

**Locality Commissioning Meeting
North East**

Date of Meeting: 10 July 2019		Paper No: 10				
Title of Paper: Urgent Same Day Requests – Feedback from Practices - April 2019						
Is this paper for	Discussion		Decision		Information	✓

Purpose of Paper:

The information in this paper was compiled for use by Dr Ed Cappelletti for an Urgent Care project. His reporting will come out later. Meantime the information is being shared across the Locality Group in case it is useful.

Action Required:

None

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Urgent Same Day Requests – Feedback from Practices - April 2019

North East Locality

Alchester Medical Practice

1. Reception triage into Dr/nurse urgent appointment: Reception signpost actively as appropriate (ie physio appointments, check patient has been to pharmacist, midwife, talking spaces, nurse appointment etc etc)
2. Dr triage: Yes – now supported by ECP for minor illness/injury. ECP will be trained to prescribe
3. Come sit and wait: Actively discouraged
4. Use of hub appointments - is this booked via reception triage or Dr triage: Reception from protocol
5. Any other potential variations or access routes I haven't thought of? Don't think so

Bicester Health Centre:

1. Reception triage into Dr/nurse urgent appointment:
 2. Dr triage:
 3. Come sit and wait: Reception team ask patient if they feel it is urgent for today and if patients says yes patient is advised to come down for the morning or afternoon (depending on time of pt call) Sit and Wait session. When NAH is available, appointments are offered if the patient describes symptoms within NAH referral criteria
 4. Use of hub appointments - is this booked via reception triage or Dr triage:
 5. Any other potential variations or access routes I haven't thought of?
- For example, in my practice, if a patient phones in for a same day appointment, and the receptionist confirms it is medically urgent for the day, then they are added to the Duty Dr's telephone list and the patient is told to expect a call back, typically within the hour.

Gosford Hill Medical Practice

Dr triage

Islip Medical Practice

1. Reception triage into Dr/nurse urgent appointment:
 2. Dr triage:
 3. Come sit and wait:
 4. Use of hub appointments - is this booked via reception triage or Dr triage: Both
 5. Any other potential variations or access routes I haven't thought of?
- Our receptionist also signpost as much as possible eg MEC service, website email (send in photo of rash etc) & MIU

For example, in my practice, if a patient phones in for a same day appointment, and the receptionist confirms it is medically urgent for the day, then they are added to the Duty Dr's telephone list and the patient is told to expect a call back, typically within the hour.

KEY Medical Practice

We are now predominantly utilising our Same Day Access team for same day demand. This comprises one ANP and two paramedic practitioners.

Our receptionists are able to book patients directly into appointments with the SDA team, following a protocol which has been written by the Same Day Access manager (ANP).

They also book directly into the daytime hub appointments, using the criteria provided by PML.

Any patients who have an urgent medical need which cannot be dealt with by either the SDA team or in the hub are put onto the duty doctor's telephone triage list. We currently have three sessions of duty doctor provision per day. The duty doctor will either call the patient and deal with their query over the phone, call them and arrange a mutually agreeable time to see them in the surgery or triage their request and book them in with the SDA team. Our SDA team also spend part of their day making telephone calls from the duty doctor's triage list where considered appropriate.

MONTGOMERY-HOUSE SURGERY

- Patients contact Practice by Phone or via eConsult (encouraging the use of eConsult)
- Patient Services can either put direct onto HUB appt if appropriate or onto Practice Triage list.
- Patient Services signpost to allied healthcare services as appropriate (MECs, Pharmacy etc)
- Same day team (GP or Minor Illness Nurse) review issue
 - if eConsult provisional questions asked and red-flagged, info placed on patient record ready for same day team review. Clinician can call patient, invite to f2f, or signpost via patient services
 - If phonecall same day team call patient and review. If f2f required patient invited in for a embargoed appt.
- No promise of phoneback in a certain time as priority driven, but indicate up to 2 hours normally

Want to move to an eventual 75% eConsult with MI Nurses/Paramedics with a Duty GP overseeing same day MI.

Woodstock

We manage by

1. Firstly using hub appointments if they are suitable and available, booked by the reception team.
2. The reception team triage into the urgent appointment Dr/nurse appointments
3. Receptionists may add patients to a phone call list with duty or usual doctor/nurse if judged appropriate e.g. query on meds.