

One Gloucestershire Integrated Care System (ICS)

Health Overview and Scrutiny Committee

Urgent and Emergency Care Performance Update

Urgent and Emergency Care Programme Structure:

Transformation –

- Vision & Strategy
- Culture and OD Programme (in response to LGA Peer Review findings)
- Redesign / Service Improvement Programme supported by Newton Europe (the Newton Review)



Performance Improvement –

- System Accountability for Delivery – Board Assurance Framework
- Quality and Safety
- Urgent and Emergency Care Improvement Plan



Planning –

- Demand and Capacity analysis and plan – whole system bed model
- Winter Plan – our Winter Pledge(s), including comms strategy
- Financial accountability and resilience



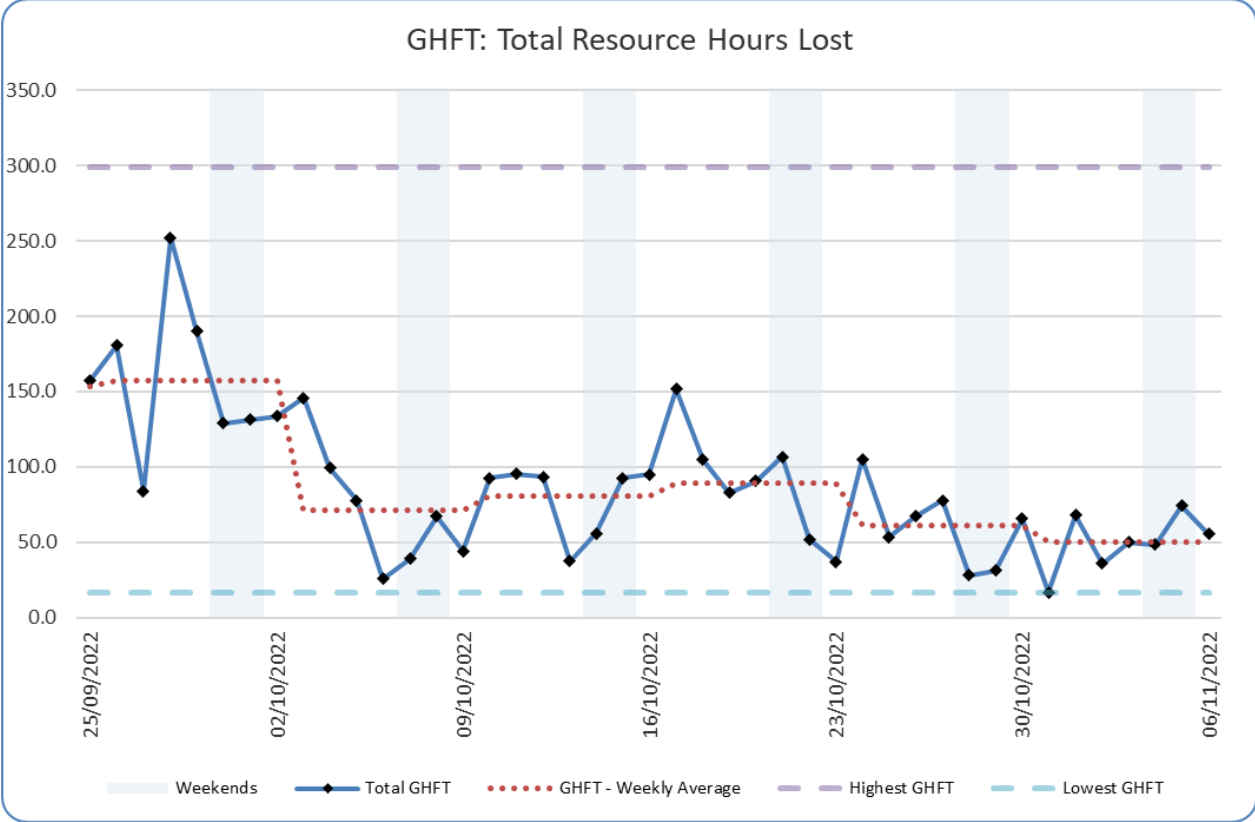
Performance Improvement Plan Update - Resetting Flow- A Whole System Approach

- We are working with the ambulance service to develop the capability to view the ambulance call stack and direct people to appropriate services before arriving in ED
- We are trialling new ways to redirect people to appropriate services within our ED's through closer partnership working with our MIU's
- We are working with primary care colleagues to deliver GP streaming in ED
- Our community hospitals are aiming to complete all discharges before 12 midday to enable earlier flow across our system.
- We are working to increase the number of simple P0 discharges that take place consistently across the 7 day week; aiming to complete as many before midday as possible.
- The number of people we have waiting for a bedded onward assessment discharge pathway is the lowest it has been since pre-pandemic.



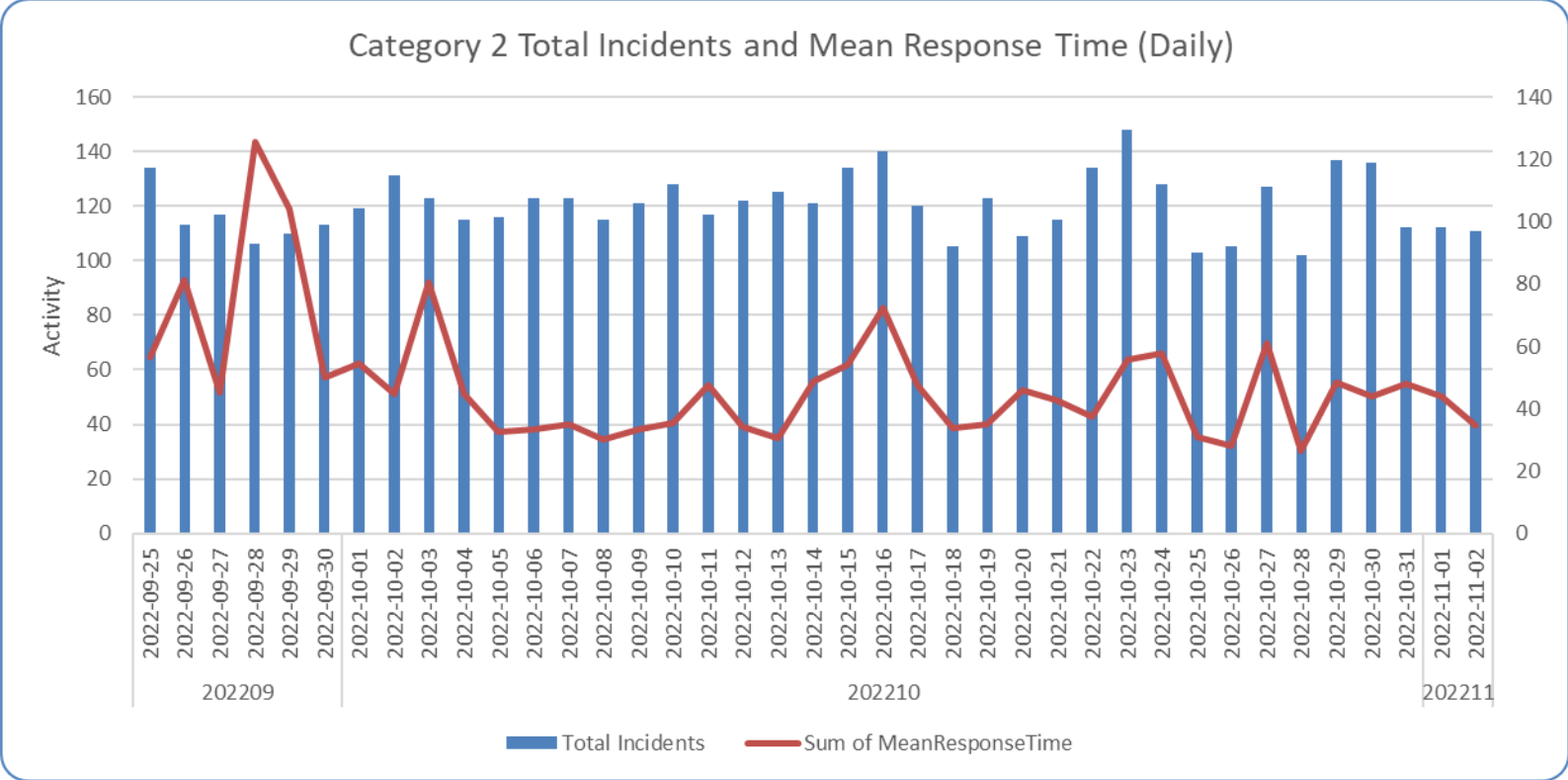
Resetting UEC and System Flow

- By resetting the way we manage urgent and emergency care across our whole system we are improving flow
- Our Ambulance handover delays resource time lost has dropped from an average of over 150 hours per day at the end of September to an average of 50 hours (latest week to 6th November)
- This improvement has been delivered by our teams working together to deliver against our performance plan, i.e. we still have the benefits identified in the Newton Review to realise



Resetting Category 2 Response times

By reducing the resource lost through handover delays our Ambulance Category 2 (urgent, potentially life threatening) call response time has dropped to an average of 39 minutes (latest week ending 6th November) from 77 minutes at the end of September – a 50% reduction in response time



How are we doing?

The South latest day ED performance demonstrates the improvements we are making to urgent and emergency care meaning that the most unwell patients in our communities are treated more quickly.

