


Agenda Item: 9.0

<p>Governing Body Meeting <i>held in public</i></p>	<p>Report</p> <p>Date of Meeting: 6th September 2018</p>
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Report Title	Urgent Treatment Centre		
Report Author	Presented By	Responsible Director	
Michael Maynard	Jonathan Kirkham, Jane Meggitt	Jane Meggitt	
		Signature: 	
Purpose for presenting report	<i>To provide an update on the progress of mobilisation of the Urgent Treatment Centre</i>		
Action Required:	For information only		
Approval Route:	<i>Directors, Executive Committee</i>		
Further Assurance:			

Which Strategic Objectives does this report provide evidence for?	Please Tick
	✓
We will commission high quality, safe and sustainable models of care that deliver effective clinical outcomes and patient experience using evidence based decisions and best practice	✓
We will ensure that there is a financially sustainable and affordable healthcare system in Bedfordshire.	✓
We will lead, engage and operate as an effective place based and STP wide system partner to achieve greater integration of care delivery.	✓
We will support local people and stakeholders to have an influence on services we commission to ensure our decisions are informed and shaped by local views and insights.	✓
We will operate and manage our Governing Body to the highest standards of accountability and transparency.	✓

Implications/Assessments	Yes	No	N/A
Have any financial implications been signed off by the Chief Finance Officer?	✓		
Have any quality implications been signed off by the Director of Nursing & Quality?	✓		
Have any privacy implications been signed off by the Head of Information Governance?			✓
Have any conflicts of interest implications been signed off by the Corporate Office?	✓		
Have any public engagement implications been signed off by the Head of Communications & Engagement?	✓		
Has an Equality Impact Assessment been carried out?			✓

Key Risks	<i>Main areas of risk are:</i>			
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Risk Identified	Impact	Likelihood	Score	Mitigations
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Staffing – Although a number of nurses have been recruited, there are no GP's in place in the service (or GP Lead).	3	3	9	BHT have 3 GP's apply for the substantive post, with an additional 5 requiring shift work
Executive Summary	<p>This paper provides a high level update on the emerging changes to new Urgent Treatment Centre programme and the potential impact on the timeline</p> <p>It shows progress against the critical areas of deliver and the actions required to mobilise the service for a go live of the 1st October 18</p>			

Urgent Treatment Centre Update

Date: 30th August 2018

Summary

This paper provides a high level update on the emerging changes to the new Urgent Treatment Centre

Background

The Urgent Treatment Centre remains on target to deliver on the 1st October 2018. Over the last 4 weeks, there has been progress on the

- Location
- IT
- Clinical Pathways
- Staffing
- Communication
- Contracting

The project teams are meeting weekly to mobilise the service under the governance of the programme board (attended by senior system partners) which meets once a month.

Areas of concern have been highlighted in the risk as above.

Current progress

The UTC project remains on track to start on the 1st October 2018. Key items of progress are:

Location – After internal consultation, BHT have reversed their initial decision to open the UTC in the currently occupied fracture clinic, this is because moving the fracture clinic into the newly renovated Cauldwell Centre by the 1st October 18 could jeopardise fracture clinic patients requiring X-Ray facilities. BHT will open the UTC in the Cauldwell Centre with a review scheduled early April 2019.

The Cauldwell Centre provides a single point of entry with a single triage and patients will be signposted accordingly.

BHT/UTC Preparedness

BHT have conducted 2 test of change days currently, which have both been successful. Leading to the go-live, BHT are planning to continue the test of change day every Sunday throughout September in preparation for the 1st October 18.

On the 27th September 2018 Senior Commissioners and members of the Governing Body are invited to see the completed UTC as part of a final suitability test.

Staff Training is scheduled for the 3rd week in September for new members of UTC staff.

Information Technology

BHT have agreed the I.T solution for the site. On the 21st August a demonstration of Adastra took place to ensure the system could meet all requirements. An internal order for Adastra has been raised and training has been scheduled for staff 2 weeks before go-live. GP's in the UTC will have access to ICE to enable the requesting of investigations and treatments.

Staffing

BHT are currently in the process of interviewing GP's for the service. Currently 3 people have applied to work substantively with an additional 5 GP's interested in working on a shift basis. Interviews and appointment are expected to be concluded w/c 3rd September 18. Supporting staff have been recruited and in place.

Communication

A communication plan has been developed and shared with partners, after the first patient event the decision was taken to promote NHS 111 as the single point of access and provide a stronger focus on engaging with GP's and other delivery partners.

Contracting – Initial contractual discussions to vary the Acute contract have taken place, a draft variation document has been developed and as well as draft KPI's. KPI's have been reviewed by clinical leads and due to sign off w/c 3rd September 18.

Clinical Pathways – Clinical leads have met to finalise the diagnostic pathway. BHT have agreed to meet all the mandatory tests with exception of D-dimer and X Ray (these will be conducted in the Emergency Department) The mandatory tests agreed to be offered are;

- swabs,
- urine dips,
- urine sent for culture
- glucometer glucose
- urine pregnancy tests
- ECG

- Blood tests

If a patient requires a routine blood test or X-Ray, the UTC GP can request the test with results sent to the patient's own GP.

When a blood request is required or D-dimer, the GP will have the support of the A&E Consultant to make the request and interpret results. After the pilot begins the UTC will monitor requests for other diagnostics over a 3-6 month period.

Next Steps Summary

The following activities are due for completion in the coming weeks

- Recruitment of GP's and Nurse
- Attendance at key stakeholder events
- Finalisation of contract variation

Recommendation

Members of the governing Body are asked to:

- Note the progress being made on the establishment of the Urgent Treatment Centre for the population of Bedfordshire