

Urgent Care Performance Over Winter

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National Context – Immediate Performance After the New Year

There has been wide scale reporting in the national media around the winter pressures facing the NHS this year and the ability of Health and Social Care systems to be able to cope with these pressures.

These were greatest in the second week of the New Year were during the week ending 08/01/2017 it was reported based on the daily reporting by local systems that only 75% of patients in that week had been seen and treated in A&E within 4 hours, and nationally only one Trust hitting the 95% target, and a further nine other trusts achieving above 90%, against the national standard of 95% being seen within 4 hours. Locally performance over the Christmas and New Year with on average UHCW delivering around 82%, GEH 84% and SWFT 92% in the immediate weeks after Christmas.

Nationally at this point there were a reported 485 patients with long waits over 12 hours from the decision to admit to being found a bed or discharged back home. This was treble the number experienced during the whole of January last year. Locally in the period 1st December through to the end of January there have been no reported over 12 hour waits at UHCW, two over 12 hour waits reported at the George Eliot Hospital (GEH), and none reported at South Warwickshire Hospital (SWFT).

As a guide on relative performance the position below shows the A&E 4 hour performance of Trusts within the West Midlands for the week immediately after the New Year.

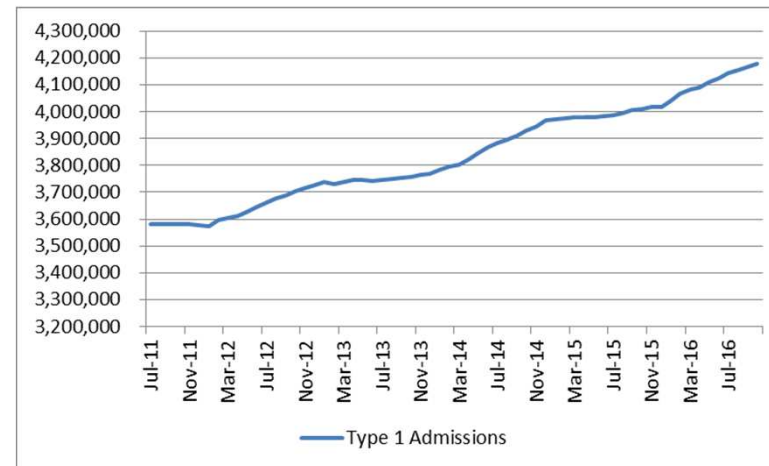
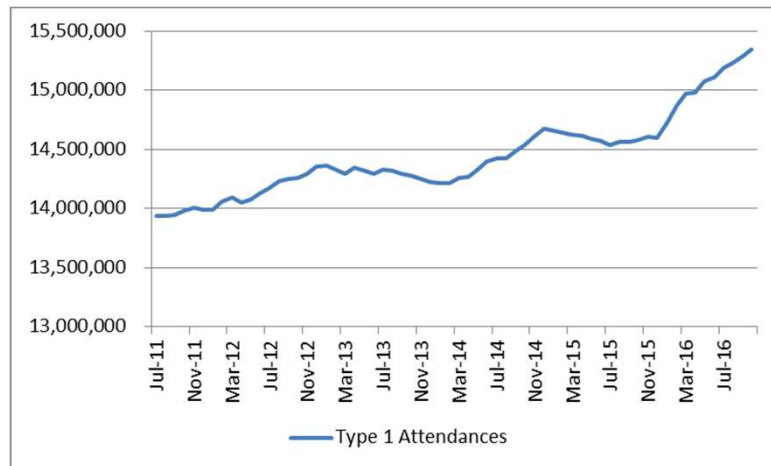
A&E Performance West Midlands Hospitals - Christmas and the New Year

	Walsall	Worcs	Alex	Ghope	WVT	UHB	Heartlands	Sandwell	Rhall	NX	UHCW	GEH	City	SWFT	Solihull
09/01/17	63.6%	51.5%	78.4%	70.4%	65.1%	74.0%	74.4%	76.9%	74.0%	64.9%	74.8%	77.0%	78.9%	80.2%	95.6%
08/01/17	52.1%	60.5%	91.9%	66.9%	62.4%	74.6%	68.1%	71.9%	61.5%	70.9%	82.0%	80.5%	81.8%	89.2%	98.1%
07/01/17	50.0%	62.4%	79.8%	63.9%	61.8%	71.6%	66.5%	76.3%	71.2%	74.1%	77.8%	74.2%	84.4%	98.8%	99.1%
06/01/17	62.0%	58.4%	54.5%	71.4%	87.9%	72.1%	69.6%	62.8%	71.0%	77.3%	84.7%	70.9%	68.7%	96.2%	97.4%
05/01/17	63.4%	57.5%	50.0%	69.9%	83.2%	67.7%	77.9%	66.8%	69.8%	80.6%	74.5%	74.7%	75.4%	95.7%	99.1%
04/01/17	43.1%	58.7%	62.2%	73.0%	58.9%	62.3%	66.8%	74.0%	71.8%	71.5%	68.5%	70.6%	84.2%	84.6%	97.6%
03/01/17	69.1%	57.8%	54.5%	60.9%	95.7%	74.0%	71.5%	72.1%	75.2%	69.1%	77.3%	89.1%	79.1%	59.3%	91.6%
02/01/17	57.1%	54.4%	50.6%	72.8%	59.7%	64.3%	74.1%	77.0%	76.7%	84.2%	67.4%	78.7%	82.3%	90.4%	98.3%
01/01/17	49.4%	59.1%	54.5%	69.3%	52.7%	67.2%	70.8%	68.6%	83.2%	77.9%	80.0%	76.5%	88.5%	80.6%	98.8%
New Year Average	56.6%	57.8%	64.1%	68.7%	69.7%	69.8%	71.1%	71.8%	72.7%	74.5%	76.3%	76.9%	80.4%	86.1%	97.3%

National Context – Pressures on A&E Departments

Pressures on A&E services are not specific to Coventry and Warwickshire the position locally reflects essentially the same general pressures as the whole of the England. Nationally attendances i.e. patients arising at A&E are up above last year and at the highest levels ever recorded, with the number of Ambulances arriving at hospital and the calls made by the public to ambulance services again highest ever. Locally over the Christmas and New year calls made to the West Midlands Ambulance Service (WMAS) have been consistently 8-10% above contracted levels and last year.

Attendances at A&E are recorded nationally in 3 types, Type 1 attenders those attending a normal A&E department, Type 2 attenders those attending services such as eye clinics, and Type 3 attenders those attending Minor Injury Units / Urgent Care Centres. Type 1 attenders are those most likely to require treatment and potentially admission to hospital.



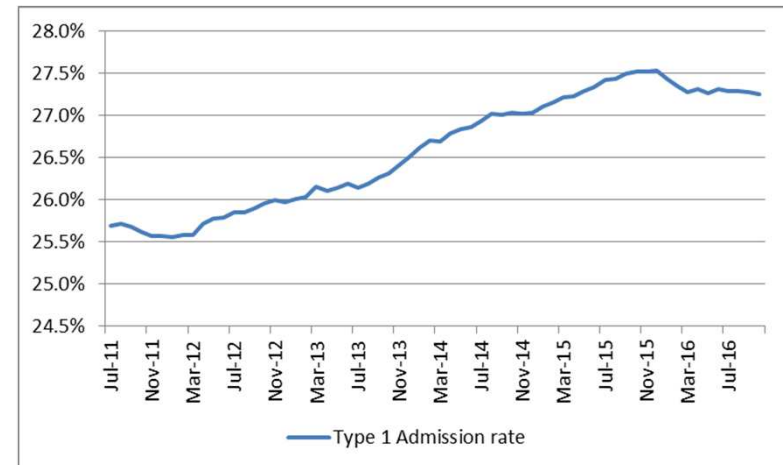
The Graphs above show the national trend for A&E attendances Type 1 as a rolling 12 month figure from July 2011 through to the last national figures available at the end of 2016. When plotted this shows almost a straight line growth month on month nationally and this growth is matched by a similar growth in admissions via these Type 1 attendances. This is against a backdrop of all systems nationally putting in place community alternatives to both attendance and admission.

National Context – Pressures on A&E Departments

Around 27% of Type 1 attendances lead to an admission to hospital, this conversion rate has grown in the last few years, potentially reflecting the diversion of minor patients to alternatives and an increased morbidity of the patients attending at A&E, but is now showing signs of levelling out.

A&E attendance to admission conversion figures at individual trusts vary considerably, Birmingham Children's Hospital (BCH) is around 12%, University Hospitals Birmingham (UHB) which doesn't have children attending as they go to BCH is over 43%. Royal Wolverhampton is 23% .

locally the rates tend to be SWFT 31%, UHCW 31% and GEH 17% this is with a Midlands and East of England average of 35% and the West Midlands average of 31%.



There are two observations to make from this :

- It is going to take a real change in behaviour by patients If attendances at A&E are going to stop continuing to rise both nationally and locally. As a system we need to be clear on the actions being planned locally in relation to the STP plans to reduce them. Although the position locally is varied , This year's year on year growth in attendances at UHCW has been 3%, GEH 9%, and SWFT around 3%. If this growth continues even with a static conversion rate to admissions then inevitably more admissions will also follow. This shows the importance of the STP work on Out of Hospital to redesign urgent care for people with long term and chronic conditions.
- Removing the simple attendances through self-care / use of pharmacies does help in terms of reducing immediate pressures for seeing patients in the emergency department, but the pressures relating to admissions wouldn't necessarily be affected by this. Nationally as well as locally the challenge for systems is why do people still go to A&E even after considerable investments into alternatives for conditions things that could and are being dealt with elsewhere ?

National System Reporting Levels

The National A&E Delivery Board has set out the following expectations around levels of support and intervention, and has required systems to report against these levels each day through to NHS England from the 1st December and through to end of March 2017.

The levels are set nationally as

OPEL 1 – Business as usual, no support or intervention required (overview at Local A&E Delivery Board).

OPEL 2 – Operational pressures being managed at a local A&E Delivery Board with awareness or support as appropriate at a local NHS England / NHS Improvement level.

OPEL 3 – Increased pressures, NHS England / NHS Improvement actively involved as appropriate according to local arrangements and requirements. Regional teams aware of situation and involved where required. National team notified if necessary

OPEL 4 – NHS England / NHS Improvement actively involved in support/intervening to ensure escalation can be stood down as quickly as possible, with regional involvement and support from National teams as appropriate.

Levels 3 and 4 require specific daily briefings on actions being taken, that are discussed both on regional and national teleconferences as to the level of support and intervention to be given to systems.

A&E Performance West Midlands Hospitals - Christmas and the New Year

	Walsall	Worcs	Alex	Ghoke	WVT	UHB	Heartlands	Sandwell	Rhall	NX	UHCW	GEH	City	SWFT	Solihull
09/01/17	63.6%	51.5%	78.4%	70.4%	65.1%	74.0%	74.4%	76.9%	74.0%	64.9%	74.8%	77.0%	78.9%	80.2%	95.6%
08/01/17	52.1%	60.5%	91.9%	66.9%	62.4%	74.6%	68.1%	71.9%	61.5%	70.9%	82.0%	80.5%	81.8%	89.2%	98.1%
07/01/17	50.0%	62.4%	79.8%	63.9%	61.8%	71.6%	66.5%	76.3%	71.2%	74.1%	77.8%	74.2%	84.4%	98.8%	99.1%
06/01/17	62.0%	58.4%	54.5%	71.4%	87.9%	72.1%	69.6%	62.8%	71.0%	77.3%	84.7%	70.9%	68.7%	96.2%	97.4%
05/01/17	63.4%	57.5%	50.0%	69.9%	83.2%	67.7%	77.9%	66.8%	69.8%	80.6%	74.5%	74.7%	75.4%	95.7%	99.1%
04/01/17	43.1%	58.7%	62.2%	73.0%	58.9%	62.3%	66.8%	74.0%	71.8%	71.5%	68.5%	70.6%	84.2%	84.6%	97.6%
03/01/17	69.1%	57.8%	54.5%	60.9%	95.7%	74.0%	71.5%	72.1%	75.2%	69.1%	77.3%	89.1%	79.1%	59.3%	91.6%
02/01/17	57.1%	54.4%	50.6%	72.8%	59.7%	64.3%	74.1%	77.0%	76.7%	84.2%	67.4%	78.7%	82.3%	90.4%	98.3%
01/01/17	49.4%	59.1%	54.5%	69.3%	52.7%	67.2%	70.8%	68.6%	83.2%	77.9%	80.0%	76.5%	88.5%	80.6%	98.8%
New Year Average	56.6%	57.8%	64.1%	68.7%	69.7%	69.8%	71.1%	71.8%	72.7%	74.5%	76.3%	76.9%	80.4%	86.1%	97.3%

	Worcs	Walsall	Alex	WVT	Ghoke	UHB	Sandwell	UHCW	Heartlands	GEH	Rhall	City	NX	SWFT	Solihull
31/12/16	57.3%	60.1%	68.4%	61.1%	69.2%	67.5%	76.6%	72.9%	77.1%	77.1%	75.6%	83.5%	74.8%	87.3%	99.1%
30/12/16	44.4%	53.6%	66.1%	83.1%	78.1%	67.0%	82.0%	80.9%	71.2%	71.4%	77.4%	83.9%	88.2%	90.2%	100.0%
29/12/16	62.4%	44.2%	72.1%	73.7%	74.4%	66.7%	81.3%	75.9%	75.9%	76.2%	70.3%	88.7%	85.6%	77.3%	99.0%
28/12/16	53.6%	56.9%	66.9%	65.7%	77.6%	75.3%	74.9%	84.5%	74.6%	72.8%	83.2%	84.2%	79.6%	85.8%	100.0%
27/12/16	40.8%	58.6%	59.7%	69.1%	71.8%	77.2%	80.2%	66.7%	95.2%	81.1%	79.2%	84.3%	79.1%	89.6%	99.3%
26/12/16	56.5%	67.8%	79.9%	63.1%	73.4%	75.6%	74.6%	86.4%	87.8%	97.1%	96.4%	88.1%	96.7%	96.2%	99.0%
25/12/16	61.7%	86.0%	74.8%	82.7%	91.3%	90.0%	94.1%	97.6%	91.6%	97.5%	99.6%	95.9%	97.0%	98.3%	100.0%
24/12/16	72.5%	74.9%	93.0%	90.1%	86.6%	85.9%	83.1%	96.2%	94.4%	99.5%	97.6%	84.5%	94.3%	96.6%	99.1%
Xmas Average	56.2%	62.8%	72.6%	73.6%	77.8%	75.6%	80.9%	82.6%	83.5%	84.1%	84.9%	86.6%	86.9%	90.2%	99.4%

	Worcs	WVT	Alex	Ghoke	Walsall	Sandwell	UHCW	UHB	Rhall	City	Heartlands	GEH	NX	SWFT	Solihull
23/12/16	60.6%	83.1%	91.3%	77.3%	85.1%	76.2%	94.3%	90.2%	88.8%	90.7%	91.1%	97.9%	96.8%	96.3%	100.0%
22/12/16	66.7%	78.3%	85.3%	76.1%	81.0%	83.7%	79.2%	92.3%	81.6%	91.2%	89.0%	99.4%	98.1%	97.5%	99.0%
21/12/16	51.9%	92.0%	56.3%	84.4%	89.9%	91.0%	85.7%	78.0%	92.0%	82.0%	79.8%	96.1%	98.2%	97.9%	100.0%
20/12/16	64.8%	60.2%	51.6%	68.1%	83.1%	72.7%	70.2%	65.8%	75.0%	79.7%	74.2%	79.7%	94.4%	92.9%	99.1%
19/12/16	64.8%	64.7%	76.1%	72.0%	71.6%	73.3%	76.2%	71.0%	68.2%	81.3%	76.7%	77.4%	87.1%	98.2%	98.4%
18/12/16	72.8%	62.3%	72.7%	67.6%	75.0%	72.9%	74.7%	76.2%	84.4%	75.7%	86.0%	86.9%	84.3%	98.6%	98.1%
17/12/16	54.5%	53.4%	76.7%	76.8%	61.1%	79.9%	74.0%	84.7%	70.6%	78.5%	83.4%	83.6%	75.8%	99.4%	100.0%
Week before Xmas	62.3%	70.6%	72.9%	74.6%	78.1%	78.5%	79.2%	79.7%	80.1%	82.7%	82.9%	88.7%	90.7%	97.3%	99.2%

- Without being complacent at all , it can be noted that over the New Year A&E performance by Trusts in Coventry and Warwickshire has been well both below the 95% national standard, but has relatively shown more resilience as a system over this period than others , being towards the top end of performance across the West Midlands as a whole.
- Opel Level 3 was reached by the local system on the 3rd of January and returned to Opel level 2 within 2 days, with Coventry & Rugby being asked for information around the joint work in relation to the Community Hub and an example of good practice by NHS England. This was at a time where nationally on a daily basis between 20-40 systems have been reporting Opel level 3 or above. This supports the assertion that whilst under pressure locally the system has worked collectively to manage these pressures operationally, to continue to ensure a level of operational resilience and continued service for patients.

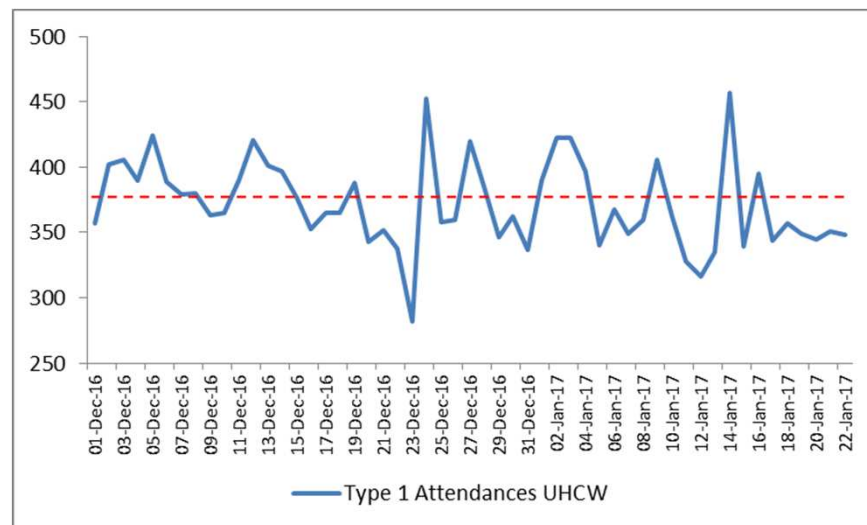
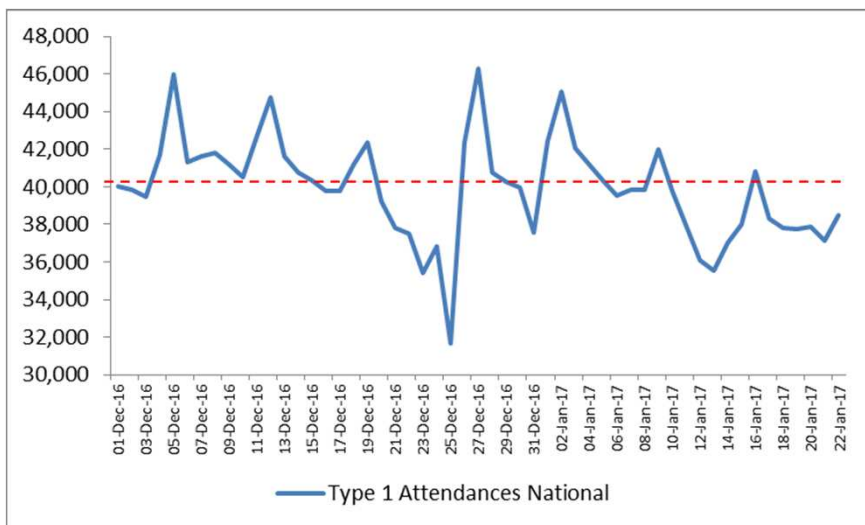
Additional Local Pressures on A&E Departments

- **Norovirus** has affected all three hospitals during this period, with 27 beds affected at SWFT, 25 at UHCW and around 15 at GEH, there was also confirmed Flu cases in ITU at SWFT in the same period.
- All hospitals within Coventry and Warwickshire have utilised planned **escalation capacity** to deal with the demand coming through the doors, with around 100 extra beds routinely in use over that last two weeks – up to 62 at UHCW, 22 at SWFT and 19 at GEH.
- Use of this capacity has impacted on the ability of the Trusts to undertake elective work in the same period, as some of this capacity is surgical capacity and day case.
- **DTOCs, MFFD and bed occupancy figures** play into any discussion about management of winter pressures. As a system we did meet the national requirement to clear beds as much as possible before Christmas to get to below 85% bed occupancy rate for the 24th December. DTOCs however were still well above the 3.5% target of occupied bed days across all three hospitals.
- From bed occupancy being at 85% it then increased day by day across the system and no trust managed to get bed occupancy back to 85% before the New Year – this was the same position nationally and regionally. This was even as a result of using the additional escalation capacity.

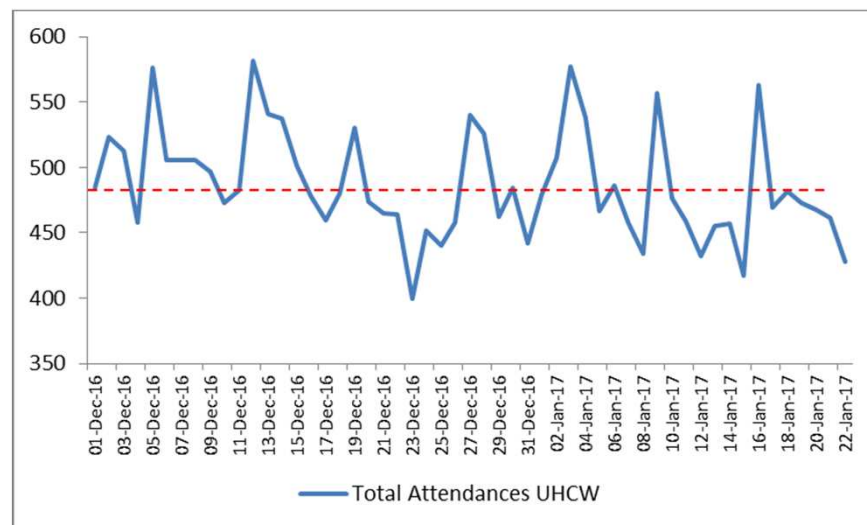
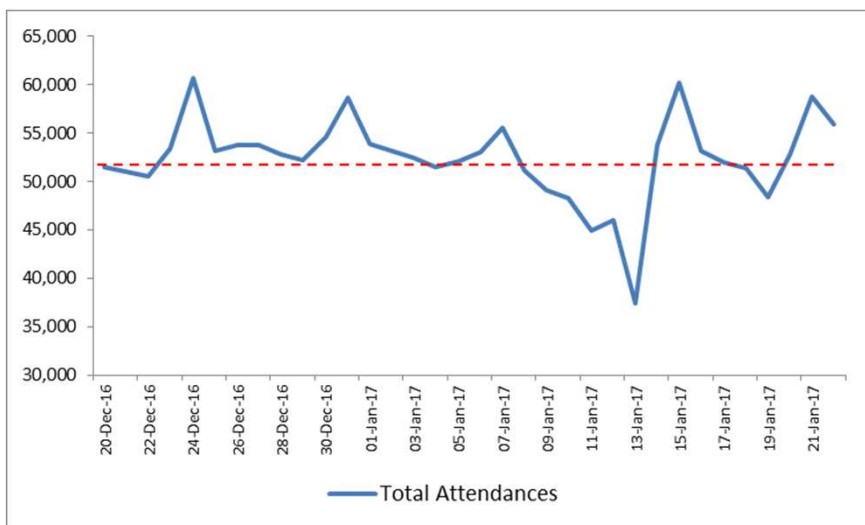
The following graphs show for UHCW some of the key figures that can be taken from the daily national reporting system by Trusts in comparison to the National trends.

The nature of NHS reporting is that the daily sitrep data is the only data available to be published covering winter at present, the monthly figures for performance have yet to be made available, and the contracting activity for the same period which would allow for more detailed analysis is not yet available.

Type 1 Attendances – National / UHCW (Daily Sitrep data)



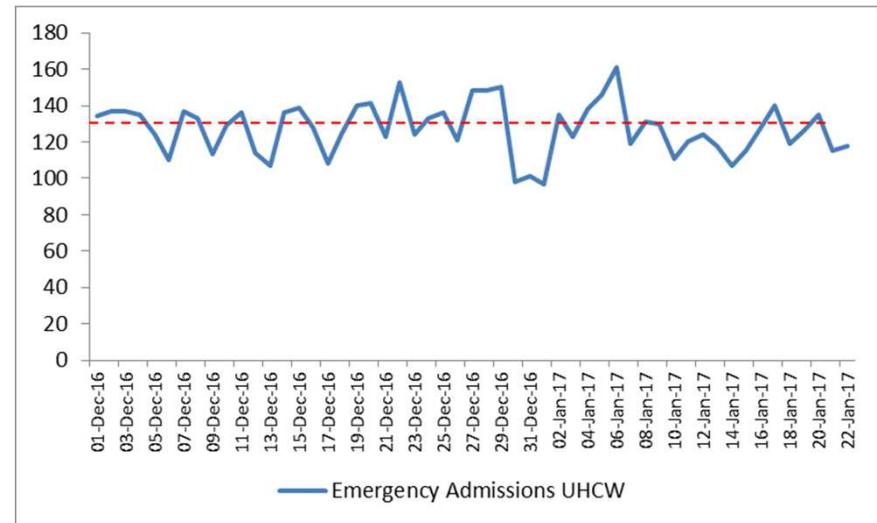
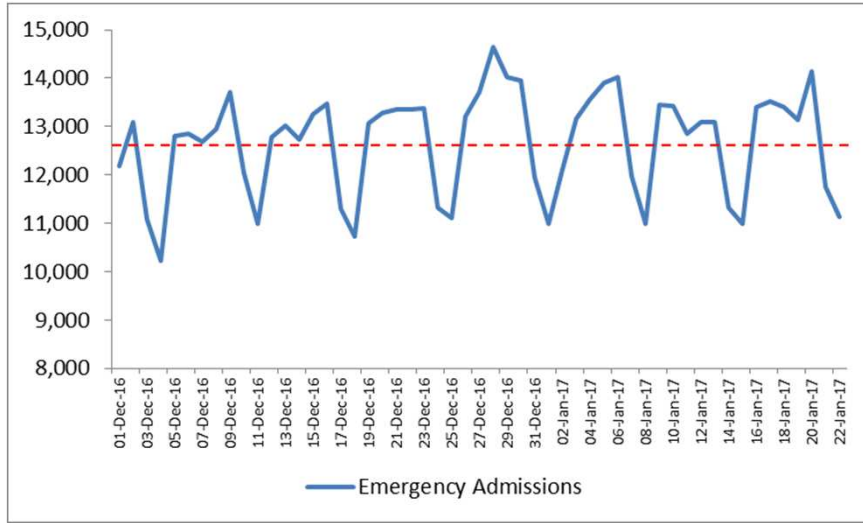
Total Attendances (Types 1, 2 & 3) – National / UHCW



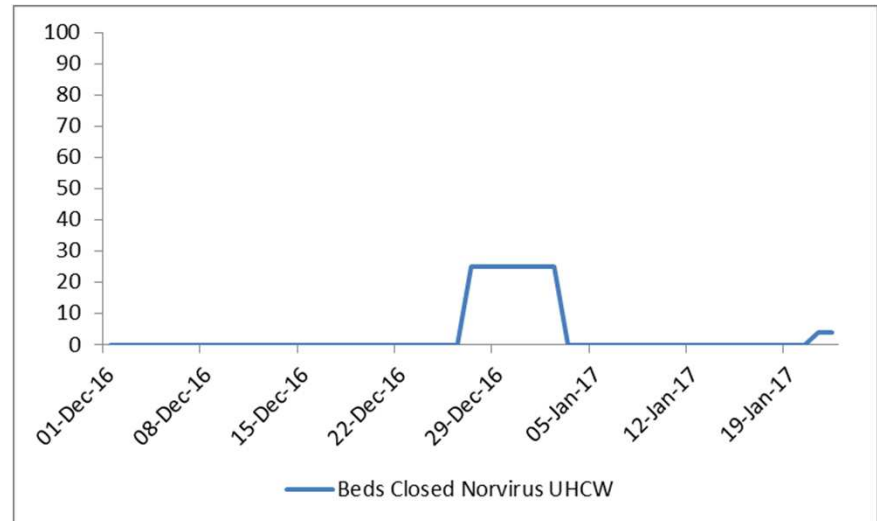
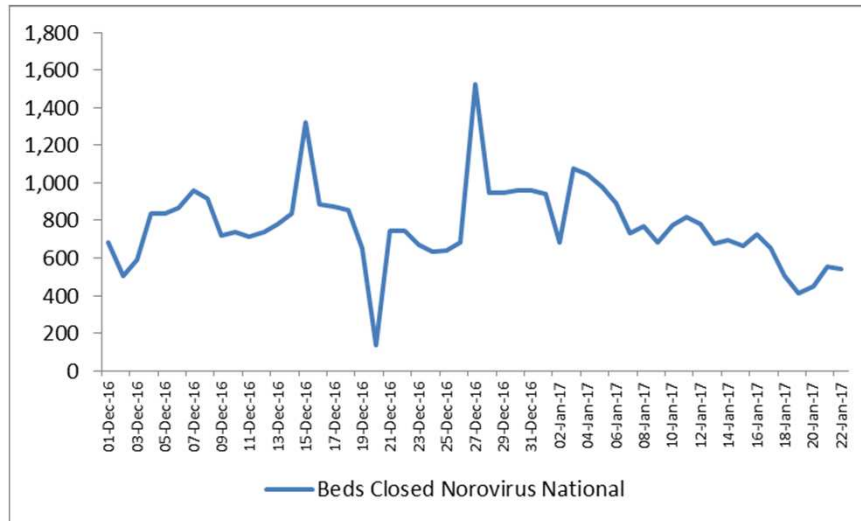
Attendances across December and January have been relatively stable as a average, however it is the peaks in attendances that causes operational issues, and there are clear spikes in attendances on Sunday and Mondays, this compromises capacity at the start of the week, reducing later in the week and then building again on the Sunday/Monday.

Note this level of attendance is again above last years levels (3% at UHCW), plus also it shows that Winter covers a period before and after the actual holiday breaks.

Emergency Admissions – National / UHCW (Daily Sitrep data)



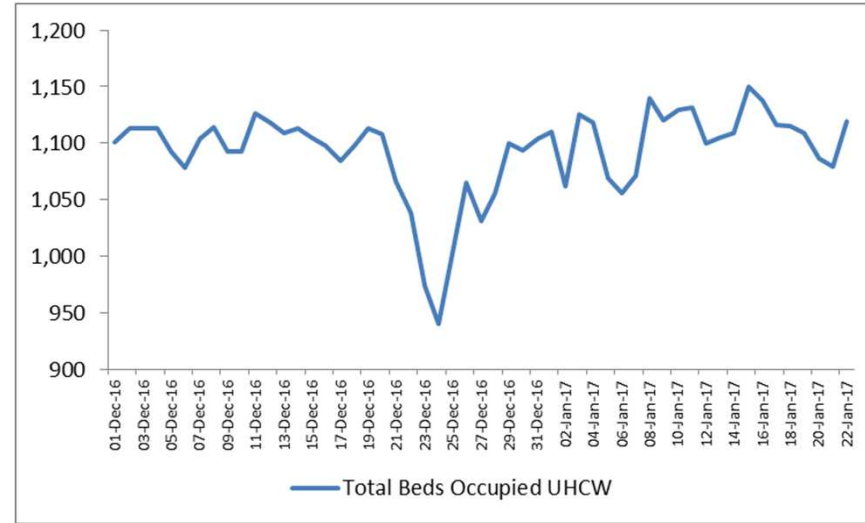
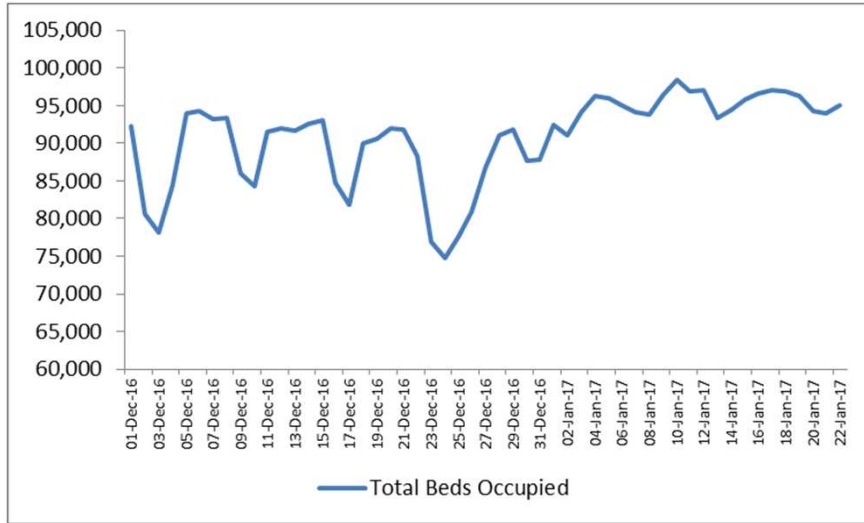
Beds Closed to Norovirus – National / UHCW



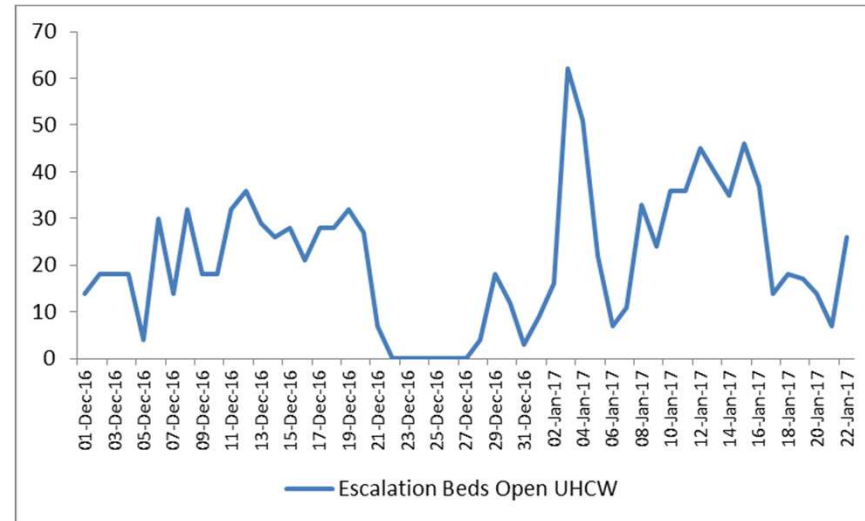
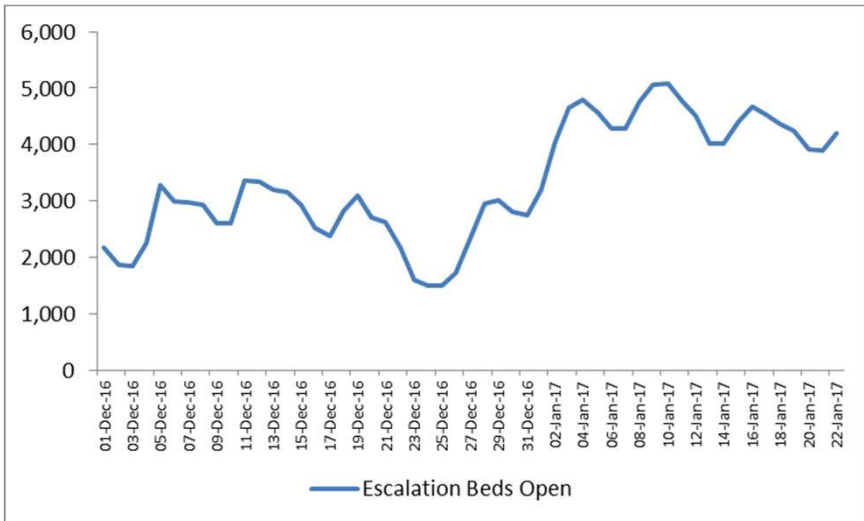
Admissions to hospital reflect the normal weekly pattern with fewer admissions at weekend, but an increased level of admissions as a proportion of attendances over the holiday period, this could reflect a reduction in being able to offer alternatives to support patients in the community during this period, and ability to patients to be supported by their families.

Beds closed to Norovirus were few at UHCW and affected St Cross for a short period of time at the time of peak closures nationally.

Occupied Beds – National / UHCW (Daily Sitrep data)

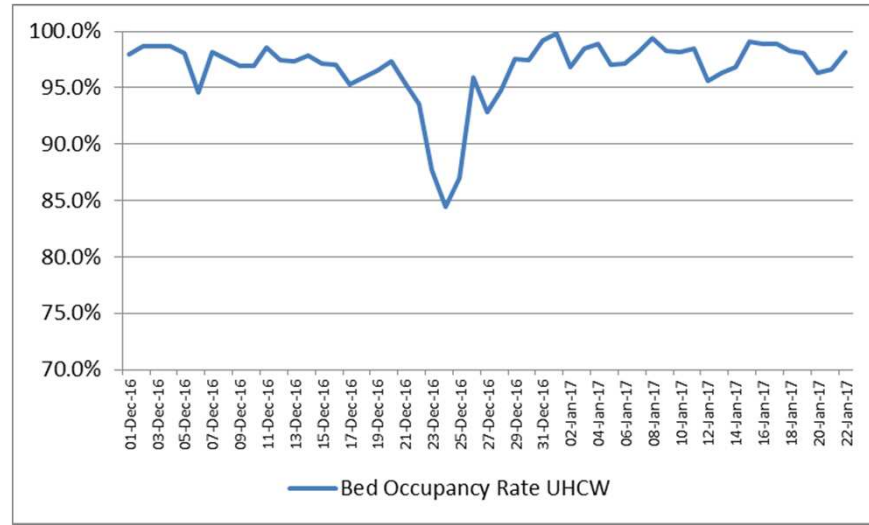
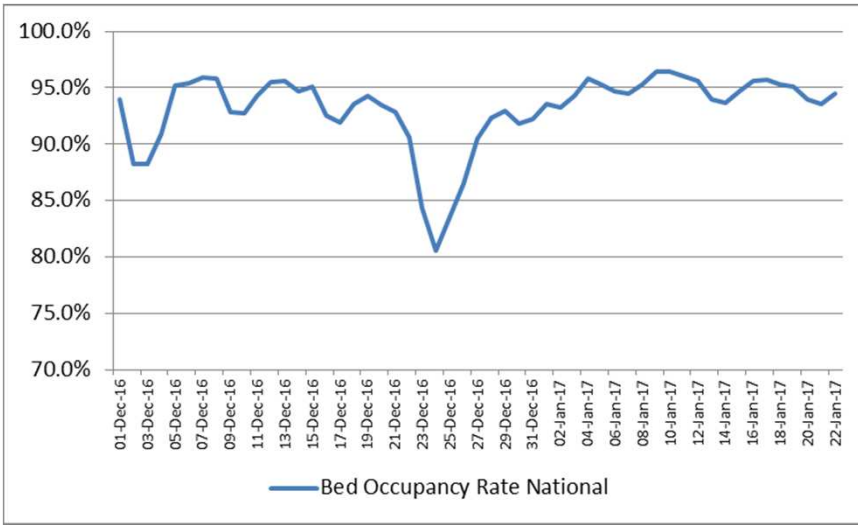


Escalation Beds Open – National / UHCW

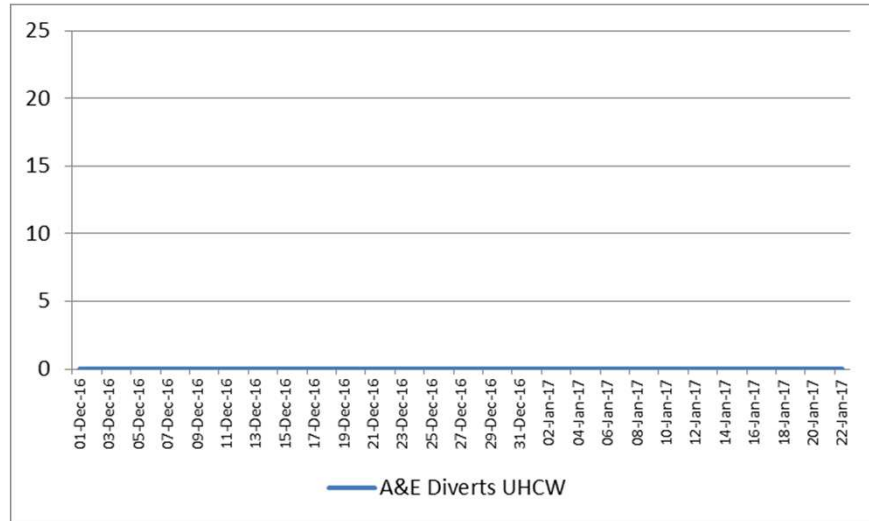
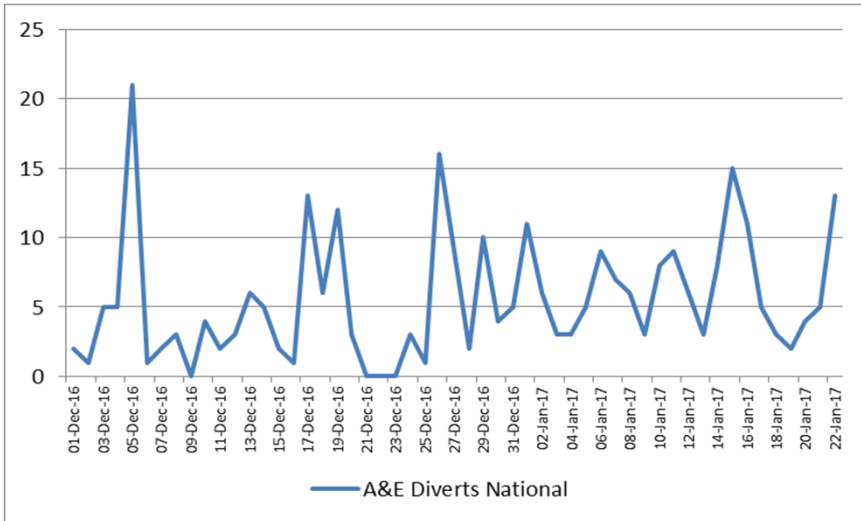


The graphs locally reflect the national position, although it can be seen that the level of occupied beds after Christmas and New Year is higher than before the holiday period, and the pattern of reducing occupied beds at weekend dampens down nationally, reflecting that discharges are not happening as normal, increasing pressures on bed occupancy. This is the key factor that affects the ability to admit to capacity from A&E.

Occupancy Rates – National / UHCW (Daily Sitrep data)



A&E Diverts – National / UHCW



This reflects the earlier slide with bed occupancy falling before the Holiday period but then building up again very quickly, and occupancy rates being higher post New Year than they were in December, reflecting the real pressures on bedded capacity. The target occupancy rate set nationally is 85% we can see that most hospitals are operating well above this. In terms of A&E diversions when a hospital asks for ambulances to be diverted elsewhere to reduce pressures, as shown above over the last two months no diversions have been put in place of UHCW. They did however accept an A&E divert on one day from GEH.

NHS 111

Weekly situation report part B: NHS 111

Dispositions at end of 111 telephone call

28 November 2016 to 01 January 2017

NHS 111 weekly situation report

Provider

Code	NHS 111 area name
Eng	England
111AA1	North East England NHS 111
111AF8	North West inc Blackpool NHS 111
111AD9	Yorkshire and Humber NHS 111
111AA2	Lincolnshire NHS 111
111AA3	Luton NHS 111
111AA4	Nottinghamshire NHS 111
111AA5	Derbyshire NHS 111
111AB2	Hertfordshire NHS 111
111AB3	Great Yarmouth and Waveney NHS 111
111AB9	Norfolk NHS 111
111AC2	Suffolk NHS 111
111AC3	North Essex NHS 111
111AC4	South Essex NHS 111
111AC5	Cambridgeshire and Peterborough NHS 111
111AC6	Northamptonshire NHS 111
111AC7	Milton Keynes NHS 111
111AC8	Leicestershire and Rutland NHS 111
111AF3	Bedfordshire NHS 111
111AF4	Staffordshire NHS 111
111AC9	West Midlands NHS 111
111AA7	Inner North West London NHS 111
111AA9	Hillingdon London NHS 111
111AG5	South West London NHS 111
111AD4	North West London NHS 111
111AD5	North Central London NHS 111
111AD6	Outer North East London NHS 111
111AD7	South East London NHS 111
111AD8	East London and City NHS 111
111AA6	Isle Of Wight NHS 111
111AB4	Oxfordshire NHS 111
111AE1	Mainland Ship NHS 111
111AE2	Buckinghamshire NHS 111
111AE3	Berkshire NHS 111
111AG6	South East Coast exc East Kent NHS 111
111AG4	East Kent NHS 111
111AE5	Dorset NHS 111
111AE6	Banes and Wiltshire NHS 111
111AE7	Bristol, North Somerset and South Gloucestershire NHS 111
111AE8	Gloucestershire and Swindon NHS 111
111AE9	Somerset NHS 111
111AF1	Cornwall NHS 111
111AF2	Devon NHS 111
	NORTH REGION
	MIDLANDS AND EAST REGION
	LONDON REGION
	SOUTH REGION

Ambulance dispatches week ending						
04-Dec	11-Dec	18-Dec	25-Dec	01-Jan	Growth Xmas week	Growth in Xmas week
31,027	32,726	32,369	30,858	41,995	32%	10,250
2,332	2,509	2,453	2,247	3,070	29%	684
4,176	4,084	4,046	4,187	5,671	38%	1,547
3,095	2,993	2,917	2,811	3,782	28%	828
498	482	499	431	593	24%	115
97	115	120	140	150	27%	32
637	694	706	627	839	26%	173
637	688	649	615	884	37%	236
595	609	601	579	875	47%	279
147	167	174	146	182	15%	23
553	596	613	568	714	23%	131
406	477	451	394	587	36%	155
447	526	479	468	667	39%	187
459	464	526	466	597	25%	118
574	538	566	509	716	31%	169
439	489	506	414	598	29%	136
149	129	111	110	178	43%	53
575	624	623	528	753	28%	165
110	154	137	136	176	31%	41
638	679	673	603	883	36%	234
2,132	2,327	2,362	2,339	3,100	35%	810
241	302	284	275	295	7%	19
167	163	178	159	231	39%	64
703	732	688	660	819	18%	123
432	520	476	469	600	27%	125
673	714	698	643	878	29%	196
497	513	569	513	706	35%	183
530	586	504	520	669	25%	134
176	242	283	236	262	12%	27
176	168	145	184	233	38%	64
340	337	384	374	510	42%	151
1,134	1,185	1,073	1,085	1,460	30%	340
207	226	275	256	353	46%	112
458	503	496	478	615	27%	131
2,489	2,591	2,455	2,368	3,163	28%	687
330	476	572	480	714	54%	249
598	631	720	647	771	19%	122
343	392	411	347	484	30%	110
748	837	779	704	1,116	46%	349
365	372	363	367	542	48%	175
347	387	370	360	490	34%	124
418	471	450	453	620	38%	172
959	1,034	984	962	1,449	47%	464
9,603	9,586	9,416	9,245	12,523	32%	3,060
9,093	9,758	9,796	9,073	12,492	32%	3,062
3,419	3,772	3,680	3,475	4,460	24%	873
8,912	9,610	9,477	9,065	12,520	35%	3,254

NHS 111

There was a 32% increase in ambulance dispatches through NHS 111 nationally in the holiday week, compared to the previous weeks averages.

West Midlands saw a 35% increase or 810 conveyances to hospital more than normal that week.

In terms of impact locally averaging it would equate to around an 8% increase in ambulance conveyances in total equivalent to

GEH – 4 per day
UHCW – 12 per day
SWFT – 4 per day

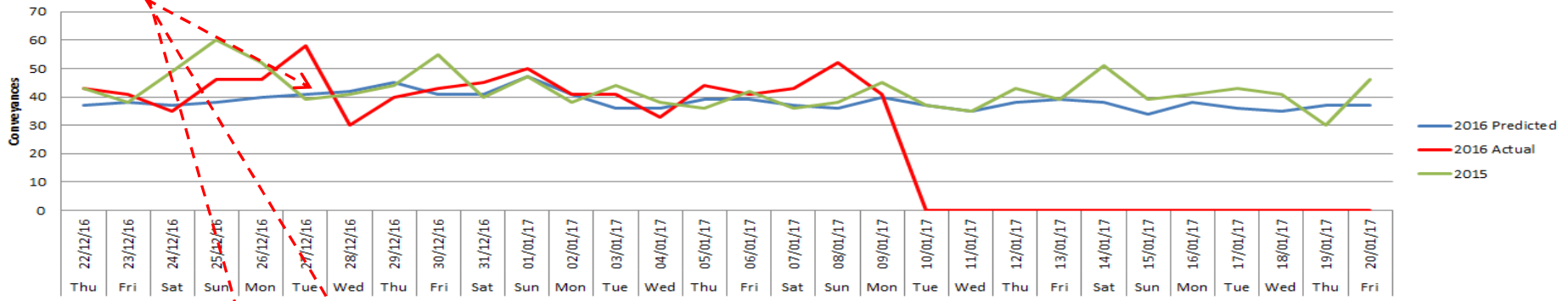
For the whole week this is reflected in the following graphs from Arden CSU.

Ambulance Conveyances

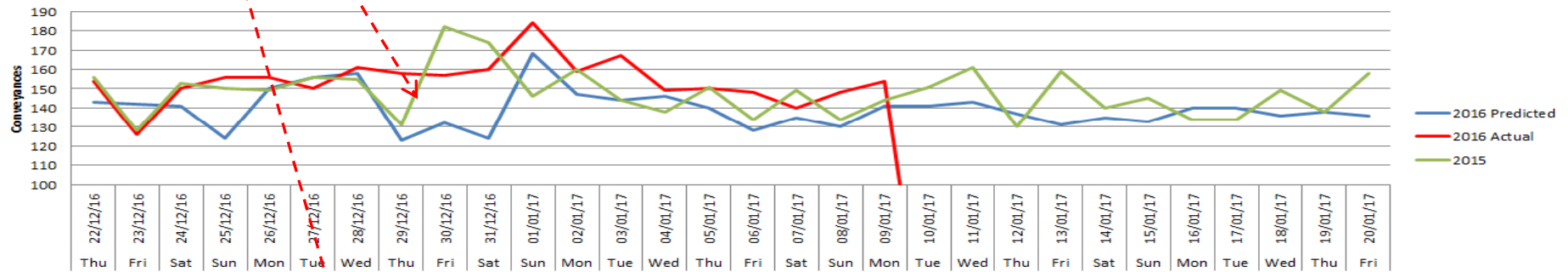


Increased conveyances via 111?

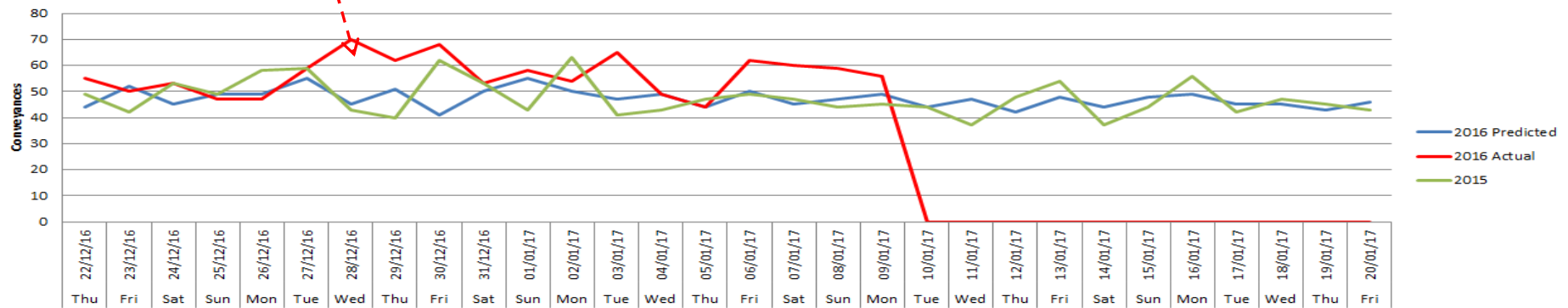
George Eliot Ambulance Conveyances



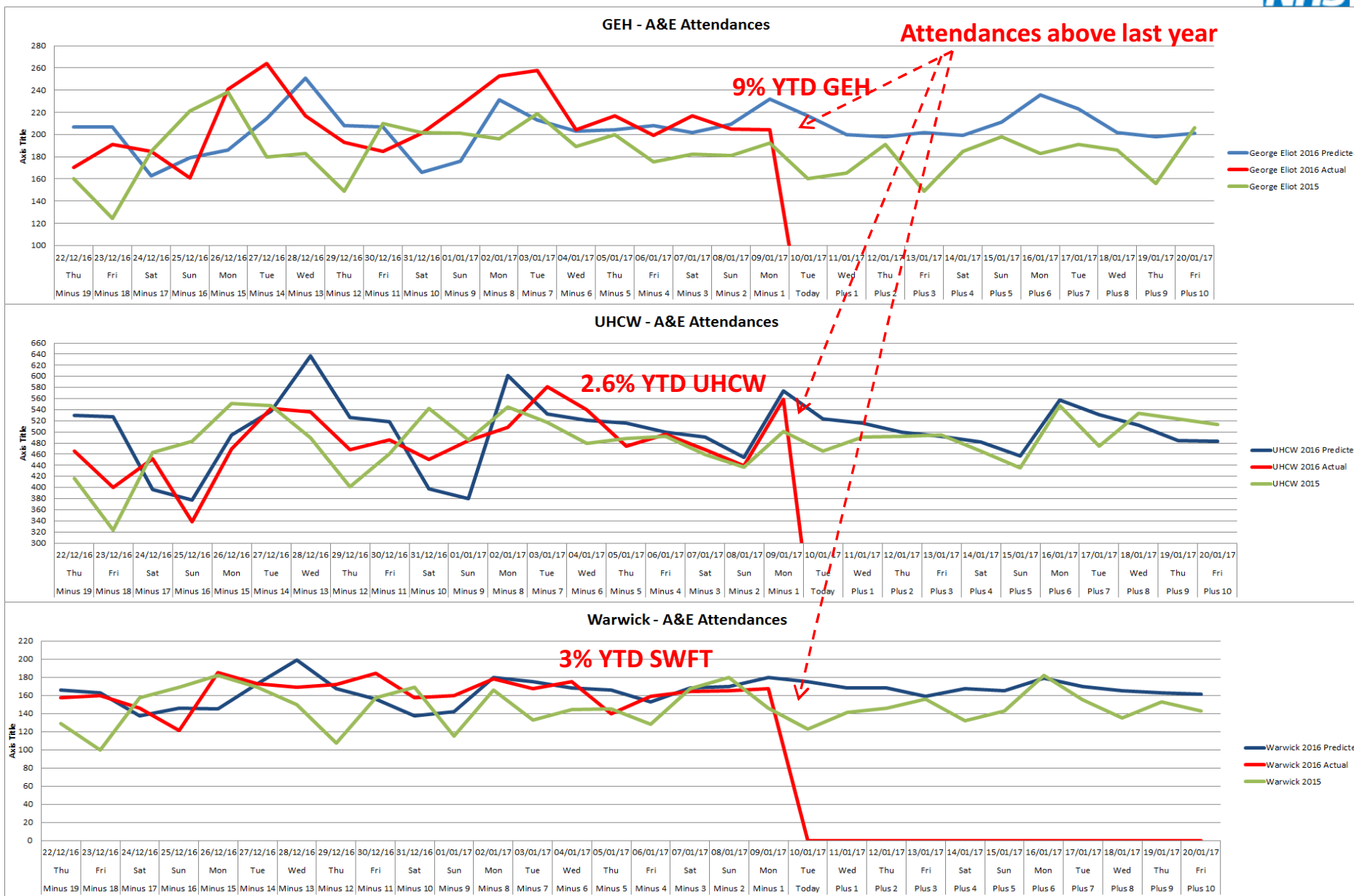
UHCW Ambulance Conveyancing



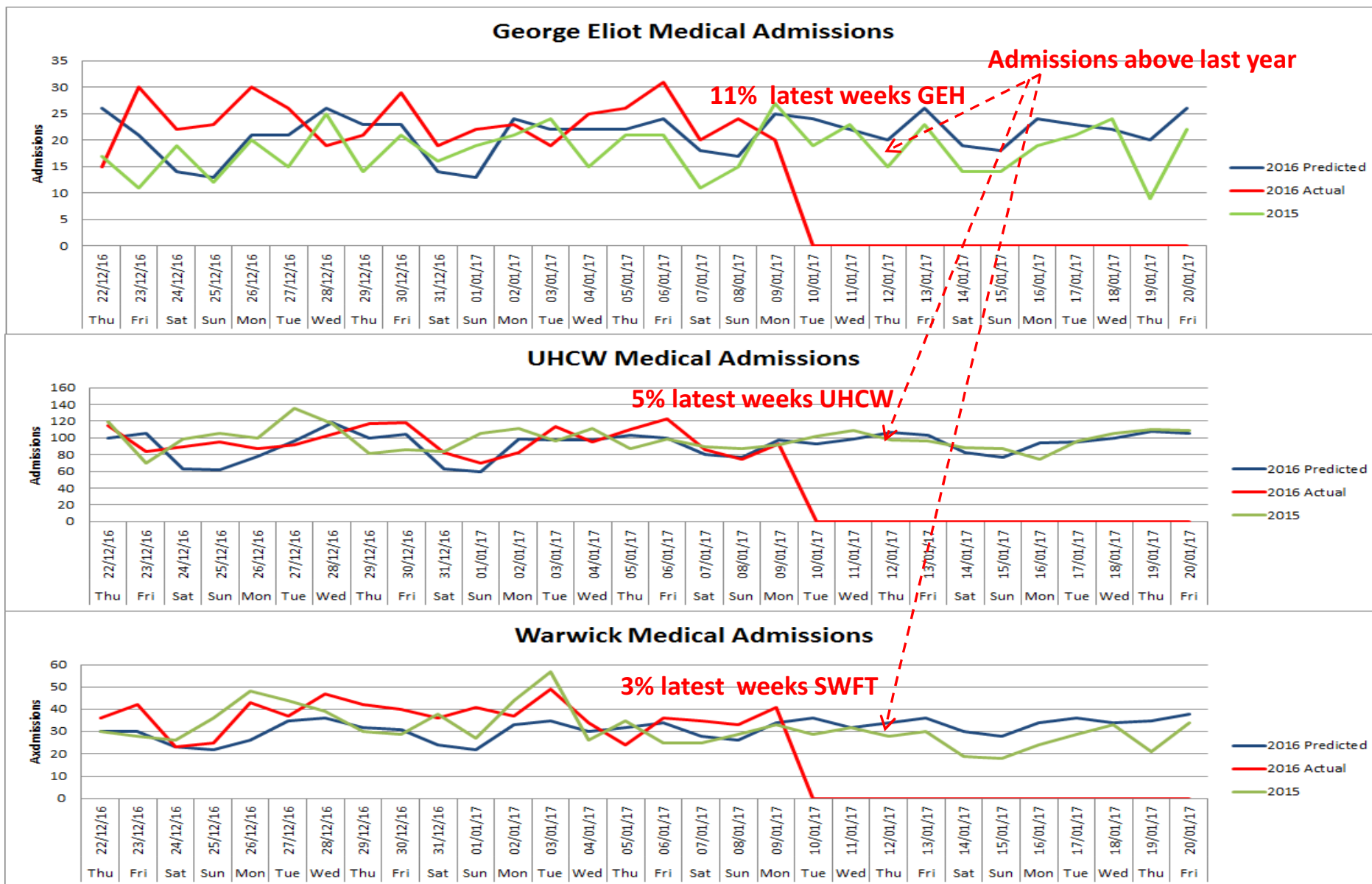
Warwick Ambulance Conveyances



Arden A&E Attendances



Arden Medical Admissions



In Summary

It is still too early to really assess all the reasons behind poor performance by the NHS nationally and locally in terms of delivery of A&E 95% standard. Much of the detailed information is not yet available in detail to fully analyse the situation and associated data from community and primary not available. The key information collected over the winter period is the daily sitreps by NHS Trusts, and this gives only headline figures .

Nationally the NHS has struggled A&E attendances are above last year, admissions are up on last year, Ambulance conveyances up on last year, bed availability above or the same as last year with escalation capacity opened, DTOC figures above the national standard of 3.5% and having risen in the last few weeks.

These pressures have been felt locally, the system has worked collectively well operationally at points of peak pressure, when the system went to Opel level 3 it managed to de-escalate relatively quickly, and hasn't as many other systems nationally have remained on or returned to be at Opel level 3 repeatedly.

Capacity has been put in place to deal with escalation, but this has compromised operational performance, bed occupancy has been too high for optimal management of patients, medical outliers too high and medically fit for discharge patients still in hospital too high.

Revised discharge to assess capacity has been in place, additional primary care appointments have been in place over this period, but the pressures on A&E have continued to increase above last year.

The Arden Urgent Care Forum will be reviewing the whole system management of winter in due course in far greater detail to identify key lessons and requirements going forward, this is as mentioned an initial view of pressures it is acute focused, the wider review by the Arden Urgent Care Forum will be more holistic and complete.