

HEREFORDSHIRE PRIMARY CARE TRUST

BRIEFING PAPER FOR HEREFORDSHIRE HEALTH SCRUTINY COMMITTEE ON ENT SERVICES IN HEREFORDSHIRE

Introduction

In March 2004 the Primary Care Trust published a consultation document on the future development of local Ear, Nose and Throat services. It set out some of the drivers for change, described some of the options available to the Primary Care Trust as the commissioner of health services and Hereford Hospitals NHS Trust as the main provider of local services. The PCT wished to consult local people and other stakeholders on their views on how local services should be developed. Following the consultation period the PCT agreed to support a networked option whereby Hereford Hospitals Trust would work closely with Worcestershire Acute Hospitals Trust to develop a local service. This was the model of service preferred by the service's senior clinicians.

Update

It is now ten months since the changes were made in ENT services. The NHS organisations involved have been conducting a review to summarise any issues that have become apparent. Meetings were held between clinicians from ENT departments, Hereford A&E and management at Hereford County Hospital on 17 May and at Worcestershire Royal Hospital on 18 May 2005.

Inpatient transfers from Hereford to Worcester

In one year there were only 5 patients transferred in this way.

It was always envisaged that any patient still on the ward under ENT care in Hereford at midday on Friday would be planned to transfer to Worcester and either to be discharged home from there over the weekend or return to Hereford on the Monday. Because most ENT operating is in the early part of the week, and most patients are in hospital for less than 24 hours, there are very few inpatients remaining on the ward on a Friday lunch time. Some of these patients are stable and will be due for discharge on the Saturday morning. In this situation it has usually been possible for the General Surgical houseman to discharge them on the following morning rather than transfer the patient to Worcester for one night.

Transfers from Hereford County Hospital A&E Department to Worcestershire Royal Hospital A&E Department

There were 32 patients identified in the one year period. This was lower than we had anticipated and may well reflect the efficiency of the ENT emergency service being offered now in Hereford with an emergency ENT clinic being run every morning during the week.

Change in ENT workload in the A&E Departments of Hereford or Worcester

There is a perception in Hereford that there may have been more active treatment of ENT patients in Hereford, for example packing in the nose and arranging follow up on the Monday rather than making an immediate call to the ENT Department. However, this does not appear to have put an undue strain on the A&E Departments at either site; the departments are not expressing any specific concerns over this.

The Trusts have tried to identify numbers of patients with ENT problems from Herefordshire going direct to Worcester A&E Department bypassing the Hereford service; we have not been able at this point to obtain any accurate statistics for this, but again the A&E Department in Worcester is not expressing any specific concern.

Hereford ENT Outpatients Emergency clinics

These clinics are held on every weekday morning and accept direct referrals from the GP and A&E where spaces exist in a clinic, they are also utilised for urgent referrals received by letter from the GP, for example for recurrent epistaxis, and also patients attending the Audiology Department who cannot have the hearing aid fitted without wax removed from the ear. These clinics are normally staffed by one ENT doctor, either a staff grade or SHO together with a nurse practitioner. About 4 to 6 patients are seen per clinic. Since its inception in August this clinic has seen 264 new patients and 206 follow up patients, with a DNA rate of 4.6.

Nurse Practitioners

The ENT nurse practitioner currently working 3 days per week was appointed in October 2004 has been extremely effective in assisting in Outpatients, setting up two nurse led Outpatient clinics, overseeing preadmission, setting up a link system with nursing staff on the wards, ITU, A&E and the Community. She has extensive experience of head and neck cancer and assists in the multidisciplinary head and neck clinic on a Monday morning. In addition, we have recently interviewed and appointed a further full time senior staff nurse who we hope we will be able to train up as a second nurse practitioner. She will start her post in June 2005 after an initial two week induction.

Staff Grade posts

The two ENT staff grade doctors working in the ENT Department in Hereford now work one day a week in Worcester. There were some initial issues over accommodation and travel, but these have now fallen into place. Contact with Worcester is beneficial in terms of expanding their opportunities to work with different consultants, attend departmental and interdisciplinary meetings and for peer support.

Clinical Incidents

There have been no reported clinical incidents, but there have been 3 or 4 night time ENT emergencies which came to the Hereford A&E Department and for which an urgent ENT opinion was required, and there were some organisational issues revolving around protocols which we are dealing with.

Ambulance Service

Before instituting the protocols there was extensive discussion with the ambulance services for Herefordshire and Worcestershire. It does seem that with time, and perhaps changes of staff, there have been a few occasions where patients living between Hereford and Worcester were brought to Hereford at a weekend rather than transferring directly to Worcester. In fact the protocol already addresses this issue, but the Trusts are going to arrange a further meeting with the ambulance service to re-emphasise this.

Hereford ENT Service

A recent review of Outpatient statistics shows that there has been increased throughput over the last year with anticipated adequate provision to cover referrals once a backlog of follow up patients has been dealt with; this is anticipated to occur within the next three months. There is a shortfall in provision for elective surgery, this issue is under discussion.

Complaints

There have been no patient complaints to the PCT or Hereford Hospitals NHS Trust related to the changes in ENT services.

Summary

All in all, it seems that the new service has worked extremely well with very few problems and no issues of safety. Some minor revisions to the existing protocols are to be undertaken shortly, these will then be redistributed and this will include a meeting with the heads of ambulance service to clarify certain points.

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