centre, Castle Practice, Cross Plain Health Centre and St Melor Surgery.

5.5 During February 2019, 104 additional primary care hours were provided resulting in 344 additional appointments. Of these appointments, 71% (243) were booked and 68% attended. The DNA rate was 4%:



5.6 The utilisation rates and attendance rates are comparable to the rest of the Wiltshire whilst the DNA rate is slightly better.

## 6 SUMMARY

6.1 This report has summarised all available out of hour's primary care provision based on snapshots of data available at the time of reporting and the access of patients from the Amesbury area based either on postcode of residence or in the case of improved access on the registered GP practice.