**Urgent Care – Catch-up 4th August 2021 DRAFT NOTES**

Present : Cathy Shaw, Ross Mackenzie, Billy NHS24, Alan Knox (SAS), Neil Campbell, Ross Cowie, Ronald MacDonald, Mairi MacDonald, Sophie Isaacson

Ross & Cathy | Expressed that they were really disappointed and unhappy with the inaccurate piece in the media.

Cathy | Unless she has specific cases, she can’t follow things up, as far as she is aware the team should be responding to the door. During the week being discussed - Cathy has a team of 9, which was depleted to 3 and resulted in staff shortages which in turn led to having to close the urgent care centre overnight. It was not possible to go into specific reasons why the team was so depleted due to confidentiality concerns. It has been a challenging time through the summer with absence, isolations, usual summer annual leave, etc. Notes that staff have been going above and beyond to pick up extra shifts since the start of the pandemic.

NHSH recognised that the doorbell arrangement is not ideal and have asked for an intercom system to be installed. This is coming soon. This will mean that the on duty ANP can communicate even when they have someone with them.

Ronald | is there any scope to re-employ people from NHS 24 or develop or change the model?

Billy (NHS24) | 50% more staff to cover leave and sickness. He will speak to Dawn about future plans re NHS24 staff on Skye.

Cathy | They have healthcare support workers on duty Mon-Fri as well as a nurse to support with the CAC. The CAC provides a swabbing service for staff as well as other groups such as those undergoing pre-op assessment in addition to being able to assess patients with COVID type symptoms. New radios have been provided so that the hospital reception are able to communicate with the ANP without having to access the CAC.

Every ANP, is aware that they have clinical responsibility for that patient, the minute they ring that doorbell

Cathy | agreed to follow up any concerns about access but will need to know dates and times and circumstances. Nothing gets better if people don’t raise challenges.

Billy (NHS24) - access to nhs24 over the past few months has been very poor and we have to bear in mind volumes which are the same on sat/Sunday’s as the first weekend of January in previous years. They have had trouble staffing through the pandemic and noted the effect of social distancing on the ability to staff centres. A dedicated COVID line is available and other work is ongoing to reduce staff absence. NHS24 are opening an additional new centre in Dundee.

Billy will pick up with Dawn about future of the NHS24 presence in Skye when she is back from annual leave

Neil Campbell | certainly been reassured today

New processes coming in which is great, no point in complaining to community members or reps- what is the best way to tell people to raise complaints?

Ross m | Either contact Ross or Kathy directly via e-mail or use NHS feedback website form.

Request for FOI numbers - Portree and Broadford- will be able to get that, Ross Mackenzie roughly 25-30 per week Portree / 100-120 in Broadford currently. Struggling with specifically how many people from North Skye are seen in Broadford as the person to do this is off sick. Ross also noted that these patients may have been seen in Broadford entirely appropriately so not clear what this data would show.

Hannah | if we’re asking for info; we have to be clear about what it’s going to tell you . Sometimes people *should* go straight to Broadford, or even further, just numbers alone really won’t be useful – We need a whole picture.

GP’s have also had issues with access, but have communicated clearly and issues have been looked into. Agree we need to work together to make this better as people are worried and don’t understand the system.

Mairi | Wondering whether the activity information would be available by day and time.  Nhs24- it’s essential for our area for 111 to work and be reactive and quick for people as we are so far away from hospitals and services . Nhs24 working hard to overcome it

Neil |suggested we need to be thinking as the community about exactly what questions we need to ask / and what information do we need / would be helpful?

Ronald | - main facility not in town of Portree- always going to create a challenge, service must be resilient and robust

Ross M | Noted that the use of 111 and continued provision of the CAC are Scottish Government policy.

Allan Knox | SAS- Response vehicle - functioning not as they want but is being used. The position just now is that 5 staff have left Portree over the last while, recruited to most of the vacancies already and the new staff have settled in very well. Noted also that three staff from Broadford have transferred to Portree. At the moment still have 1 vacancy in Broadford. Also noted that someone from local community is working in the service as a student.

The response vehicle – it was always hoped that the elite paramedics would be able to use this however, because of staff leaving and having to maintain core cover with both vehicles that has not yet been possible. However, two lead paramedics have been using it when they can once further recruitment has taken place it is anticipated that the vehicle will be used as initially planned.

Ronald | what is the progress with it being based in Portree?

Allan | It will always move around the island, it needs to be dynamic, activating it where required around the island. If it stays in one place it won’t give good value for money

Neil | It should be dynamic and flexible however shouldn’t be used just as a lead paramedic vehicle for duties

Allan | It is hoped that Broadford will go 24 hour, which would help. SAS across the whole of Scotland are looking at all resources and hoping we’ll get additional staff to Skye.

Mairi | Case study brought up – Patient safety- a phone call from someone, happy to give details , couple with an complex set of needs, called 999 at 1 am, got through to Dundee, in a call waiting system. Little boy wasn’t breathing, grandmother was doing cpr , With her mobile, phoned Portree hospital and ambulance dispatched. It was unclear why the 999 cal was placed in a queue as this should not happen. Mairi will pass on details so Alan can look into it.

Ronald | We really need to think about how we cover for that ambulance when it leaves Portree. Will the funding for urgent care/ sas funding be recurrent and are the staff in permanent?

Allan / Cathy / Ross M | All posts recurring as far as they are aware.

Billy | NHS24 are recruiting which will help to get wait times down. Changed their operating model- when you get through 95% all calls dealt with at first point of contact.

Cathy | Multi disciplinary working – all agencies are happy to work towards this unfortunately there are pressures throughout all systems at present which makes it difficult to release staff for training just now. Notes that there are no NHS24 ANPs in place just now and that for SAS to man the urgent care (in place of an ANP) they must be qualified to masters level. Working alongside ANPs will be the first step as they currently can’t interchange the roles yet.

Kathy | previously had offered to do a test of change in Fort William- but they were not ready for that at this point.

Neil | Totally agree, it’s the way forward, it is the future but not the time right now. Should be kept on the table for once everyone is ready.

Allan | Fort William have just taken on their first advanced paramedic trainee.

Cathy | Have an open door policy. Happy to work with others.

Ronald | Centre of Excellence - training together to create synergies.

Cathy | The new rural advance practice role is due to start March - April and will be open for paramedics , pharmacists etc

Neil | March ‘22 skills bus coming to Portree. This is a huge opportunity and we need to encourage people to work together through training (Sophie has shared that survey )

Cathy | Skills bus is also coming in September as well.

Cathy | CAC plans - We all hoped we could close it in May / June but Scottish Government require it to be open until March ’22. This goes for all CACs throughout the highlands. With that in mind, we are looking to minimise our impact – we have to have a red area, we couldn’t move urgent care to original location, so in the interest of in patient safety, the decision was made to sit within Glamaig. Red room is separated from the urgent care Centre. Currently undertaking an establishment review to look at the size of the Rural Support Team (ANPs and APPs).

Neil - How does the system work?

Cathy- Patients with covid symptoms can beed seen by GPs in their red rooms or within the CAC. They can then be sent home with appropriate advice or admitted to hospital.

Should they require swapping for COVID - GP would refer them to the CAC

Out of hours the ANP is the senior decision maker for the care of the patient.

There is no CAC in Broadford

Majority of swabs being done are pre-op swabs / Health care / maternity / pain clinics / Healthcare worker swabs

Ross C |How busy is the CAC?

Kathy- in general - We’re probs seeing 5-12 swabs per day.

Ross C |How do we ensure they get through the door of Portree hospital?

Cathy | in direct contradiction to the piece in the press, someone with chest pain turned up at the front door and was seen and resuscitated. ANPs would not leave someone at the door who is seriously unwell. Cathy noted if someone very unwell didn’t get in she would want to know about it. The hospital is staffed and from next week there will be someone in reception during normal working hours. The extra nurse will be there to check on any patients who are waiting outside.

ACTION - Sophie will speak to Cathy about communication around urgent care and they will prep a message to go out online together.