

**SUBJECT: PRIMARY CARE OUT OF HOURS REPORT: JULY 2008**

**1. PURPOSE**

The following report has been compiled to provide the Board with an up to date position on the performance of the Out of Hours Service.

**2. SUMMARY OF KEY ISSUES**

Demand on the service was in line with expected and there are no major issues to report.

The OOH Service continued to support A&E by taking 701 transfers from A&E during July – a further 9% increase on June. This is viewed as a valuable contribution by A&E colleagues.

Other community services are establishing regular links, such as Community Pharmacy who continued contact via the professional to professional line with 29 referrals during July.

A new tracker system for home visiting cars is now in place whereby home visits can be dispatched more efficiently by hub staff. As a result further progress has been made towards attaining the standard for all home visits within required time frames.

Specific communication with newly registered GPs has been successful in attracting 50% of those GP's trained in NHSL to work on a sessional basis with the OOH service.

**3. ACTIONS FOR THE SERVICE**

In collaboration with Acute colleagues, a new initiative will be piloted in Wishaw A&E from mid August where OOH doctors will work in the A&E department at peak times dealing with the rising number of patients who present with Primary Care type problems. This approach has been successfully tested in England with valuable lessons learned presented at the recent 'Redesigning Emergency Care' conference in Manchester, on July 29<sup>th</sup>.

The detailed review of OOH home visiting is continuing with the aim of continually improving performance. Following the successful implementation of the tracking system, specific focus will now be moved to addressing anomalies in recording some items of performance data with Adatastra (IT system).

The work to overhaul 'The Doctor's Bag' is continuing, including renewing the bags, reviewing the content against current evidence and enhancing stocking procedures.

Development work continues on the pilot project of hosting a mini Primary Care Centre within a Community Pharmacy and also with Acute colleagues on redesigning Emergency Care.

#### **4. RECOMMENDATION**

The Board is asked to note the performance of the Primary Care Out of Hours Service during July 2008

#### **5. FURTHER INFORMATION**

For further information or clarification of any issues in this paper please contact.

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## Summary Activity & Performance Report for July 2008

Descriptor	June 2008	July 2008	Narrative	
<b>a. OOH ACTIVITY</b>				
Number of patients calling NHS 24 in OOH period	9422	9056	Level of activity at seasonal norm	
Number of NHS L patients triaged in local centre	2695	2033		
% NHS L triaged in local centre	28.6%	22.4		
Total calls triaged in local centre	6707	6197		
Total number of patient contacts with OOH Services	10341	9942	This figure includes 701 transfers from A+E to OOH Service, and 29 referrals from community pharmacists.	
<b>b. OOH PERFORMANCE</b>				
			<b>Target</b>	
<b>Time for NHS 24 nurse to commence consultation</b>				
• % urgent commenced within 20 minutes	99%	99%	95%	KPI monitored by NHS 24
• % non urgent commenced within 60 minutes	99%	99%	90%	
<b>Response time for Home Visits</b>				Steady progress towards achieving KPI's
• 1 hour	83%	81%	95%	
• 2 hours	88%	93%	90%	
• 4 hours	95%	99%	90%	
Total home visits	1151	1147		
<b>Percentage of rostered doctor sessions filled</b>	100%	100%	100%	
<b>Data to GP Practice by 0930 on next working day</b>	100%	100%	99%	
<b>Dental performance</b>				See Appendix 1 for more details
• Total No of contacts	570	489		
• Advice	42%	33%		
Face to Face Contacts	58%	67%		
Emergency Appt – Weekend Clinic	57%	Not available		
Next Day Appt	38%	Not available		
A&E	5%	3%	<3%	
<b>Community Nurse Performance</b>				Stable service. No new issues to report.
• No of new referrals	337	300		
• Total no of home visits	2027	2158		
<b>c. CLINICAL GOVERNANCE</b>				
<b>Significant Adverse Events</b>	0	0		
<b>Complaints</b>				
• No. received	2	3	4 compliments received (3 written and 1 verbal)	
• No. responses outwith the standard time	0	0		

## APPENDIX 1 - REPORT DENTAL TRIAGE – MONTH OF JULY 2008 PERIOD – 4 WEEKS FROM 1/7/08 TO 28/7/08

### 1. NUMBER OF CALLS HANDLED DURING THE MONTH

A total of **489** phone calls were handled by Dental Triage Nurses (DTN) at the Hub in Hairmyres Hospital.

*On average 122 calls were handled on a weekly basis. This is lower than last month's weekly average.*

### 2. EFFECTIVENESS OF TRIAGE

Of the **489** phone calls made **329 (67%)** were given an appointment and **160 (33%)** were not given an appointment. The **(33%)** of patients who were not given an appointment were given advice e.g. reassurance, pain relief, seek an appointment with on dentist own dentist etc.

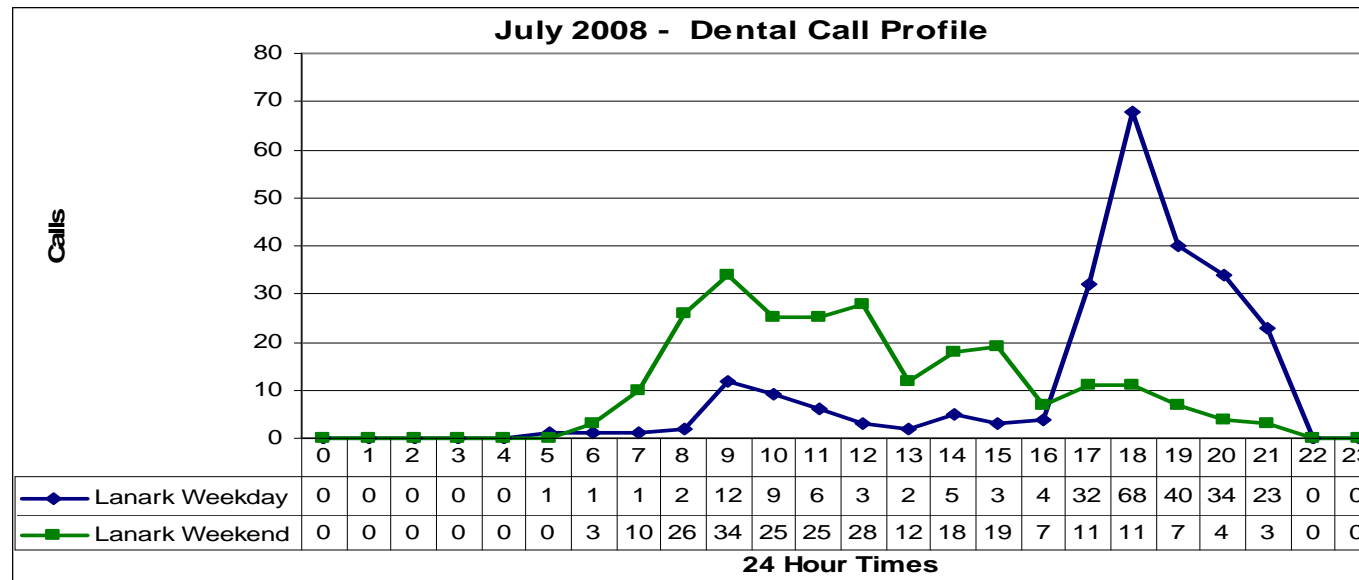
*The triage system continues to be effective with 3 out of 10 of callers not requiring an appointment to see a dentist. This demonstrates consistency in the way triage is delivered.*

### 3 A&E APPOINTMENTS

**11** patients (**3%**) of patients requiring an appointment were given an appointment with A&E.

*The target is to keep referrals to A&E to fewer than 3%. The % referred to A&E fell by 2.2% to reach the 3% target. However, it is worth noting that the rate is made up of medical emergencies e.g. dental pain relief analgesic overdose and the true dental emergencies.*

### 4. CALL PROFILE



This graph shows that the peak time for calls over weeks is about 9.00am and the peak time for calls during the week is about 7.00pm. Dental Triage shift patterns are organised to reflect these peaks

### 5. GENERAL UPDATE

Overall over the period 1/7/08 to 28/7/08 LEDS operated mostly as anticipated.