

Enhanced – Acute Response Team (E-ART) report

Background

E-ART service was first commissioned as a pilot in October 2017 to help improve compliance of the Accident and Emergency (A&E) 4-hour target at QEQMH.

This service is for any patients attending A&E with minor illness symptoms. The service works in close collaboration with A&E who review and triage the most suitable patients to the service.

The E-ART team comprises of General Practitioner (GP) with support from Nurse Practitioner (NP) or Paramedic Practitioner (PP).

The service was first commissioned to operate between 7pm to Midnight on the weekday and 9am to 4pm on weekends and Bank holidays. After a few weeks, East Kent Hospitals (EKHUFT) realised the benefits and requested the service to be extended to provide a 12-hour service 7 days per week.

Service criteria

This is a minor illness service for any age patients attending A&E. The triage nurses are trained to assess and triage any suitable patients to E-ART.

There is an agreement for A&E staff to accept any back to A&E if and when the GP does not feel a patient can be managed safely by E-ART.

Service delivery

Staffing

To ensure the service is adequately staffed Thanet Health CIC (THCIC) have worked hard to recruit and retain sessional GP's, ANP and PP's. There are robust checks in place to ensure the staff are clinically competent, have professional registration and can evidence ongoing continuous professional development.

All staff are audited regularly and receive regular supervision which helps develop staff further and provides good reflection for appraisals / revalidation.

Rota management

THCIC have 17 sessional GP's and 11 ACP's who regularly work with E-ART. To ensure the service runs effectively, staff rotas are booked three months in advance, this allows for all sessions to be filled in a timely manner. Any late cancelations are managed as a priority and where cover cannot be found, then the clinical directors step in to provide cover. This has enabled the service to run daily with no gaps.

Working with A&E

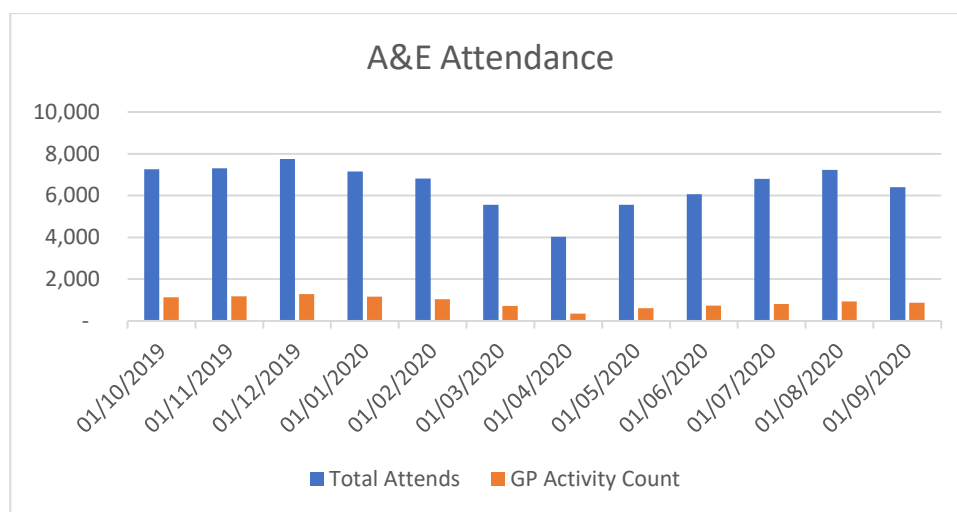
The E-ART staff work closely with A&E staff, when the A&E department is busy the team help where possible to ease flow. This collaborative approach has helped QEQMH improve their 4 hour target performance and hence patient experience.

Links to primary care

E-ART service is co-located with A&E however the service uses EMIS to enable effective communications with the primary care. Having access to EMIS allows our clinical staff to have access to up to date, complete clinical records therefore resulting in high quality consultation and improved patient experience as well as timely EDNs back to the GP practice.

Service Performance and outcomes

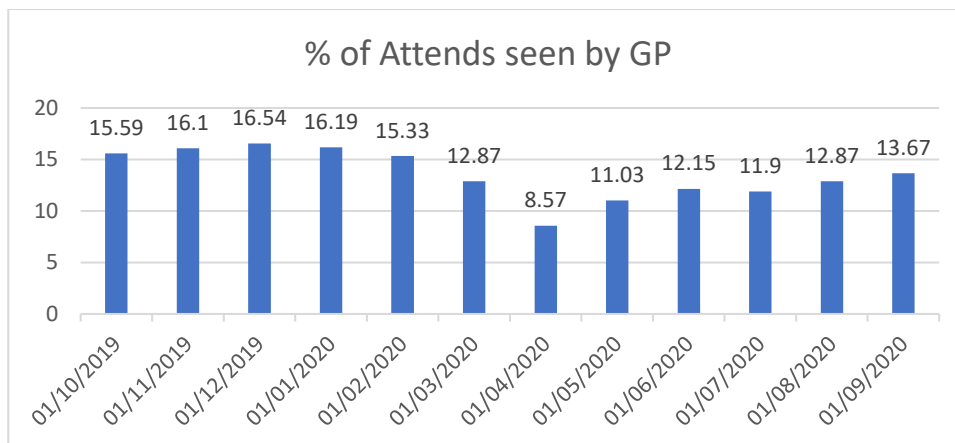
The accident and emergency department at QEQMH, like many A&Es, is a busy department with daily attendance of over 210 patients. Attendance data from 1st October 2019 to 30th September 2020 has been reviewed and breakdown has been illustrated below:



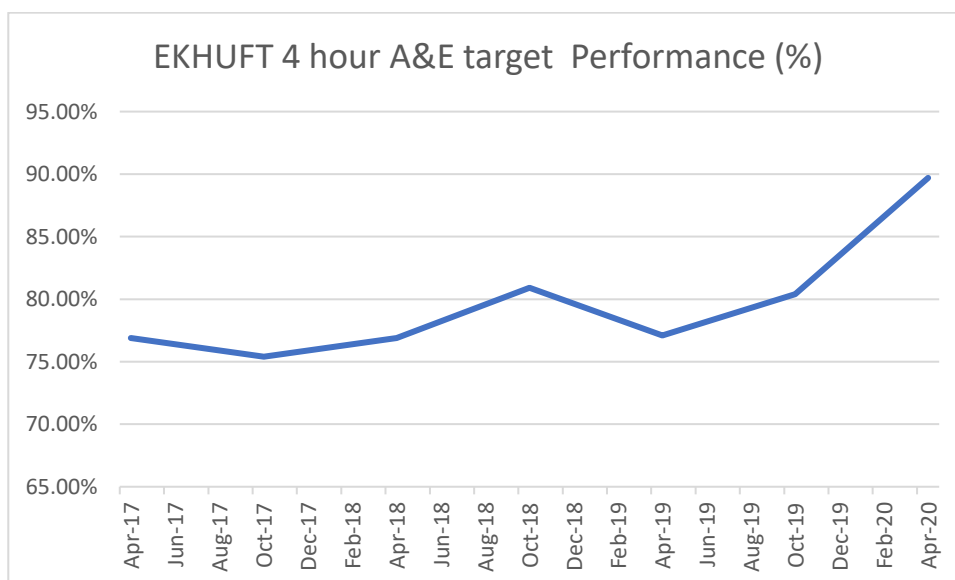
Due to COVID, the attendance had reduced between March and June however, by July the attendance numbers had increased to be close to the pre COVID levels.

During the past 12 months, QEQMH saw an average of 6,497 patients per month. The E-ART service, on average, managed 902 patients per month (13.88%), this equates to an average of 29 patients per day.

The Graph below provides a breakdown in % of the attendance managed by GP per month, the highest was in December at 16.54% and the lowest in April at 8.57%. This is to be expected as winter is the busiest time within A&Es and April 2020 was the peak time of the pandemic where all A&Es reported a reduction in attendance especially for minor illness.



To determine the impact of the service, THCIC have monitored the A&E 4 hour target trends at EKHUFT from April 2017 to April 2020, unfortunately this data is for all sites and therefore taking in to account the poor performance at William Harvey Hospital. However, the overall trend is positive.



EKHUFT have only recently started to report separately, the 4 hour target performance between A&E and E-ART. E-ART performance over the last three months has been very positive, delivering performance between 97.5% to 98.3%, therefore exceeding the national target of 95%.

Future

E-ART was an innovative initiative demonstrating good outputs which have been nationally recognised by other providers and commissioners including NHS England. The learnings from E-ART have contributed to the national redesign of urgent care and in the development of Urgent Treatment Centres (UTCs). There is now a national mandate for commissioners to procure primary care led UTCs nationally.

Across east Kent there are 9 UTCs, four of which are based on EKHUFT sites (WHH, QEQMH, Buckland and KCH). THCIC have collaborated with other providers (EKHUFT, IC24, Ashford Clinical Providers and Invicta Health) to form an alliance which had bid for and were successfully awarded a 5 year (with possible 2 year extension) UTC contract for the EKHUFT sites. THCIC will be responsible for providing the primary care leadership at QEQMH. The service has formally started on the 28th September 2020 at QEQMH.

THCIC are keen to maintain all the positive aspects of E-ART and further strengthen its governance and resilience by working within the alliance.