

## Primary Care Out of Hours Services Report October 2006

### 1. Introduction

The purpose of this monthly report is to provide the Board with an assurance on standards of service delivery and update on service development for the month of October 2006. It has been agreed that in future such reports will be considered by the Performance Management Group rather than the Board.

### 2. Performance

#### 2a Key Performance Indicators

NHS QIS have recommended in their national review of OOH Services that a national set of Key Performance Indicators for OOH services are developed and used. A workshop on KPI's was jointly led by QIS & the clinical lead for OOH services in NHS Lanarkshire. QIS had commissioned a review of the literature on clinical indicators which will report in due course.

NHS Lanarkshire OOH Services will continue to report on activity and general performance whilst awaiting the development of national KPI's.

***Appendix 2 shows the current NHS Lanarkshire KPI's for OOH services.***

Activity figures for the months of September and October are reported below.

#### 2b Activity by NHS 24 / Lanarkshire Satellite

All Lanarkshire patients contacting NHS 24 undergo triage either by NHS 24 or a locally based nurse in the Satellite centre. When there is no demand from Lanarkshire patients, satellite nurses provide triage for other health board areas. The satellite continues to handle 31% of all calls from Lanarkshire patients. An increase in local handling could only be achieved through expanding both capacity and opening hours within the satellite, a proposal to this effect is currently under discussion between NHS 24 and NHS Lanarkshire. Please note in table 1, the percentage of Lanarkshire calls triaged by Satellite Nurse includes outbound calls. Activity has remained in line with expectations for October.

**Table 1. OOH Activity Figures**

	<b>Oct 06</b>	<b>Sept 06</b>
NHS 24 Satellite Calls relating to Lanarkshire patients	2676	2699
Calls Triaged from other centres for NHS Lanarkshire	6856	7198
<b>Total calls triaged from Lanarkshire patients</b>	<b>9532</b>	<b>9897</b>
% of Lanarkshire Patients Triaged by Satellite	28%	27%
Calls triaged by Satellite for other areas	838	1184

Targets for activity by outcome, which are in line with NHS 24 published targets, have been adopted by NHS Lanarkshire. Currently the service is meeting target performance as can be seen in Table 2.

**Table 2 Activity by Patient Outcome**

	<b>Oct 06</b>	<b>Target</b>
PCEC attendance	38%	<b>35-45%</b>
Home Visit	14%	<b>&lt;15%</b>
Self-care advice / refer outwith Primary Care	43%	<b>&gt;40</b>
District Nurse	2.4%	n/a
<i>Subset of PCEC by patient transport</i>	1.8%	n/a

**See Appendix 1 for further details**

Table 3 sets out performance on forwarding OOH data to GP practices; the target is being exceeded.

**Table 3 NHS Lanarkshire OOH service Activity**

	<b>Oct 06</b>	<b>Target</b>
Data returned to GP Practice by 0930 on next working day	98%	<b>95%</b>

### 2c Response Times

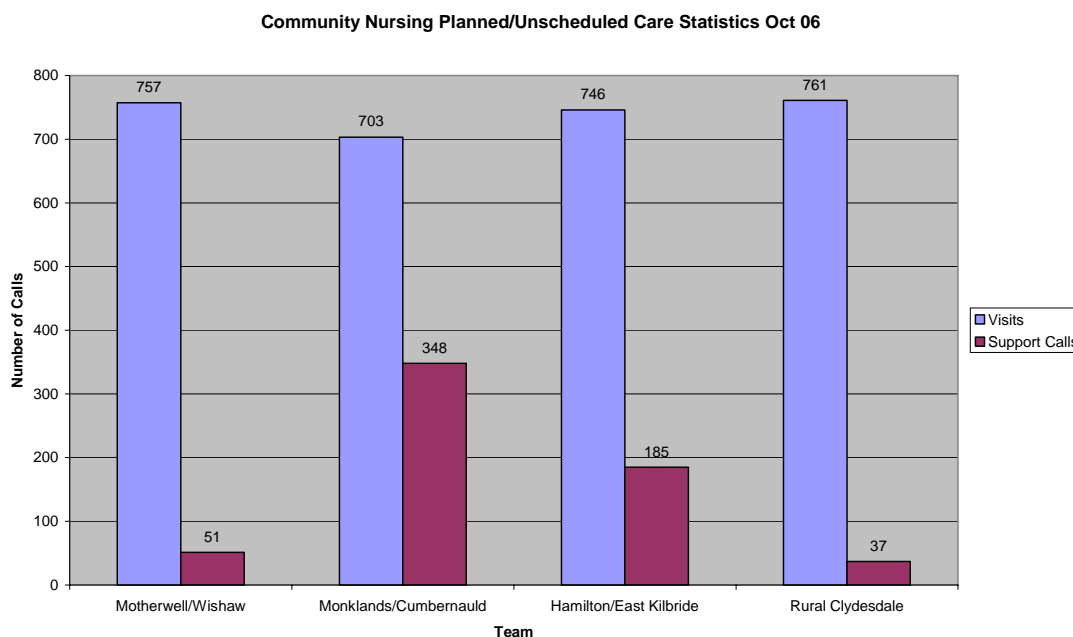
The response time is a measure of the time from handover of care by NHS 24 to completion of care by OOH services.

<b>Time</b>	<b>&lt; 1 hr</b>	<b>1 – 1.5 hrs</b>	<b>1.5 – 2 hrs</b>	<b>2 – 3 hrs</b>	<b>3 – 4 hrs</b>	<b>&gt; 4 hrs</b>
<b>PCC</b>	<b>1349</b>	<b>960</b>	<b>638</b>	<b>636</b>	<b>171</b>	<b>45</b>
<b>H/V</b>	<b>798</b>	<b>219</b>	<b>145</b>	<b>127</b>	<b>45</b>	<b>55</b>

### 2d Activity by Community Nurses

The graph below details all activity, planned and unscheduled, carried out by community nurses in the OOH period. Activity was line with expected

demand.



## 2e Activity by Dental Nurses

This report covers the four week period 2/10/06 – 29/10/06

### *Number of Calls handled over 4 week period*

A total of 256 phone calls were handled by Dental Triage Nurses (DTN) at the Hub in Hairmyres Hospital. On average 64 phone calls were handled by DTNs each week.

Weekends continue to be the busiest times for dental phone calls with 160 (62.5%) of the phone calls made at weekends and only 96 (37.5%) of phone calls made during the normal working week (Monday-Friday). From early October 2006, reflecting the fact that 6 out of 10 dental phone calls are made at weekends, a second seat was made available for DTNs at the Hub in Hairmyres Hospital. Two DTNs are now on duty at peak times on Saturdays and Sundays.

### *Effectiveness of Triage*

Of the 256 phone calls made 156 (60.9%) were given an appointment and 100 (39.1%) were not given an appointment. The 100 patients who were not given an appointment were given advice e.g. reassurance, pain relief, seek an appointment with own dentist etc.

The triage system continues to be effective with 4 out of 10 phone calls not requiring an appointment.

### *Appointments Made*

Of the 156 patients given an appointment 120 (76.9%) were given an appointment for the weekend clinics in Wishaw General Hospital, 32 (20.5%) were given an appointment for next day 'Monday-Friday' care and 4 (2.6%) attended A&E.

### *Weekend Clinics*

Over the 4 week period there were 8 sessions, each session was staffed by 2 dentists and each dentist can see up to 12 patients per session. As a result the capacity for weekend appointments over the 4 week period was:  
 $2 \text{ dentists} \times 12 \text{ patients} \times 8 \text{ sessions} = 192 \text{ appointments.}$

The actual number of appointments made for the weekend sessions was 120 and this means that the weekend sessions are on average working to 62.5% capacity. Up to 72 additional appointments could have been accommodated over the 4 week period.

### *Weekday Next Day Care*

Each day (Monday- Friday) 7 dentists are available (in their own practice) to each see up to 3 unregistered patients for next day care. As a result the capacity for weekday next day care appointments over the 4 week period was:

$7 \text{ dentists} \times 3 \text{ patients} \times 5 \text{ days} \times 4 \text{ weeks} = 420 \text{ appointments.}$

The actual number of appointments made for weekday next day care was 32 and this means that during the week (Monday – Friday) the system is on average working to 7.6% capacity. A further 388 appointments could have been accommodated over the 4 week period.

### *A&E Appointments*

4 patients (2.6%) were given an appointment with A&E. This is higher than normal and the average over the year to date is a 1% referral rate to A&E.

### *Failed to Attend*

Over the 4 week period 16 patients (10.3% of those given an appointment) failed to attend. The failed to attend rate is consistently about 10% each month.

### *GENERAL UPDATE*

Overall over the 4 weeks LEDS operated smoothly. In early October a Dentist failed to turn up for weekend duty but a reserve was found to cover out the session. The sessions do seem to be getting slightly busier but the numbers of patients attending can be handled within the current resources available.

One complaint has been received and taken forward. This was about a failure in communication between a GDP & the Practice Staff. Clarification was required on the Dentist's duty of care to their own registered patients & a lack of awareness of the Next Day Care requirements for LEDS.

Targets for performance have been included which are in line with NHS 24 published targets. NHS Lanarkshire is currently meeting target performance.

### **3. Service Delivery**

All doctor sessions were filled during October 06 with no agency doctors employed.

### **4. Training**

#### **4a IT**

The Adastra upgrade is now complete. Training continues to take place with both clinical and clerical staff.

#### **4b Nurse Training**

##### *Report on PCEC Nurse Training:*

There are currently twelve nurse practitioners employed in the Primary Care Emergency Centres, at five sites across Lanarkshire.

In order to support the GP out of hour's service and to support the enhanced role of the nurse practitioner in managing minor illness the practitioners have undertaken a training program which encompasses minor illness, minor injury, and independent nurse prescribing, we currently have three nurses and three paramedics undertaking the minor illness training course with a view to expanding the service next year.

The minor illness module was originally undertaken at Bell College Hamilton, and this provided a sound introduction to the responsibilities of the extended role.

A further advanced examination and management module was undertaken at Caledonian university, as this was the best primary care focused module available at the time, however the MINTS course which has been developed in Lanarkshire as the training for unscheduled care practitioners has now been developed to encompass primary care priorities and has General Practitioners teaching as part of the minor illness module, therefore MINTS will be the course of choice for all our practitioners in out of hours.

The independent nurse prescribing course has been undertaken successfully at a number of Higher Education Institutes including Paisley, Caledonian University and Stirling University.

Since the opening of the NHS Lanarkshire satellite centre, there has been recognition of the desirability of creating joint roles for nurses working both in telephone triage and as practitioners at the primary care emergency centres. Two nurses from the satellite are currently undertaking the MINTS course and undertaking mentoring within the Primary Care Centres.

There is also recognition of the need to support the district nurses role within unscheduled care, and a number of community nurses are undertaking the MINTS course with a view to utilising advanced assessment skills in a community setting.

The nurse practitioners are now assessing , treating and discharging patients autonomously across all the sites , the preferred route for supplying medication is via prescription and community pharmacy, however large number of Patient Group Directions are in place via the MINTS course and these are available to be utilised by the out of hours practitioners

It is acknowledged that in order to support "Picture of Health" there will be a need to train more nurses to perform an autonomous practitioner role, supported by and supporting out of hours General Practitioners. This will be achieved via the MINTS course and continued co-operation with the Higher Education Institutes

## **5 Service Development**

Within the OOH services key pieces of work is currently underway in the following areas:

**5a Festive Planning:** As reported previously, the festive plan is complete, has been submitted to SEHD and all activities are on schedule. All rota slots have been filled. {Please see Appendix 3 for Update }

**5b QIS:** A positive response has been received by NHS L regarding the recently submitted action plan. Our average score has increased by 0.2 to 2.8 indicating a positive trend. Work continues locally with a resubmission planned for January 2006, in line with all NHS Boards.

**5c Pharmacy:** PGD's for paramedics are being progressed. A meeting with the Medical Director of the SAS is scheduled for November 21<sup>st</sup> with final PGD sign off scheduled for mid December.

A detailed audit of prescribing by OOH service is ongoing. The prescribing of 2 drugs (Diazepam & Tramadol) is the subject of in-depth analysis at present. Following the success of last year's pilot, an attempt will be made to recruit Pharmacists to support OOH service delivery over the festive period.

**5d Multi-disciplinary Service Delivery:** Work is in progress to finalise a pilot project where a small team of trained Paramedics will function as autonomous practitioners within OOH service. It is anticipated that this will be set up before Christmas.

Plans are being developed, which will be the subject of broader consultation, that will set out options for moving to a doctor light service delivery model.

**5e Patient Participation:** Representatives from NHS L OOH services were part of the panel and hosted a stall at North Lanarkshire Carers Symposium held in Motherwell Civic Centre on November 13<sup>th</sup>.

**5f ECS:** ECS is now available to clinicians working in OOH service in Lanarkshire. The initiative is being managed by a national group. No report on activity has been published by the national group, as yet.

5g **Staff communication:** Plans are underway to set up an electronic notice board for all salaried doctors working in OOH Service. This approach will be the subject of review and if successful will be extended to other staff groups.

## **6 Complaints**

There were 5 complaints received via patient services for the Out of Hours service during October. One complaint regarding time delay for the arrival of a doctor, another regarding triage of a call which did not involve NHS Lanarkshire and this was passed back to the Scottish Ambulance for a response and three regarding clinical decisions made by Out of Hours doctors. All were responded within required time frames.

## APPENDIX 1

### Activity by Outcome & Location for October 2006

	Wishaw	Hairmyres	Monklands	Lanark	Cumbernauld	Total
Advice NHS 24/ Doctor						4303 43.43%
Centre Visits	1232	719	1198	276	374	3799 38.34%
Transport						179 1.8%
Home Visits	319	269	367	228	206	1389 14.01%
District Nursing						238 2.40%
<b>Total Number of Contacts</b>	<b>1551</b>	<b>988</b>	<b>1565</b>	<b>504</b>	<b>580</b>	<b>9908</b>

### Activity by Outcome & Location for September 2006

	Wishaw	Hairmyres	Monklands	Lanark	Cumbernauld	Total
Advice NHS 24/ Doctor						4541 43.91%
Centre Visits	1307	720	1165	326	432	3950 38.19%
Transport						207 2%
Home Visits	288	305	334	232	232	1391 13.45%
District Nursing						253 2.45%
<b>Total Number of Contacts</b>	<b>1595</b>	<b>1025</b>	<b>1499</b>	<b>558</b>	<b>664</b>	<b>10342</b>

Patient transport figure is not included in PCEC attendances

## Key Performance Indicator – Full Suite

Category	Performance Measurements	Comments
<b>Operational</b>		
<b>Call Handling</b>	<b>NHS24</b>	Already reported on
<b>Call triage</b>	<b>NHS24</b>	Already reported on
<b>Call passage to NHS L Hub</b>	<b>NHS24</b>	Already reported on
<b>Response times for PCEC &amp; Home visits</b> <ul style="list-style-type: none"> <li>• 2hours</li> <li>• Routine</li> </ul>	<b>90% target</b>	Already reported on
<b>Data returned to GP Practice by 0930 on next working day</b>	<b>95% target</b>	Already reported on
<b>Clinical Incidents</b>	<b>100% completion, where possible, within 20 working days</b>	As per NHS Scotland Guidelines
<b>Complaints</b>	<b>100% completion, where possible, within 20 working days</b>	As per NHS Scotland Guidelines
<b>Patient satisfaction surveys</b>	<b>Will be undertake annually with NHS 24</b>	In conjunction with NHS 24
<b>OOH Community Nursing</b>	<b>90% response time with 4 hours</b>	Already reported on
<b>NHS Satellite Performance</b>	To be further developed	Completion of KPI by next OOH Exec meeting
<b>Dental KPIs</b>	For further development	Completion of KPI by next OOH Exec meeting
<b>Clinical Records quality</b>	For development and implementation	Completion of KPI by next OOH Exec meeting

**NHS Lanarkshire Winter/Festive Plan 06/07**

**Introduction**

This report has been compiled to inform of the progress of the NHS Lanarkshire Out of Hours service Winter/Festive Plan.

The plan has now starting to be implemented. Areas that have been identified are being prepared for operation during the festive period.

A representative from Lanarkshire attended the national peak planning group in Edinburgh on Wednesday 6<sup>th</sup> December to inform the Scottish Executive of the current situation. Thorough reviews of both the winter plan and predicted activity have taken place.

**Doctors**

The doctors rota is completed included in this are a number of standby doctors should the need arise where demand outstrips capacity. There are also a number of triage doctors working over the festive/new year period to assist NHS 24 with untriaged calls. This area has proved difficult to cover this year although the situation has improved over the last couple of weeks. Additional Doctors will also be working as home visiting doctors. All doctors have confirmed shifts in writing or via email.

**Nursing Staff**

Nurses will assist with the treating of patients during the festive period. Nurses who have been trained will be working alongside doctors seeing treating and discharging their own patients. There are some time gaps usually 2 hours where no nurse is available this is currently being reviewed to close this gap.

**Staffing**

All support staff rotas are full these include receptionist, drivers and Hub staff. Additional Hub staff have been put in place to cope with the expected demand.

**Vehicles**

All Out of Hours vehicles have been serviced are being prepared with checks being made for equipments and supplies.

## **Equipment**

Equipment is now being installed into the additional rooms identified for use. This will allow for contingency if required. These rooms will be used at peak times or as and when required.

## **Conclusion**

The plan has been prepared well in advance, and there are no anticipated problems. The work will continue up until Friday 22<sup>nd</sup> December.