





Integrating urgent care services at Chorley and South Ribble Hospital

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1. Introduction

Urgent care services at Chorley and South Ribble Hospital are being developed to improve quality and access for patients by making them more coordinated, and more integrated with other services. Part of this development work includes the relocation of the local GP out-of-hours service onto the hospital site.

This briefing provides an overview on the background, the plans and the benefits to patients that the changes will bring.

2. Background and context: National

Nationally, urgent care admissions to hospital are rising, which together with the increase in the number of people with long term conditions, and the increase in the number of frail elderly people with multiple, complex conditions, means that the way some urgent care services are currently arranged are clinically and financially unsustainable.

Alternative solutions to hospital-based care are being looked at across the country, and integrating multiple health and care services are seen as being essential to the development of effective urgent and emergency care services.





A number of national policy drivers, research and guidance that support this include:

- Equity and excellence: Liberating the NHS states that the Government is committed to developing a coherent 24/7 urgent care service in every area of England, and that these services should be clear to patients when they are making choices, and that they should help to drive the integration of services
- High quality care for all now and for future generations: Transforming
 urgent and emergency care services in England states that the diversity
 of urgent care services causes confusion amongst patients and healthcare
 professionals, which can lead to a lack of standardised clinical practice, a
 delay in access to appropriate treatment, multiple contacts with different
 clinicians and ultimately a poor experience for the patient
- Urgent care centres: What works best and Effective approaches in
 urgent and emergency care both emphasise the need for urgent care
 services to have a strong identity about the type of treatment that can be
 provided in an urgent care service, and that clinical governance needs to be
 embedded into these services to make sure that patients get good outcomes

All of these best practice approaches and principles are reaffirmed in the recent urgent and emergency care review by Sir Bruce Keogh.

3. Background and context: Local

Reviews have been undertaken of existing emergency and urgent care services in the Chorley, South Ribble and Greater Preston areas, and have included the views of local GPs, emergency care clinicians and members of the public.

These views have helped to shape some local priorities that support the national agenda of:

- Providing care close to home
- Treating people in the most appropriate place for their need
- Ensuring people have access to safe, high quality urgent care

The Chorley, South Ribble and Greater Preston health economy has agreed via its Clinical Senate that there is a need to redesign the 'front end' of the emergency departments at both Royal Preston Hospital and Chorley and South Ribble Hospital (this briefing address the Chorley and South Ribble hospital element of this) to create a new urgent care service (incorporating GP out-of-hours services).

The aim of this is to address a number of issues, including:

- Increasing demand and pressure on emergency departments and ambulance services
- Confusion amongst patients about where and when to access urgent care services





- The introduction of the new NHS 111 'triage' service
- A fragmented urgent care service with multiple governance structures

In addition, although having a diverse range of urgent care services could on the surface be seen as providing patients with ample choice, it often requires them to 'guess' at what may be wrong with them in order to attend the right service.

Therefore the plans for change for the urgent care service at Chorley and South Ribble Hospital have been drawn up based on the core principles of **high quality services**, **integration**, and a **single point of access** that will help triage patients so they are seen by the **right clinician at the right time**.

This work is part of a wider and even further reaching programme of work to develop urgent care services in the area, and also services for people with long term conditions.

4. The plans

The new urgent care service at Chorley and South Ribble Hospital will operate 24 hours a day, seven days a week, and will be integrated with the local GP out-of-hours service.

The service will be accessed by a single point of entry. Through the out-of-hours service it will also be able to support patients who are unable to attend the service, either because they are house bound or they are being treated at end of life.

The service will be delivered by a multi-disciplinary team of healthcare professionals, who will 'sit at the front end' of the existing emergency department. The teams will include GPs and emergency nurse practitioners.

The service will be able to provide access to imaging and pathology services at the hospital, and treat minor illnesses and injuries.

It will complement and enhance other services, including out of hours nursing, mental health, social care, public health and dental provision, and will be able to triage and signpost patients to the most appropriate place

As it will be able to provide a standardised service through good clinical governance and the mix of skills and healthcare professionals, it will be able to provide seamless, high quality care that is more responsive to patient needs, and therefore gives them a better experience.





It is important to note that the plans focus on providing an additional and enhanced urgent care service at Chorley and South Ribble Hospital, which will be delivered using the existing budget – ultimately, a better service will be provided for the same money.

The plans DO NOT include making any changes to the existing emergency department on the site, other than the fact that the department will work more closely with the urgent care service to make sure that patients are seen by the right clinical expert at the right time.

Patients will still be able to access the emergency department at the hospital through the single point of access 'front door'.

5. Patient benefits

- There will be increased access to services on the site, with urgent care available 24/7
- Urgent care services will become easier for patients to understand and navigate with one 'front door' as a single point of access, behind which they will be signposted to the most appropriate service
- Clinicians with different expertise will be based on the same site and will work together to treat patients
- Urgent care will coordinate fully with other services, such as those in primary and community care
- The quality of the services will be improved, with care centred around the patient
- Patients will receive a better experience when using the service, including increased privacy and dignity

6. Timeline

The plans are subject to planning permission as the service will need fit for purpose facilities on the hospital site.

A planning application has been submitted, and we anticipate approval of the application to be received by mid-May 2014.





Following a procurement process, a building contractor will be appointed by the end of June 2014 to start work on the site as soon as possible. It is expected that the new integrated urgent care service at Chorley and South Ribble Hospital will start in December 2014.

A communications and engagement plan will ensure that all staff, patients, and members of the public are kept informed of the changes, and we will work with the providers to ensure that appropriate patient information and signposting is produced.

The work to integrate the urgent care services at Royal Preston Hospital are not as advanced, with project planning still underway, although it is expected that this new service will be in place by December 2015.

7. Supporting information

The following supporting information and documentation is also available on request:

- Clinical and business case for change
- Health impact assessment
- Equality impact assessment