



Humber and North Yorkshire
Health and Care Partnership



North Yorkshire and York Urgent Care

North Yorkshire Scrutiny of Health Committee

8th September 2023

- In January 2023 the government released a 'delivery plan for recovering urgent and emergency care services' post the Covid-19 pandemic.
- Expanding care outside of hospital is one of the key aspects of the plan – specifically an increase in referrals to and utilisation of urgent care services in Winter 2023/24 and an increase in the transfer of patients from ambulances directly to community based services.
- In the development of all services we take into account the delivery requirements of the 10 high impact initiatives (published by NHSE in July 2023).
- North Yorkshire is a complex geography with variation in population needs and health inequalities across our different communities. We consider all of these factors when designing access to local services.
- In North Yorkshire we are working to transform our current, complex, system and develop a range of options to manage the flow of patients through our emergency departments (ED).
- We will do this by implementing a single integrated urgent care specification, locally delivered, which is simple to navigate and easy to access.
- Urgent Care does not operate in isolation so we are developing a range of service models across our system to provide better access and reduce the need for hospital attendances and admissions.



Unwell? Choose well



Self Care

Minor ailments should be treated at home

Minor cuts and grazes
Minor bruises
Minor sprains
Coughs and colds



Pharmacy

Local expert advice

Minor illnesses
Headaches
Stomach upsets
Bites & stings



NHS 111

Non-emergency help

Use NHS 111 online if you're unsure what service you need



GP Practice

A skilled team of medical professionals

Lasting symptoms
Chronic pain
Long term conditions
New prescriptions



Urgent Care

Urgent Treatment Centres

Breaks & sprains
x-rays
Cuts & burns
Fever & rashes



A&E or 999

For emergencies only

Choking
Chest pain
Blacking out
Serious blood loss

If you can, use online services in the first instance



Mental Health

For urgent mental health help

Text "SHOUT" to 85258 for free from a UK mobile network or scan the QR code to find a local helpline

SCAN ME



- All parts of the health and care system provide urgent care to a degree.
- Urgent treatment centres (UTCs) provide **urgent but non-emergency** medical help.
- **Urgent treatment centres are clinically led** by doctors (sometimes GPs) working with nurses to deliver the service.
- **UTCs can diagnose and deal with many of the common problems that people go to A&E with including:**
 - sprains and strains
 - suspected broken bones
 - injuries, cuts and bruises
 - stomach pain
 - breathing problems
 - vomiting and diarrhoea
 - high temperature in children
 - mental health concerns

Urgent treatment centres:

- York
- Whitby
- Scarborough
- Malton
- Selby
- Northallerton

Emergency Departments:

- York
- Harrogate
- Scarborough

Minor Injury Unit (MIU):

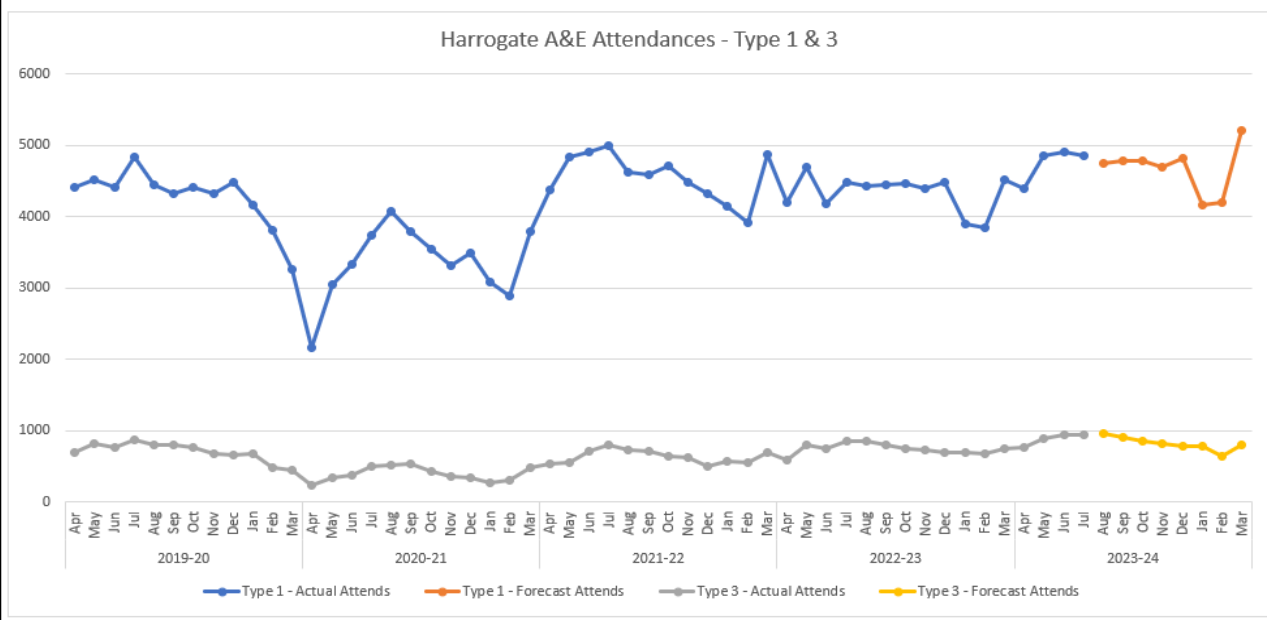
- Ripon (new operating model in development)

UTCs*	Operating hours
York	16hrs per day walk in
Whitby	12hrs per day walk in
Scarborough	24/7 walk in
Malton	12hrs per day walk in
Selby	12hrs per day
Northallerton	24/7 walk in
Ripon (MIU)	12hrs per day walk in - injury service only

*All centres also have GP Out of Hours on-site

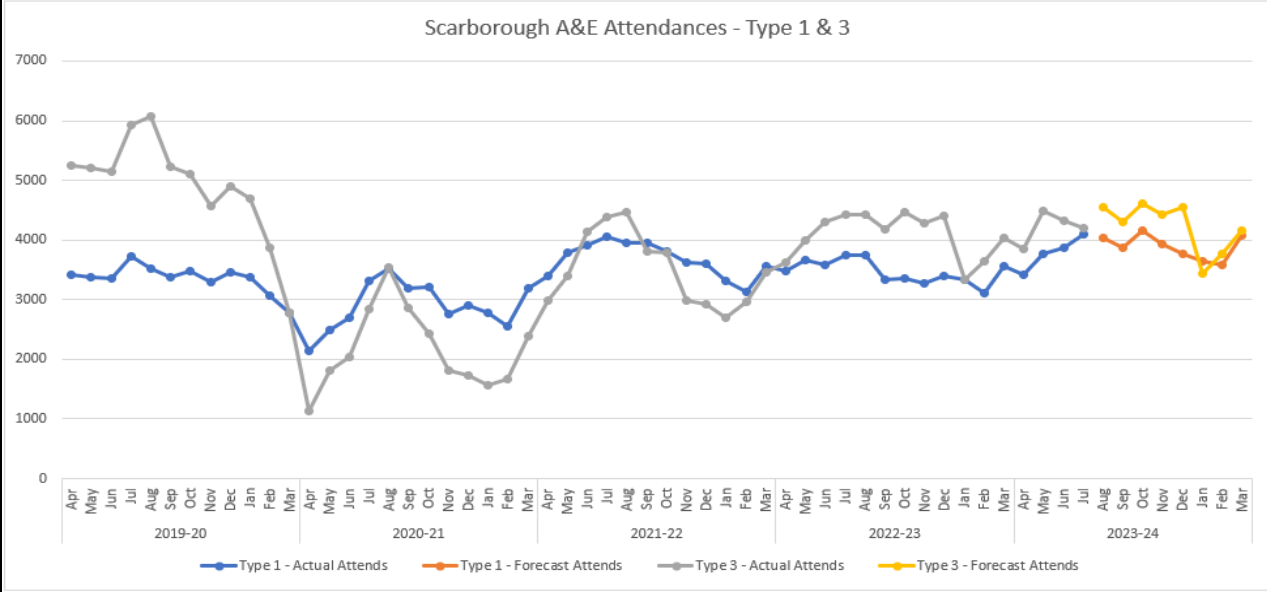
Emergency Department and UTC Activity 2019/20 to 2023/24

Harrogate includes Ripon Type 3



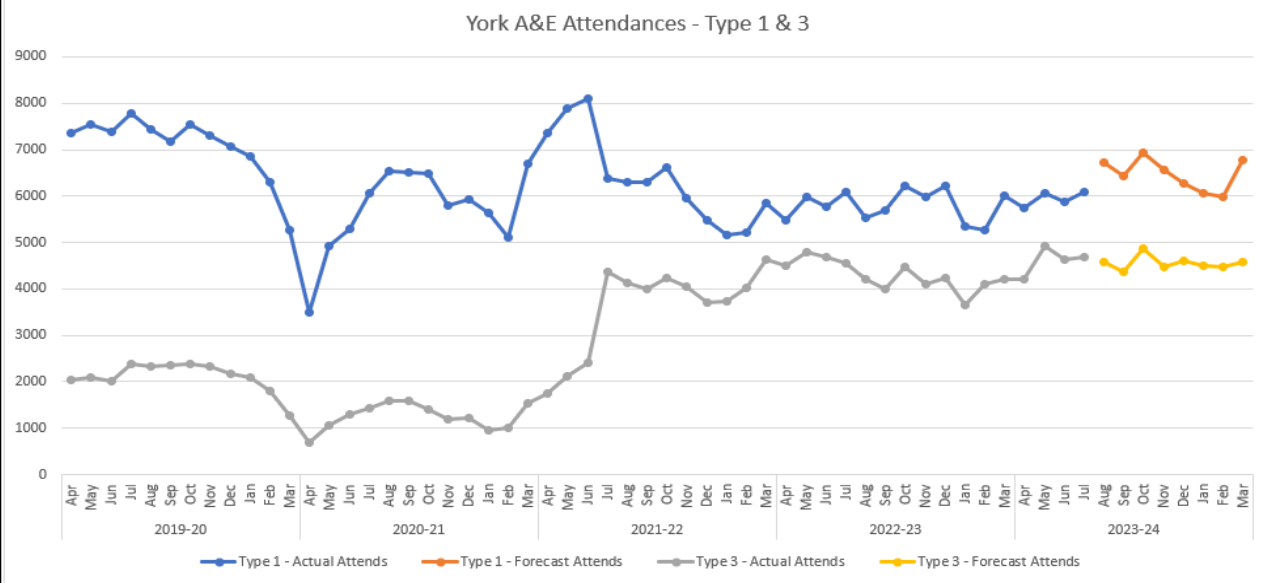
Scarborough site including Bridlington and Malton Type 3

Note: Data quality issues for Type 3 sites in previous years.



York site including Selby Type 3

Note: Data quality issues for Type 3 sites in previous years.



- **Graphs show activity demand for ED (Type 1) and UTC (Type 3) between 2019/20 and 2023/24**
- Post Covid-19 there has been a **steady increase in demand for both ED and UTC** provision across North Yorkshire
- **A marked increased in the acuity of patients** presenting via both ambulance and walk in is directly impacting on flow and 4hr ED performance at all sites
- Harrogate data includes Ripon MIU
- York data includes Selby UTC
- Scarborough data includes Bridlington and Malton UTCs

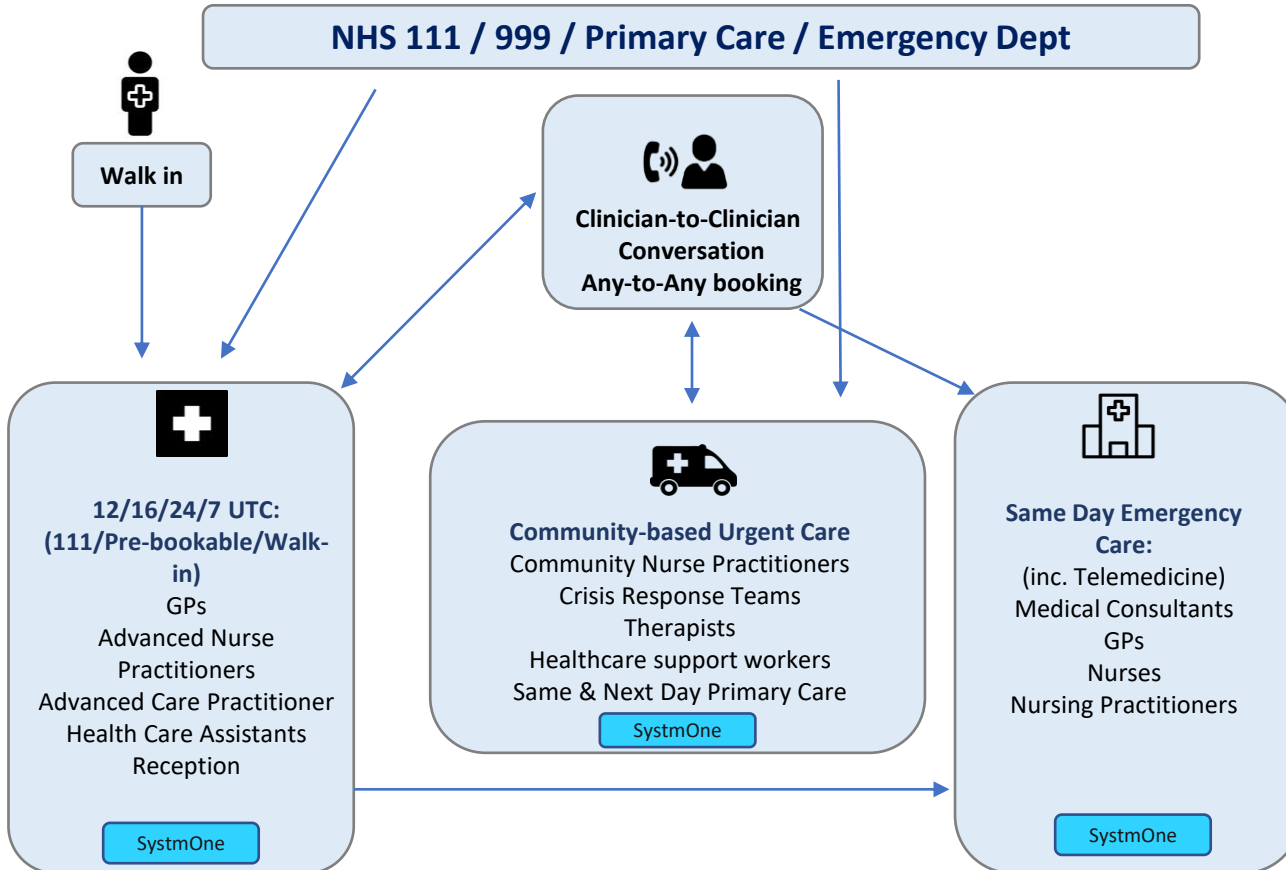
We have made significant progress implementing a new model of urgent care which will address the challenges of provision, demand and access ahead of this Winter. These include:

- **The North Yorkshire and York Urgent Care Board and the North Yorkshire and York Integrated Urgent Care (IUC) Redesign and Procurement Groups have been established.** These oversee the delivery of winter planning, implementation of new service models and operational oversight on system performance to provide operational resilience.
- **Working with key providers** across York and Scarborough to increase staff resilience across the Trust footprint in both GP Out Of Hours services and the Urgent Treatment Centres ahead of this winter.
- **To support the timely ambulance handovers we have commissioned CIPHER to provide a cohorting service 24/7** at Scarborough and York Hospitals until 31st March 2024.
- **A new Emergency Department (1st phase) opened at York hospital** in July 2023
- **Improvement of the Emergency Department at Scarborough hospital** in progress and planned to open in April 2024
- Improving **staffing resilience at Selby UTC in place** for this winter
- We have **created 213 additional roles to provide additional capacity in primary care** and support increases in same day and next day urgent care demand. Types of roles include Mental Health Support Workers, Social Prescribers and Physiotherapists.
- Refreshed system **escalation plan operating across North Yorkshire and York to improve how the whole system responds** to surge in demand and provides mutual aid and support where and when it's needed.
- Design and implementation of a new 24/7 service specification from April 2024 which delivers a **consistent patient offer (see slide 8 below).**

Urgent Care transformation sits within the context of wider system developments and is particularly co-dependant on Community Services. In place for Winter 23/24 are:

- **New intermediate care model** is currently being developed in partnership with NYC and is starting to reduce the number of people **not meeting the criteria to reside in acute hospitals** as well as impacting on long term care outcomes.
- **Strengthened Home First capacity** based on reablement and therapy working in an integrated approach is supporting more hospital discharges, including a new joint Home First team in Hambleton and Richmondshire.
- **In-reach therapy from community providers into 24 intermediate care beds** in NYC residential facilities allows appropriate patients to come out of hospital more quickly and is allowing them to return home at the end of their stay.
- **42 new Virtual Ward beds are now in place through partnerships between acute and community services.** Work is underway to build clinical expertise, strengthen consultant and GP medical oversight, extend bed numbers and promote use of the service.
- **2 hour 8am – 8pm urgent crisis response services** delivered through all 3 community providers across 9 clinical specifications; **trajectory of 513 patients** per month on target for delivery by winter 2023/24.
- Expansion of **Hospital at Home services** and **community transport** schemes to support discharge, and ongoing programme of investment in partnership with VSCE services.
- **Immedicare** telemedicine service in place in 79 care homes across North Yorkshire providing urgent care advice.

Emerging future model: Integrated Urgent Care



We aim to have a fully integrated urgent care service with local GPs, Yorkshire Ambulance Service, NHS111 and other providers in place by 1st April 2024. This will mean:

- A mutually agreed, mutually 'owned' joint model between primary, urgent and community care.
- 'Handover' rather than 'handoff' of patients and their care and signposting to the most appropriate place for patients to be seen.
- Removal of duplication and overlaps between services.
- A locally GP-run clinical assessment service 24/7 for all potential referrers including YAS – enabling GPs to have access to same day emergency care (SDEC) and speciality care clinical decision making.
- New working models / direct access with SDEC units.