

# Reshaping Urgent and Emergency Care in Northern Ireland

Factsheet 1 - July 2022

## Background to 'No More Silos'

In October 2020, the Minister of Health published an Urgent and Emergency Care action plan called '**No More Silos**' (**NMS**) to maintain and improve Urgent and Emergency Care services through the COVID-19 pandemic and beyond.

Even before the pandemic, there was clear evidence that Urgent and Emergency Care services were under increasing pressure. Growing numbers of people were experiencing long waits in overcrowded Emergency Departments (EDs), while other urgent care services were also experiencing significant pressure.

**NMS** is about everyone working together for the benefit of the patient and service user.

**NMS** is implementing changes to ensure that urgent and emergency care services across Primary (GPs, Dentists, Pharmacists, Ophthalmologists) and Secondary care (Hospitals) can be maintained and improved in an environment that is safe for patients and staff.

A formal public consultation has been published into Urgent and Emergency Care Reform.

Any permanent changes to Urgent or Emergency Care Services will be subject to Ministerial approval.



## Who will oversee the 10 Key Actions?

The **No More Silos Network** brings together clinicians from primary and secondary care, service users, policy makers and commissioners to oversee the delivery of the **10 key actions** outlined in the [Health Minister's action plan](#).

Implementation is supported by a combination of regional planning supported by 5 locally led implementation groups (LIGs).

The key actions build on the learning and strong relationships developed during the initial response to the challenges posed by the pandemic, as well as the evidence, and experience of patients and carers compiled as part of the review of Urgent and Emergency Care.

## What is the aim of NMS?

To ensure that patients and service users requiring Urgent or Emergency Care can access the right care in a timely manner.

**Special feature on  
SEHSCT  
Ambulatory Hubs**

# No More Silos - 10 Key Actions

1. Introduce Urgent Care Centres
2. Keep Emergency Departments for Emergencies
3. Rapid Access Assessment and Treatment Services
4. 24/7 Telephone Clinical Assessment Service - 'Phone First'
5. Scheduling Unscheduled Care
6. Regional Anticipatory Care Model
7. Acute Care at Home
8. Ambulance Arrival and Handover Zones
9. Enhanced Framework for Clinical and Medical Input to Care Homes
10. Timely Discharge from Hospital

## What is 'Phone First'?

It is a clinical telephone triage service (for assessment), designed for all patients who are feeling unwell and considering travelling to an Emergency Department (ED) or Minor Injuries Unit, with an injury or illness which requires urgent treatment but is not immediately life threatening. The 'Phone First' approach aims to help those patients access the most appropriate care as quickly as possible and avoid busy waiting rooms.

## Phone First Progress!

Up to 30 April 2022, over **231,000 Patients** used **Phone First** and **Urgent Care Centres** in NI.

### Of these Patients:



**54,766 (24%)** were discharged with advice or referred back to their GP.

**56,665 (25%)** were referred directly to an Emergency Department. *This figure refers to when the patient first presented to Urgent Care Centre or Phone First (it does not include those who were sent from Phone First to Urgent Care Centre, then subsequently sent to Emergency Department.*

**119,858 (52%)** were scheduled for an appointment at an Emergency Department, Urgent Care Centre, Minor Injuries Unit or an alternative pathway.

## No More Silos - Engagement

- The involvement of patients, service user and carers has shaped the work of **NMS** and will continue to do so through ongoing co-production, involvement and wider engagement at regional (across NI) and local level.
- **NMS** has a strong culture of involving and listening to the views of patients, service users and carers, who are part of the regional and local level structures.
- There has also been a series of engagement events during March and April 2021 to increase awareness, provide information, and listen to the views and voices from a range of patients, service users, carers and others, about **NMS**.
- **Further detail on key actions will be included in the next edition of this factsheet.**



Find out more information on  
[Urgent and Emergency Care Services in Northern Ireland](#)



Contact  
us

If you have any questions please contact us at the  
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## Rapid Access Hubs

It's an exciting time in SEHSCT and we are delighted with the changes in how services are being delivered. The **Rapid Access Hubs** are moving from ideas to implementation.

### Rapid Access!

Primary Care and Hospital clinicians have access to Rapid Access Assessment and Treatment Services in a range of clinical areas.



### What are Rapid Access Hubs?

- The Hubs provide specialist advice and treatment as an alternative to hospital admission or Emergency Department attendance.
- Hubs are consultant led services supported by nurses and other specialist roles such as physiotherapists and dieticians.
- Access to the services may include same day or same week assessment depending on patient need and clinical urgency.

### How long does it take for Patient's to be assessed?

- Patients Receive Rapid Access to Medical Assessment when needed.
- 69.7% of patients were assessed on same or next day.
- 96.2% of patients were assessed within 1 week.
- Based on clinical condition and need for review within a specified timeframe triage appointment may be later.



**Acute Medical Hub**  
January - March 2022

**Palliative Care Hub**  
December 2021-February 2022

**80% of patients  
avoided admission!**

### Rapid Access Ambulatory Hubs in SEHSCT

1. Respiratory Hub
2. Gastroenterology Hub
3. Palliative Care Hub
4. Diabetes Hub
5. Neurovascular Hub
6. Paediatrics Hub
7. Acute Medicine Hub
8. Cardiology Hub



### What does Ambulatory mean?

**It means the same day care at an Outpatient department.**

**1-31 March 2022**

**1704**

**Patient Appointments made  
in the 8 Ambulatory Hubs**

### Why Hubs are favourable?

- The right place for the right patient
- GP Advice Service
- Earlier discharges
- Direct access for GPs
- Rapid Access Diagnostics
- Avoid Hospital Admission



# SEHSCT Scoop 3 Prestigious Awards for outstanding Ambulatory Hubs

## Northern Ireland Healthcare Awards 2022

**Under Key action 3 - Rapid Access Assessment and Treatment Services** the SEHSCT now have **8 Ambulatory Hubs** which aim to:

- Ease the pressure on Primary Care.
- Reduce the number of people who attend Emergency Department unnecessarily.
- Provide rapid access to specialist advice and treatment as an alternative to hospital admission or Emergency Department attendance.

**Staff in the Ambulatory Hubs were recognised for their hard work and dedication, particularly during the Covid Pandemic. Minister of Health, Mr Robin Swann congratulated staff for their tremendous innovation and commitment. [Read more.](#)**



### Award for Asthma/COPD Project of the Year Ambulatory Respiratory Hub

The service provides rapid diagnostics and treatment for any respiratory condition and undiagnosed respiratory symptoms, in a consultant-led but multidisciplinary setting, without the need for hospitalisation.

### Award for Developments in the Management of Inflammatory Bowel Disease (IBD) Ambulatory Gastroenterology Hub

The IBD Nursing Service Team received this award for their response to COVID-19 imposed obstacles. The team remained committed to reducing risks, whilst providing patients with the best IBD nursing service possible.



### Special COVID-19 Achievement Award Ambulatory Cardiology Hub Team

(for the delivery of cardiac services during COVID-19).

The Cardiac Hub was established as a consultant-led service that provides rapid access to cardiac investigations and doctor / specialist nurse review. It is open five days per week, 8am-to-6pm, and is available to Emergency Department patients and both those in Primary and Secondary care.

