

## **Urgent & Emergency Care**

### **Lambeth and Southwark Urgent Care Board Briefing**

#### **Health, Adult Social Care, Communities and Citizenship Scrutiny Sub-Committee**

#### **September 2013 Meeting**

### **1. Introduction**

During the 2012/13 winter period, national performance against the 4 hour target deteriorated significantly relative to previous years. In response to this, NHS England issued guidance in May, which set out a number of key actions for local urgent care systems to support improved A&E performance, which included the development of a local Recovery & Improvement Plan. This document summarises the plan developed through the Lambeth & Southwark Urgent Care Network which has representation from key stakeholders across the health economy.

### **2. Performance overview**

Whilst both GSTT and Kings ED performance met the 4 hour standard for all type attenders on average over 2012/13, both Trusts were unable to meet the standard in quarter 4.

In order to gain an understanding of the reasons for this change in urgent care performance a Winter Demand Review was completed which considered a range of metrics across the wider system e.g. community services, London Ambulance Service, primary care including GP out of hours providers, in addition to a wide range of hospital indicators.

The key findings were:

- Overall A&E department attendances during Quarter 4 had not changed significantly in the past two years, either at Trust or CCG level. However there was an increase in activity amongst the older age groups at CCG level and GSTT
- Whilst the total numbers of emergency admissions have stayed relatively stable, there was an increase in activity amongst the over 65 age group across Lambeth & Southwark.
- Whilst providers had reported an increase in the acuity of patients presenting at A&E, analysis of measures to assess this presented a mixed picture.
- The number of mental health patients presenting at A&E departments requiring assessment and appropriate interventions has increased significantly, especially local people who are unknown to the service
- Both Trusts have experienced issues with capacity. At GSTT this has been related to clinical staffing, whilst at Kings it has been due to bed and critical care capacity.
- The review identified specific pressures related to stroke and paediatric capacity

In addition to this review, the Urgent Care Network also completed an assessment of current urgent care system, considering each stage of the patient pathway e.g. prior to A&E, hospital system, discharge from hospital.

### **3. 2013/14 Recovery & Improvement Plan**

The Recovery & Improvement Plan has been informed by the findings of the Winter Demand Review and the system-wide assessment exercise. The key actions for this coming year are set out below.

#### **a) Key priorities for 2013/14**

The key actions over the coming year are outlined within the full recovery plan and include:

- **Acuity:** the review has highlighted increases in admissions amongst the frail elderly population. Lambeth & Southwark CCGS have commissioned a package of community based admission avoidance schemes, which form part of the broader Southwark and Lambeth Integrated Care Programme's (SLIC) frail elderly pathway. We have worked with both the local authority and community services to keep people well and cared for in the home.
- **Capacity:** Both Trusts are implementing large scale ED redevelopments in over the next two years which will create additional physical capacity. Clinical capacity is being addressed through both staff recruitment strategies and review of working arrangements.
- **Communications:** research seeking to gain a greater understanding of patient behaviour will be completed during September and inform a communications campaign, part of which will be targeted at particular patient groups e.g. children, people with long-term conditions, frail and elderly population.
- **Mental Health :** an integrated care pathway for mental health patients has been introduced which will provide an improved experience for patient. A review of frequent attenders to A&E is in progress, with an intention to develop plans to work differently with this group of patients.
- **Primary care:** a review of demand and capacity within general practice was undertaken in March, as part of the development of the Primary and Community Care Strategy. This will provide a framework for improving the quality and scale of delivery of primary and community care services in the borough over the next three to five years. The South East London Community Based Care Strategy will underpin the work with primary care and ensure best use of resource including pharmacies.

#### **b) 2013/14 Winter Plan**

Each year, the Lambeth & Southwark Urgent Care Network develop a winter plan which sets out the arrangements each provider across the health economy will put in place over the winter period to respond to the increased pressures upon the system. In addition it describes the systems used to monitor performance and escalate and resolve operational issues in a timely way. One of the key recommendations from the review of last winter was the importance of initiating this process earlier and as a result of this, the Winter Plan will be finalised by 23<sup>rd</sup> September.

#### **c) Demand & Capacity Audit**

A system-wide demand and capacity exercise is currently in progress, which will feed into the Winter Plan. This piece of work is being undertaken jointly across South East London and will provide assurance that there is appropriate capacity and arrangements in place ahead of this coming winter.

d) Winter funding monies

NHS England recently announced that £500million would be available to support urgent care systems to manage winter demand - details of how this will be allocated and criteria have not yet been finalised. The Urgent Care Network will support the development and co-ordination of proposals as part of the winter planning process. This would include a focus upon enhanced seven day working arrangements.