

The North East Ambulance held its AGM in September and presentations were held in regard to the topics

1. The new performance standards-review
2. The new contract for the 111 service
3. Urgent Treatment Centres and the STP or Sustainability and Transformation Plans.

The new performance standards Ambulance Response Programme

- Immediate response to a life-threatening condition such as cardiac or respiratory arrest • Average response = 7 minutes • 90th percentile response = 15 minutes Cat 1
- A serious condition such as a stroke or chest pain, which may require rapid assessment and / or urgent transport • Average response = 18 minutes • 90th percentile response = 40 minutes Cat 2
- An urgent problem, such as an uncomplicated diabetic issue, which requires treatment and possibly transport to an acute setting • 90th percentile response = 120 minutes Cat 3
- A non-urgent problem, such as stable clinical cases, which may be treated or home or at a ward or clinic. • 90th percentile response = 180 minutes

REVIEW OF 2017/18

580,000 SCHEDULED PATIENT JOURNEYS

ONE MILLION PLUS 999, and 111 calls taken.

280,000 taken to hospital

134,948 patients reached within 8 minutes.

27,000 patients treated over the telephone

1,269 patients treated by Community First Responders

100,000 patients treated at home and discharged

165,000 patient journeys completed by volunteer Car Service Drivers.

Details of the 111 service were given, these included the following information.

The 111 service is staffed 24 hours a day, 7 days a week by a team of fully trained advisers. The NEAS commenced the five-year contract for this service on 1st October.

They will ask questions to assess symptoms and, depending on the situation, will then:

- give self-care advice
- connect you to a nurse, emergency dentist or GP
- book a face-to-face appointment
- send an ambulance directly, if necessary
- direct you to the local service that can help you best with your concern

Calls to 111 are recorded. All calls and the records created are maintained securely and will only be shared with others directly involved with your care. You will be asked on commencement of a call if you agree to your records being shared.

Information recorded during the call will be shared with other professionals directly involved in your care. Some of it will also be shared with NHS Digital to improve NHS 111 and 999 services. .

NHS 111 offers a video relay service that allows the making of a video call to a British Sign Language (BSL) interpreter.

The BSL interpreter will call an NHS 111 adviser on the behalf of a patient who will then be able to have a real-time conversation with the NHS 111 adviser via the interpreter. A webcam, a modern computer and a good broadband connection to use this service.

Get help or advice online using a smartphone, tablet or computer.

This will provide the

- answer questions about symptoms and finding out where to go for help if you can't see your GP or dentist, or get a call back from a nurse plus get advice on self care. The online service is not available for children under 5.

TYPETALK

Also, for other difficulties with communicating or hearing, one can use the NHS 111 service through a textphone by calling 18001 111. Calls are connected to the TextDirect system and the textphone will display messages saying what's happening. A typetalk relay assistant will automatically join the call. They'll talk back what is typed to the NHS 111 adviser and, in return, type back the adviser's conversation so a patient/caller can read it on their textphone's display or computer.

Translation service

There's also a confidential interpreter service, which is available in many languages. Simply mention the language you wish to use when the NHS 111 operator answers your call.

URGENT TREATMENT CENTRES

At the moment, the NHS offers a mix of walk-in centres, urgent care centres, minor injury units and urgent treatment centres, all with different levels of service.

By the December 2019, these will all be called **urgent treatment centres**.

Urgent treatment centres are GP-led and open for at least 12 hours a day every day of the week (including bank holidays). Urgent treatment centres are a facility you can go to if you need urgent medical attention but it's not a life-threatening situation.

You may be referred to an urgent treatment centre **by NHS 111 or by your GP**. You can also just turn up and walk in. But an appointment service will be in operation and will be the preferred method of contact.

Conditions that can be treated at an urgent treatment centre include:

- sprains and strains
- suspected broken limbs
- minor head injuries
- minor scalds and burns
- ear and throat infections plus skin infections and rashes.
- eye problems
- coughs and colds, feverish illness and condition in adults and children
- abdominal pain or vomiting and diarrhoea
- emergency contraception

URGENT medical help If urgent medical attention is needed but it's not a life-threatening situation, first call 111. If life is at risk, call 999. NHS 111 will assess the caller and give the option to speak to a nurse, doctor or paramedic if appropriate and advised to go for treatment. This could be an urgent treatment centre, an out-of-hours GP service, a local GP in normal hours, or the nearest A&E if necessary.

The sustainability and transformation plans

A presentation was also provided regarding the regional STP with a general description made by the head of the STP board of Teesside regarding the structure of STP's in the region and the aims and objective in regard to healthcare up to and beyond 2020, with reference to Northumberland, Tyne and Wear, and North Durham.

The plan is one of 44 plans being developed across the country in response to NHS England's Five Year Forward View which is a national plan for a better NHS. The sustainability and transformation plan (STP) for Northumberland, Tyne and Wear, and North Durham is to be delivered locally by 2021.

Topics specific to the northern region were indicated....

- Improve health inequalities
- Ensure safe and sustainable local health and care services
- Fill a funding gap that could be as large as £641m by 2021.
- The health inequalities in the area will be reduced to be comparable to the rest of the country
- The area will have thriving out of hospital services that attract and retain the staff they need to best support their patients
- There will be high quality hospital and specialist care across the whole area, seven days a week.

These will be encouraged by upscaling services in regard to health and wellbeing, integrations of commissioning, better use of patient's records, consultations with voluntary sector. The plans may indicate combining local resources and examples were mentioned in regard to South Shields and Sunderland. Topics were also mentioned in regard to Northumberland community hospitals..

The new structures and processes are to be integrated into the system of NHS response to patient needs as per the 5-year plan and funding available. Such responses will have affects on what individuals can expect regarding their needs being acknowledged when at home or travelling whether in an urban or rural area and it was stressed that it is vital that such information is made easily available.

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