

REPORT

 Item No: 9

SUBJECT:	NHS Lanarkshire Out of Hours Urgent Care Services
TO:	Integration Joint Board
Lead Officer for Report:	Chief Officer, Health & Social Care North Lanarkshire
Author(s) of Report	Marianne Hayward Head of Health and Social Care South HSCP
DATE:	13-09-19

1. PURPOSE OF REPORT

This paper is coming to the IJB

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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2. ROUTE TO THE BOARD

This paper has been to NHS CMT, NHS Lanarkshire Board, South HSCP IJB

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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By: Marianne Hayward

3. RECOMMENDATIONS

That they note the progress to date from the Urgent Care OOH workforce planning group;
 That they note the timescale for recruitment to a fully staffed two site model is proposed as 1/12/19.

That they note the current service sustainability issues due to challenges in terms of recruitment to GP and Nurse Vacancies. Should these challenges continue there will have to be an alternative delivery model for Urgent Care Out of Hours.

4. VARIATIONS TO DIRECTIONS?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
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5. BACKGROUND/SUMMARY OF KEY ISSUES

- 5.1 The Urgent Care OOH workforce planning group has been working on a plan to achieve a fully staffed two centre service OOH delivery model for Lanarkshire. The main hub for OOH is in Hamilton and a satellite centre is in Airdrie.
- 5.2 Over the last 2 months there has been insufficient staffing to support a two site model at weekends and Airdrie has had to close or reduce to one site overnight 8 weekends out of 15. This has been due to insufficient GP and Nurse staffing. Sufficient cover to support the current service has been a challenge for over 2 years; this is in keeping with the picture nationally. Nursing sustainability has been a recent development.
- 5.3 The service coordinator and Clinical Director have both moved to other roles over the last 2 months.

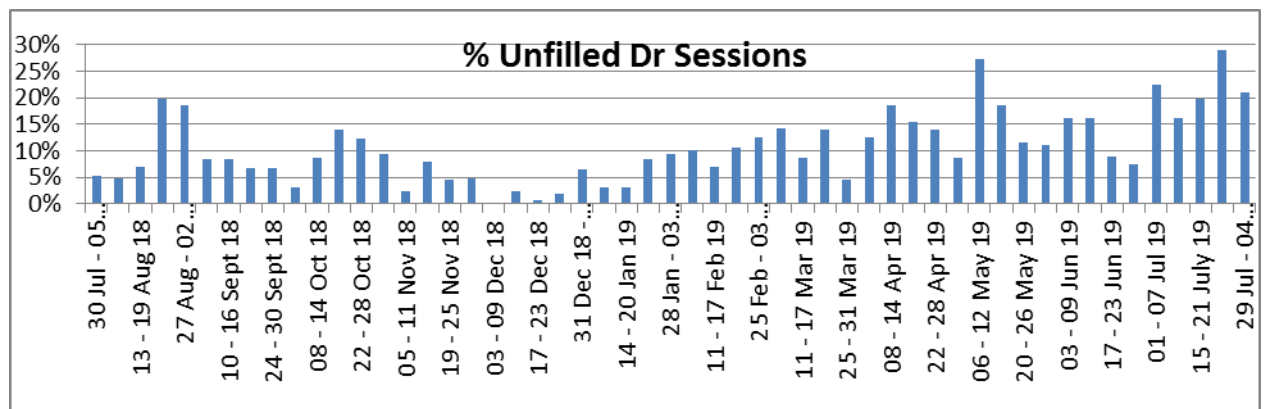
6.0 Workforce Challenges

6.1 GPs

Within the OOH Service there are 3 salaried GPs and circa 120 GPs who work on a sessional basis directly or through an agency of their choice. This balance gives the little opportunity to fill the “hard to fill” shifts.

- 6.2 Currently unfilled shifts are averaging 20%.

Graph 1.



6.3 Nursing.

It was expected that in the workforce plan that the nursing workforce needed to grow in order to provide an alternative workforce to GPs

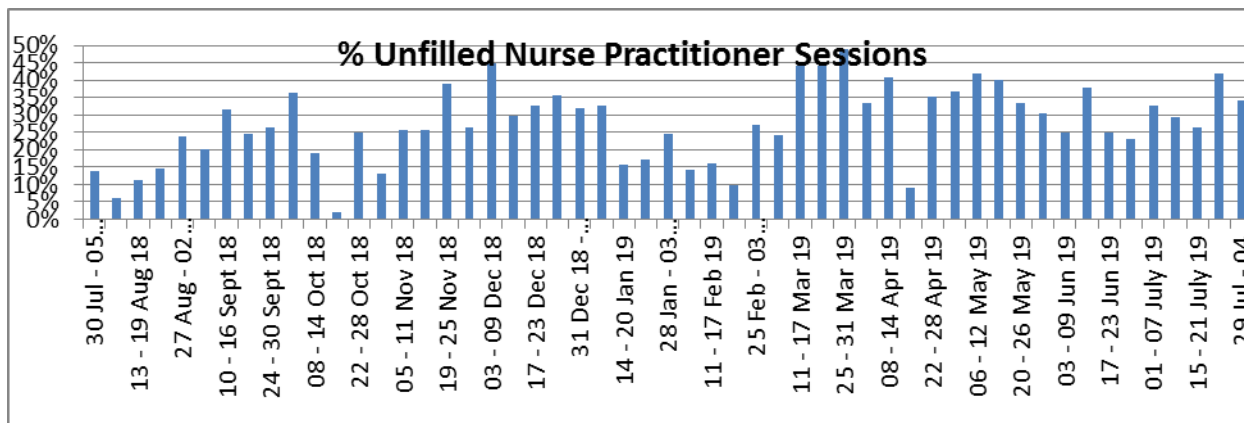
6.4 Advanced Nurse Practitioners

The ambition of the OOH workforce plan was to have 20% of the GP rota covered by ANPs by July 2019. This is currently at 6-8% due to the current recruitment and retention issues for ANPs.

6.5 Nurse Practitioners

The recruitment and retention of the Nurse Practitioners within OOH has been very challenging due to attrition to other posts and challenges in relation to recruitment. This is compounded by staff being at various stages of NP development e.g. prescribing qualifications

Graph 2



7.0 Progress to date and leads

7.1 Overall Action Plan/ Risk Register – Lead Marianne Hayward

There is currently a weekly meeting in relation to the OOH workforce which is captured in an action plan and risk register

7.2 OOH Service Manager – Lead Tom Bryce/ Marianne Hayward

The OOH Service Manager (Pamela Buddy) has been recruited to and commenced 29/7/19.

7.3 Clinical Director Post – Lead Linda Findlay

After consideration an interim clinical leadership structure has been implemented. One of our Current Primary Care Clinical Directors has agreed to increase his portfolio (and sessional commitment) to include OOH, he will be supported by a Clinical Lead, who is one of the GPs currently working within the service. This arrangement has been agreed for 6 months in the first instance to provide consistent clinical leadership within the service and will be reviewed thereafter.

7.4 Full Staffing for Two Sites

This table provides a summary of what full staffing should be across the 2 sites.

Table 1- Full staffing verses example of current staffing

Staff Group	Full Staffing (hrs)		Actual Staffing Hrs (wc 29/7/19) 2 sites open week / 1 site weekend	
	Week	Weekend	Week	Weekend

GPs	325	398	246	308
ANPs	60	64	42	54
NPs (Prescribers / None Prescribers)	90/90	128/128	33/20	39/26
Drivers	252	208	168	208.5

7.5 GP recruitment – Lead Linda Findlay / Sharon Russell

Currently unfilled GP session rates are at 20%.

There are a number of different areas of work underway to improve medical staffing and develop a sustainable model. These are divided into national initiatives and local initiative

Local

- recruitment to 10 salaried GP Posts (Advert out week commencing 5th August)
- Recruitment of our current trainees who have gained their CCT in General practice. There are currently interviews being established for week commencing 5/8/19.
- Continuing to source and engage with GP colleagues in terms of sessional work.

National

- GP Fellow – recruited to 1 post (Issues currently around HMRC Rules currently being worked through). This post is part of a national initiative which sees a GP fellow work in OOH, in in hours practice in Lanarkshire and be supported to undertake QI work
- 3 of our current training practices have signed up to a scheme which will see trainers undertaking some shifts with their GP trainees, the details of this are being worked through nationally.

7.6 ANP Recruitment – Lead Lynsey Sutherland / Joanne Jenkins (Associate Nurse Directors)

There are a number work steams on going to progress recruitment and retention of ANP posts. Currently ANPs are covering 6-8% of GP shifts. It is anticipated that this could be 20% .This work include:

- Utilising any prescribing and training ANPs within the rota where there are gaps of identified need.
- Recruiting to 3 ANPs specific to OOH (Interviews will be held w/c 5/8/19)
- There are currently 2 ANPs in training who work within OOH (non-prescriber
- Recruitment to 2 interim Advanced ANPs (3 months) who will provide clinical and professional leadership, support and development to NPs and ANPs.

7.7 Nurse Practitioner Recruitment – Lead Jenny Butchart (Senior Nurse) and Pamela Buddy (OOH service Manager)

Nurse practitioners recruitment is now on-going every 6 weeks. A full recruitment to all vacant posts will take up to 5 months. These posts will require training and development, particularly in relation to prescribing.

7.8 Senior Charge Nurses

There was previously 1wte Band 7 Senior Charge Nurse within the service. This has been increased to 2 wte in order to provide more robust clinical leadership across the service.

Table 2 Nursing New Structure

Current Workforce		Proposed Workforce	
Band 7 SCN	1.00	Band 7 SCN (agreed)	2.00
		Band 7 ANP	3.00
Band 6 NP	13.17	Band 6 NP	8.37
Band 3 HCSW	5.33	Band 3 HCSW	5.33

7.9 Mental Health Nursing

Over the last 2 years there has been a test of change involving mental health nursing in OOH. This has been successful adding value to both patients and families. This was originally 2 members of staff and was being increased to 4. This has been made possible through redesign and action 15 monies. The additional 2 posts have yet to be realised although the service is working alongside the mental health service to put this in place.

7.10 Paediatric Nursing

Paediatric nursing has been another welcome addition to the OOH team. This staffs (2) are provided by the paediatric team within Wishaw. This service has now been fully funded. These posts however non-prescribers are and therefore are still reliant on a GP signing. The OOH Service Manager is working alongside.

7.11 Pharmacy

The use of prescribing pharmacists will allow increased capacity around prescribing when there are limited numbers of prescribing nurses. There have been a number of meetings in relation to this and it would be anticipated this will be progressed by the end of August 2019.

8.0 Administration Staff and Drivers

The service could not run efficiently without a team of administrators and drivers.

The number of drivers has not been an issue. The administration team have had a small amount of turnover; however this is now fully staffed.

9.0 Triage Pilot involving ED consultants/ GPs

9.1 The triage pilot involves the review and re triage of patients referred down from NHS 24. Up to 70% of calls have been redirected. This project has been extended for 6 months for completion later in the year. There have been challenges in having clinicians available to do the triaging when the PCC is busy and staffing is low. The current plans for GP recruitment will include a component of the pilot as part of the job plan.

10.0 Summary

Achieving full staffing across both OOH sites by 1/12/19 will be dependent on successful recruitment of GPs, ANPs and NPs. In addition there is considerable work underway to ensure training is in place to support the newly recruited management and clinical staff.

If the level of recruitment is not projected to achieve full staffing by 1/12/19 a decision will be required on whether the service can sustain a 2 site model and whether an alternative delivery model is required.

11.0 IMPLICATIONS

NA

11.1 NATIONAL OUTCOMES

NA

11.2 ASSOCIATED MEASURE(S)

NA

11.3 FINANCIAL

This paper has been reviewed by Finance:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
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7.4 PEOPLE

7.5 INEQUALITIES

EQIA Completed:

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
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8. BACKGROUND PAPERS

9. APPENDICES



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CHIEF OFFICER

Members seeking further information about any aspect of this report, please contact Marianne Hayward on telephone number 01698 453704