

Urgent and Emergency care redesign Ipswich Hospital

Ruth.Bushaway@Suffolkfed.org.uk
David.Hodgkinson@Ipswichhospital.nhs.uk

Aim of today

- Update
- The proposed UTC model
- Early Stages - work in progress
- Input and feedback



East Suffolk and
North Essex
NHS Foundation Trust



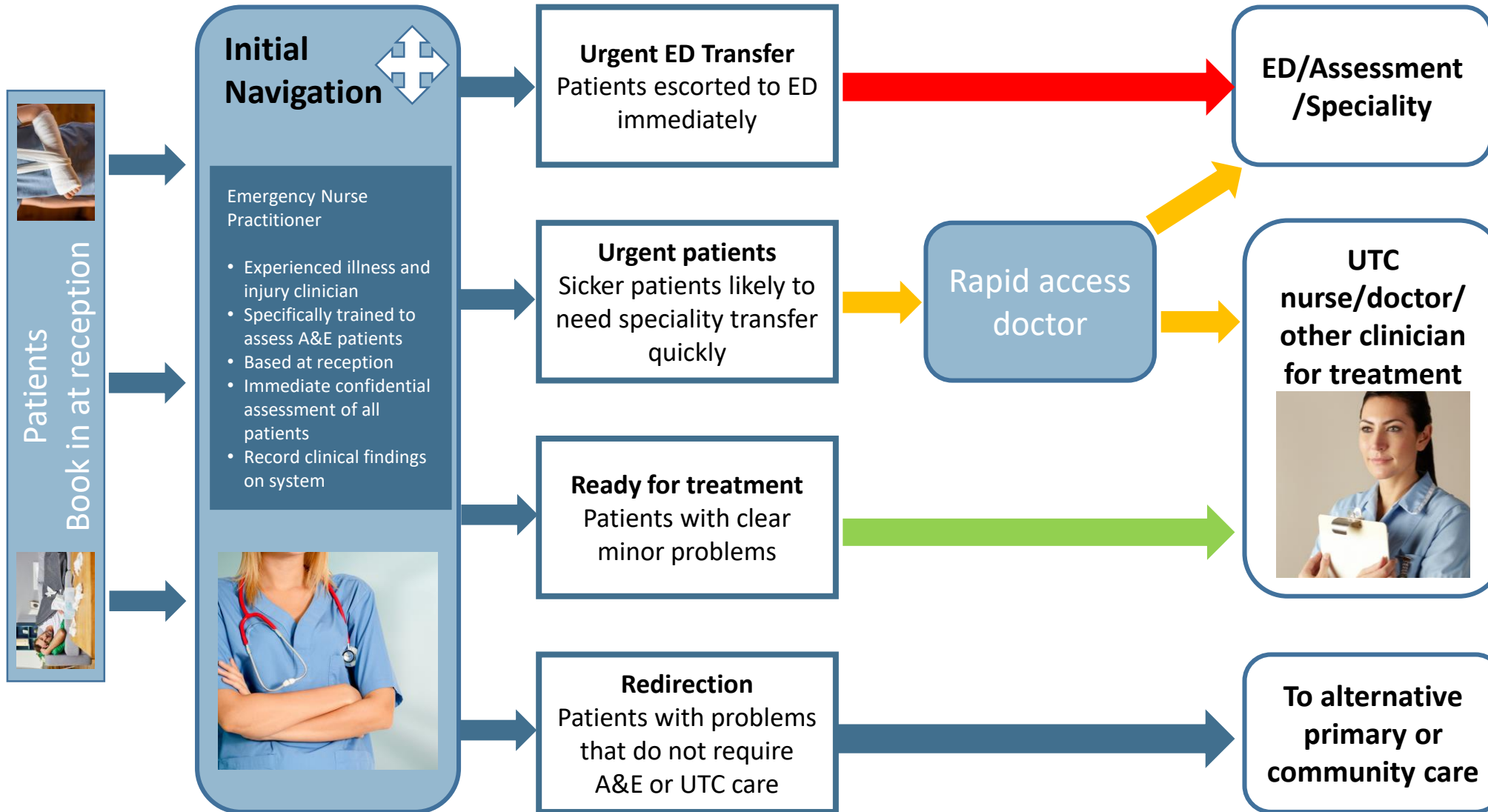
The challenge

- Rise in attendances, reduction in workforce
 - Matches general practice
- Traditional ED model unsustainable
 - 10 year planning horizon
- Value of access to patient records
- Utilise experience of primary care & ED streaming

Proposed 'front door' model

- Urgent Treatment Centre new build
- Redesign Emergency Department (ED) close ED to walk in patients
- Co locate and redesign assessment units
- Use SystemOne
- Planned completion: build to commence 2020, completion 2021
- 1000 Patients seen a week → practice list 11, 820

Quickly assess and direct patients to appropriate care.



Urgent Treatment Centre Principles

- General practice clinical model
- Clinical leadership by GPs
- Multidisciplinary workforce
- No 'routine' diagnostics or tests
- Open 24/7 co-located with Out of Hours

Urgent Treatment Centre



New Front Door



COSTA

ED

EAU

PROPOSED ED AND UTC

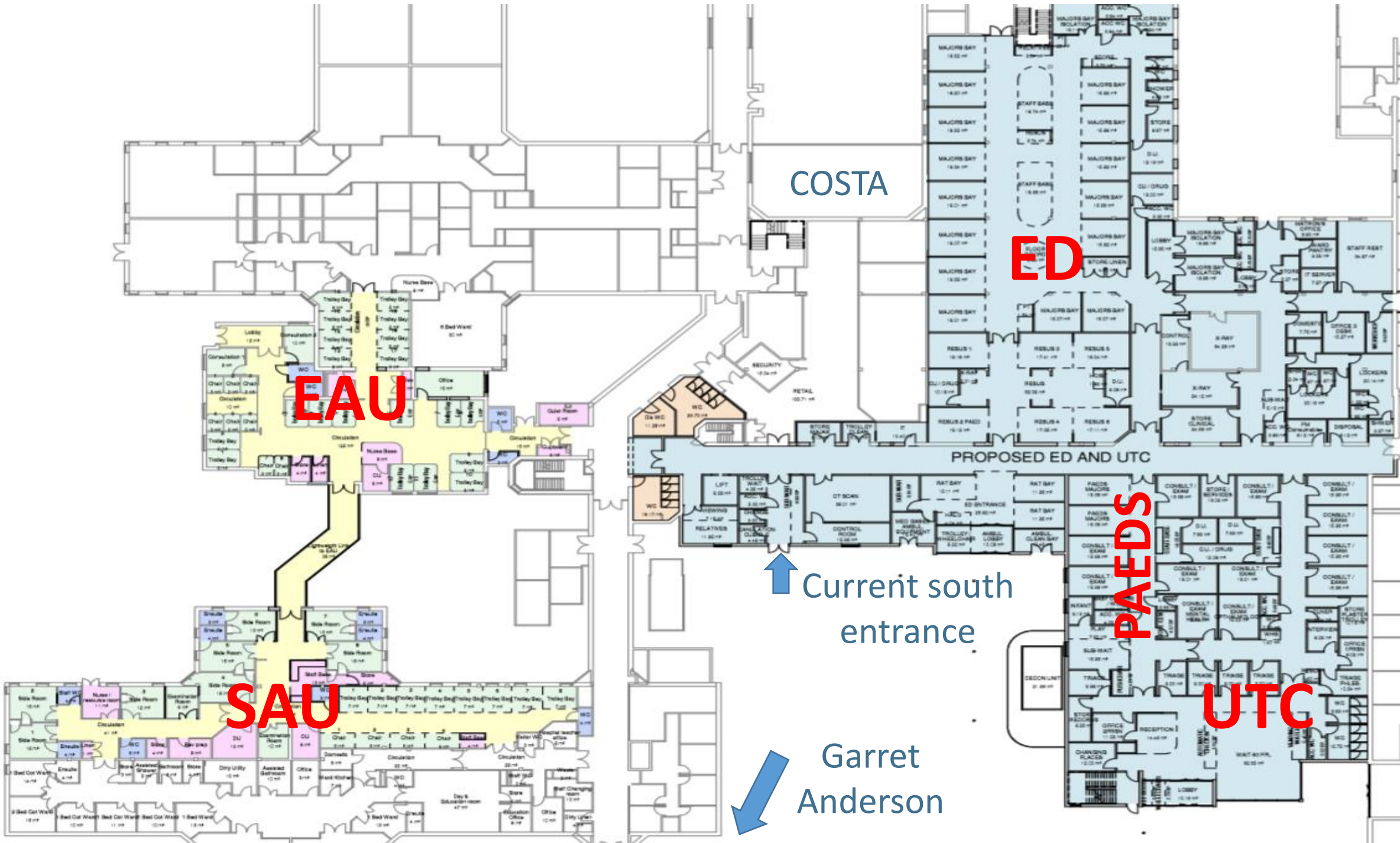
PAEDS

Current south entrance

SAU

UTC

Garret Anderson



Challenges and Opportunities



East Suffolk and
North Essex
NHS Foundation Trust

Challenges

- Finding and securing the required workforce
- Making it too good or too easy to access – more people turn up
- Multiple providers & organisations – simplify governance



Opportunities

- Colleagues working closely across primary and secondary care
- Development of the workforce – new environment/new ways of working
- Appropriate and streamlined pathways for patients into, out of and within the hospital
- Supported navigation of patients away from ED
- Single system/record to point of admission

Comments and feedback

- .
- .
- .
- .

Ruth.Bushaway@Suffolkfed.org.uk
David.Hodgkinson@ipswichhospital.nhs.uk