Front Door streaming for Urgent & Emergency care

Welcome to our first project newsletter

The number of people attending emergency departments (ED) continues to rise every year. This is putting unprecedented pressure on the hospital and healthcare system.

A third of patients attending ED in Bristol, North Somerset and South Gloucestershire are discharged requiring no significant treatment. That’s approximately 60,000 people every year attending an extremely busy ED who could have been appropriately seen elsewhere.

In line with Bristol’s Urgent Care Strategy, we are therefore developing and testing a new streaming service at the front door of the Bristol Royal Infirmary’s Adult Emergency Department (ED). A similar streaming model will follow for children’s ED a month later.

The new service will operate from 2-8pm each day, seven days a week. During the hours of operation everyone attending the adult or children’s ED will be streamed by a primary healthcare professional.

The primary healthcare professional will refer people either to a primary healthcare service or ED, both within the BRI. This new front door streaming system will mean patients in need of urgent and emergency care are treated as quickly as possible and in the right place by the people with the right skills.

A thorough evaluation will establish how this new integrated approach can help reduce pressure on ED and improve patient experience. This will help inform the development of urgent care services, planned for the BRI. The new model has been developed in close collaboration with primary care and the acute hospital.

We will be giving further updates on the project’s progress in the coming months. See www.bristolccg.nhs.uk/jointfrontdoor/ for project information and updates.

See who’s who on the project board on page two

Patient Pathways

Please see pages five and six to look at the patient pathways for streaming adults and children to the primary health care service.
### Who’s who on the project board

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Organization</th>
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</thead>
<tbody>
<tr>
<td>Dr Lesley Ward</td>
<td>Project Board Chair</td>
<td>GP and Bristol CCG Clinical lead for Urgent and Emergency Care (U&amp;EC)</td>
</tr>
<tr>
<td>Dr Kirsty Alexander</td>
<td>Urgent Care Children’s Clinical Lead</td>
<td>GP and Bristol CCG Children’s Clinical lead for Urgent and Emergency Care (U&amp;EC)</td>
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<tr>
<td>Graham Wilson</td>
<td>Urgent Care Transformation Programme Manager</td>
<td>Urgent Care Transformation Programme Manager</td>
</tr>
<tr>
<td>Amanda Norman</td>
<td>Severn Urgent Care Network representative</td>
<td>Head of Urgent Care Programmes</td>
</tr>
<tr>
<td>Inge Shepherd</td>
<td>Commissioner of urgent and emergency services for children</td>
<td>Programme Manager Children and Maternity Commissioning</td>
</tr>
<tr>
<td>Paula Clarke</td>
<td>Strategic lead</td>
<td>Director of Strategy and Transformation</td>
</tr>
<tr>
<td>Peter Collins</td>
<td>U&amp;EC Clinical Lead</td>
<td>Clinical Director for the Medical Division</td>
</tr>
<tr>
<td>Lisa Davies</td>
<td>Children’s Hospital Manager</td>
<td>General Manager for Medical Specialties at the Bristol Royal Children’s Hospital</td>
</tr>
<tr>
<td>Jenny Holly</td>
<td>Bristol Eye Hospital ED representative and Divisional representative for Surgery</td>
<td>General Manager at the Eye Hospital</td>
</tr>
<tr>
<td>Fiona Jones</td>
<td>Divisional representative for Diagnostics and Therapies</td>
<td>Diagnostics and Therapies Divisional Director</td>
</tr>
<tr>
<td>Dr Kathy Ryan</td>
<td>Brisdoc representative</td>
<td>Medical Director</td>
</tr>
<tr>
<td>Ceridwen Massey</td>
<td>Bristol Community Health representative</td>
<td>Deputy Director of Operations</td>
</tr>
<tr>
<td>Joanna Bates</td>
<td>South Western Ambulance Service NHS Foundation Trust representative</td>
<td>Clinical Development Officer South Western Ambulance Service NHS Foundation Trust</td>
</tr>
<tr>
<td>Stephen Beets</td>
<td>Bristol City Council Representative</td>
<td>Service Manager (Front door Hospitals)</td>
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### How will the pilot front door streaming work?

**The front door streaming pilot is starting soon and will be run by Brisdoc and UH Bristol. Here are some answers to questions you may have about the pilot.**

#### When will the pilot start?

The pilot is due to start in the adults emergency department (ED) at the start of November. If all goes well, we then hope to start the pilot in children’s ED at the start of December. We hope this will help both ED’s to cope with the extra demand expected over the winter months.

#### How will it work?

As people walk into the adult ED they will be directed to the first window in reception, where a primary care clinician will find out why they have come. Using ‘streaming criteria’ agreed by Brisdoc and UH Bristol, they will stream the person either to ED or to a new primary care hub (PCH). (The streaming criteria are available on the website www.bristolccg.nhs.uk/jointfrontdoor).

The streaming clinicians will stream a total of 32 people per day to the Primary Care Hub. We will be collecting data on the number of additional people who could have been streamed to the PCH if there was the capacity to help inform the future model.

#### How will the pilot affect the GP Support Unit or the Out of Hours service?

Currently ED staff send one person per hour to GPSU or OOH. During the pilot this will stop and all referrals to GPSU and OOH will be via the streaming clinician. Otherwise GPSU and OOH will continue to provide their service as normal.

#### Who will be clinically responsible for people sent to the PCH?

Brisdoc will be clinically responsible for the people streamed to the PCH. All the details about their visit and the care they received will be put into Brisdoc’s Adastra IT system.

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#### How will we know if the pilot has been successful?

The Collaboration for Leadership in Applied Health Research and Care (CLAHRC) from the University of Bristol are working with us to evaluate the pilot. We will collect data, daily, weekly, monthly and at the end of the pilot and share this data widely. We will use the (continued on page four)
data to help us amend the pilot as we go along.

Some of the measures we are collecting are:
- Number of people streamed to the PCH
- Number of people seen in the PCH
- Number of people who could have been seen in the PCH if there was more capacity
- Number of people who had to return from the PCH to ED and the reasons why
- Number of people streamed to the PCH who are not registered with a GP
- Top 20 diagnosis and treatment of people seen in the PCH
- Number of attendances and admissions via ED
- Number of people seen within four hours in ED
- Number of people seen within two and four hours in the PCH
- Number of complaints relating to the new service
- Number of re-attendances within seven days with the same presentation
- Qualitative data from interviews with service users, carers and staff members

What will happen if the streaming or primary care clinicians are off sick?
If one of the streaming or Primary Care Hub clinicians phones in sick, Brisdoc will try to get a replacement from one of the agencies they usually work with.

If that is not possible, they will ensure there is a clinician in the Primary Care Hub to see and treat people. All service users coming to the Emergency Department with no streaming nurse will be seen by ED triage staff and they will stream people up to the PCH, using the same streaming criteria that the primary care streaming clinician uses.

Any other questions?
We plan to produce a sheet of frequently asked questions so if there are other questions you have please let us know by emailing Elizabeth Williams at Elizabeth.williams@bristolccg.nhs.uk.

(continued from page 3)

Urgent Care Summit

Please join us at the Urgent Care Summit where we will be discussing this pilot and plans for new urgent care services.

The event will include:
- Jonathan Benger, national clinical director for urgent care for NHS England, presenting on the national direction of travel
- Learning from others who have set up urgent care centres
- Sharing the initial data from the primary care streaming pilot at the BRI ED.

When: Wednesday 23 November
10am – 1pm

Where: Broadmead Baptist Church,
Bristol, BS1 3HY

To register attendance contact Amy Carr
on: email: Amy.Carr@bristolccg.nhs.uk
Telephone: 0117 900 3411

Project timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>October</td>
<td>Start of pilot in Adult ED</td>
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<tr>
<td>November</td>
<td>Start of pilot in Children’s ED</td>
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<tr>
<td>23 November</td>
<td>Urgent Care Summit</td>
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<tr>
<td>February 2017</td>
<td>Announcement of initial evaluation results</td>
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Announce plan for implementation of long term service and new urgent care services (subject to Bristol CCG Governing Body approval)
Patient arrives

Stream patient

Check available appointments

No available slots

Record tally

Available slots

Add patient to Adastran

Book appointment

Issue directions card

ED

Primary Care Hub Reception

AC receptionist to inform GPSU call handler 14:00 - 18:00 (weekdays only)

OOH receptionist 18:00 – 20:00 (weekdays) and 14:00 – 20:00 (weekends)

‘Arrived’ in Adastran

Patient leaves

Discharge from Adastran

BNSSG resident

Electronic message sent to local GP

Printed discharge summary sent to GP

Advanced Nurse Practitioner / GP

Patient treated as required

Discharge from Adastran and referred on

BNSSG resident

Electronic message sent to local GP

Printed discharge summary sent to GP

Discharge from Adastran and returned to ED

Not local

Patient leaves
To Be Process Flow for Streaming Children from ED to Primary Care Hub V1.0

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**Patient**
- Parent and Child arrive

**Streaming Nurse**
- Stream patient
- Check available appointments
- No available slots
- Record tally
  - Available slots
  - Add patient to Adastra
  - Book appointment
  - Issue directions card

**ED Receptionist**
- Add patient to Medway
- Treated by ED
- ‘Arrived’ in Adastra

**Primary Care Hub Reception**
- AC receptionist to inform GPSU call handler 14:00 - 18:00 (weekdays only)
  - OOH receptionist 18:00 – 20:00 (weekdays) and 14:00 – 20:00 (weekends)

**Advanced Nurse Practitioner / GP**
- Patient treated as required
  - No referral required
  - Discharge from Adastra
  - BNSSG resident
  - Electronic message sent to local GP
  - Printed discharge summary sent to GP
- Referral required
  - Referral to Community Team
  - Discharge from Adastra and returned to ED
  - Not local

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Parent and Child leave