

Rapid Access Doctor

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Background to the Project

The System Resilience Group led by Sutton CCG was tasked, as part of winter resilience, to identify schemes that addressed the following themes:

- **Growing pressure on acute health services** against a background of falling resources and limited funding.
- An **increasing frail and elderly population with complex care needs** for whom hospitalisation is not necessarily appropriate and would benefit from an **experienced clinical assessment** at home.
- A requirement to be as effective or improve on current models, particularly with regard to being **patient focused**, timely and with **good clinical outcomes**.

Case for Change:

The proposed scheme aimed to:

- **Improve care for patients** by:
 - ✓ Reducing unnecessary ambulance conveyances,
 - ✓ Reducing A&E attendances
 - ✓ Reducing unplanned admissions.
- **Improve quality and access** to the right service at the right time, improving patient health and wellbeing.
- **Increase capacity** for the London Ambulance Service to attend higher priority calls.
- **Make best use of resources** and generating savings to help address the financial gap.

The Solution:



The existing Out of Hours provider was commissioned to provide a dedicated GP with a driver in a non London Ambulance Service vehicle (provided by the existing Out Of Hours provider). Responded to clinically appropriate Green (C3-C4) category triaged calls from 999 and be uniquely dispatched from the London Ambulance Service clinical decision making hub. Provided support to locally based Ambulance Crews.



The scheme operated between the hours of 15:00 and 0:00 Friday, Saturday, Sunday and bank holidays from December 2014 to the end of February 2015



The scheme was commissioned to **assess, diagnose, prescribe and treat in the home**, without requiring a paramedic response, conveyance to hospital or subsequent admission.



The scheme also had the potential to **improve patient access** to existing appropriate support services commissioned within the community.

Impact:

The results from the winter scheme using the RCGP accredited audit tool demonstrated that:

- **75% of all pts seen by the service were treated within their own home** leading to:
 - ✓ Increase in capacity within the London Ambulance service to respond to higher acuity calls.
 - ✓ **Reduction in non elective attendances** at the local acute trust.
 - ✓ **Reduction in admissions** at the acute trust
- A number of cases were identified from the audit where clearly the individual patient benefited from having care in their home, this is particularly so for vulnerable patients who could deteriorate with transfer.

Lessons Learnt:

- The scheme needed to ensure better access to appropriate support services reducing the risk of crisis in the future by:
 - ✓ **Linking to community services** that can build a suitable package of care,
 - ✓ **Use of the mobile directory of services** commissioned by NHS London
 - ✓ Ensuring a more comprehensive induction for staff.
- Activity could have been higher, facilitated by:
 - ✓ Increasing awareness within the Ambulance Service control Centre
 - ✓ Running the service seven days a week
 - ✓ Running the service across SW London
 - ✓ Agreeing a KPI for activity with LAS.

Going Forward:

Taking into account the lessons learnt the South West London Out of hospital Delivery Group have agreed to collectively implement this scheme across SWL, for six months over winter 2015/16, with a view to informing future commissioning intentions.