



## Gloucestershire Minor injury and Illness Units

Modern urgent care  
in our communities

# Introduction

**At GHC, we operate 6 Minor Injury and Illness Units across Gloucestershire.**

There is an additional MIU at Tetbury Hospital, operated by Tetbury Hospital Trust Ltd.

At Cirencester MIU, we also run an enhanced same-day minor illness clinic for locality general practices 6 days a week.

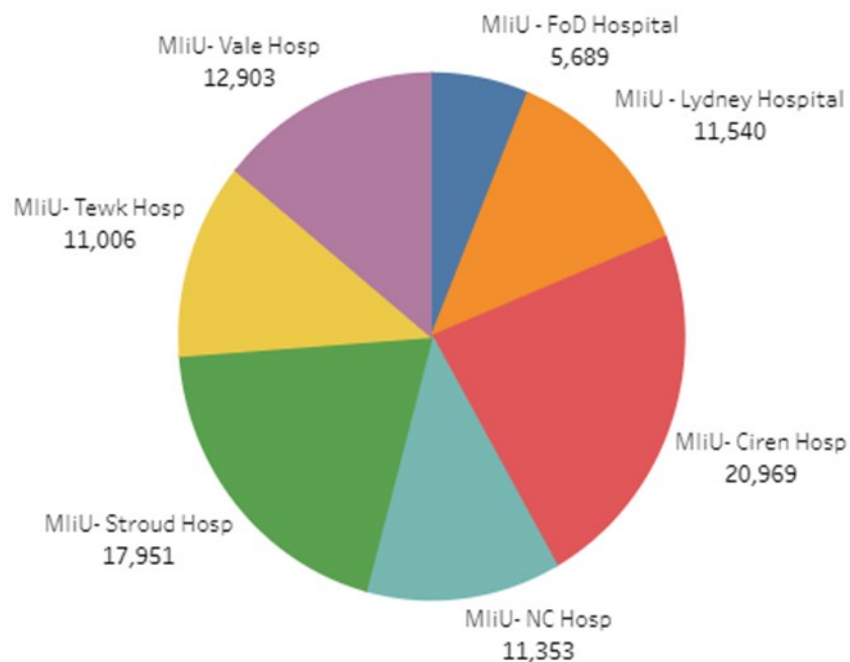
This is staffed by 61 emergency practitioners, and 15 Band 5s.

## Busy sites of urgent care

**Across the county's 6 units, we see and treat approximately 7,500 patients a month, and activity is rising.**

Of those approximately one quarter have a booked appointment. Three quarters present as walk-ins.

We also provide a same-day minor illness clinic for South Cotswold Primary Care Network, where we see and treat 20 patients each day. These are referred from locality GPs in booked appointments.



# Referral sources

- **MIU Telephone Triage Service** (soon to be phased out into new 111 provider)
- **NHS 111**
- **South West Ambulance Service NHS Foundation Trust (SWAST)**
- **Local GPs**



# Our Workforce

**The MIUs are an Emergency Practitioner-led service with a nurse or paramedic background, with support from staff nurses, paramedics and health care assistants.**

All Emergency Practitioners have undergone accredited training and have qualifications in:

- Advanced Practice in Clinical assessment reasoning and differential diagnosis
- Physical assessment and clinical reasoning in children
- IRMER and non-medical X-ray referral including 3-yearly red dot training
- Face-to-Face Manchester Triage

All senior emergency practitioners have additional qualifications in:

- Independent non-medical prescribing
- Physical assessment and diagnostic reasoning for advanced practice
- MTS Telephone Triage

# Challenges

- **Misdirected referrals** from all referral sources
- **Increasing numbers of patients** needing ongoing and routine dressings with no other (appropriate) provision available
- **Increasing numbers of higher acuity patients** who are reluctant to attend other services or call an ambulance due to messaging about wait times
- **Delay in urgent ambulance transfers** to ED
- **Recruitment** at Emergency Practitioner level.



# Patients by acuity

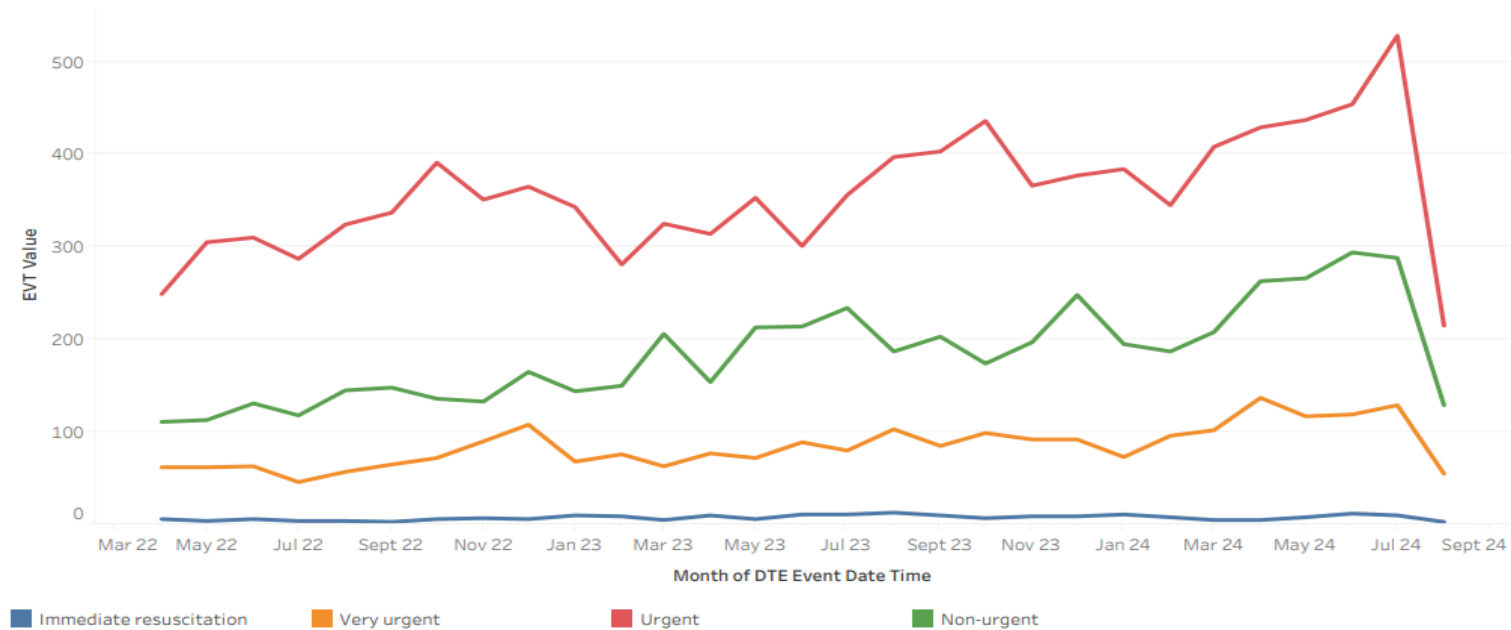
## MIU Attendances by Triage category Trends excluding standard

Last Updated : 15/08/2024

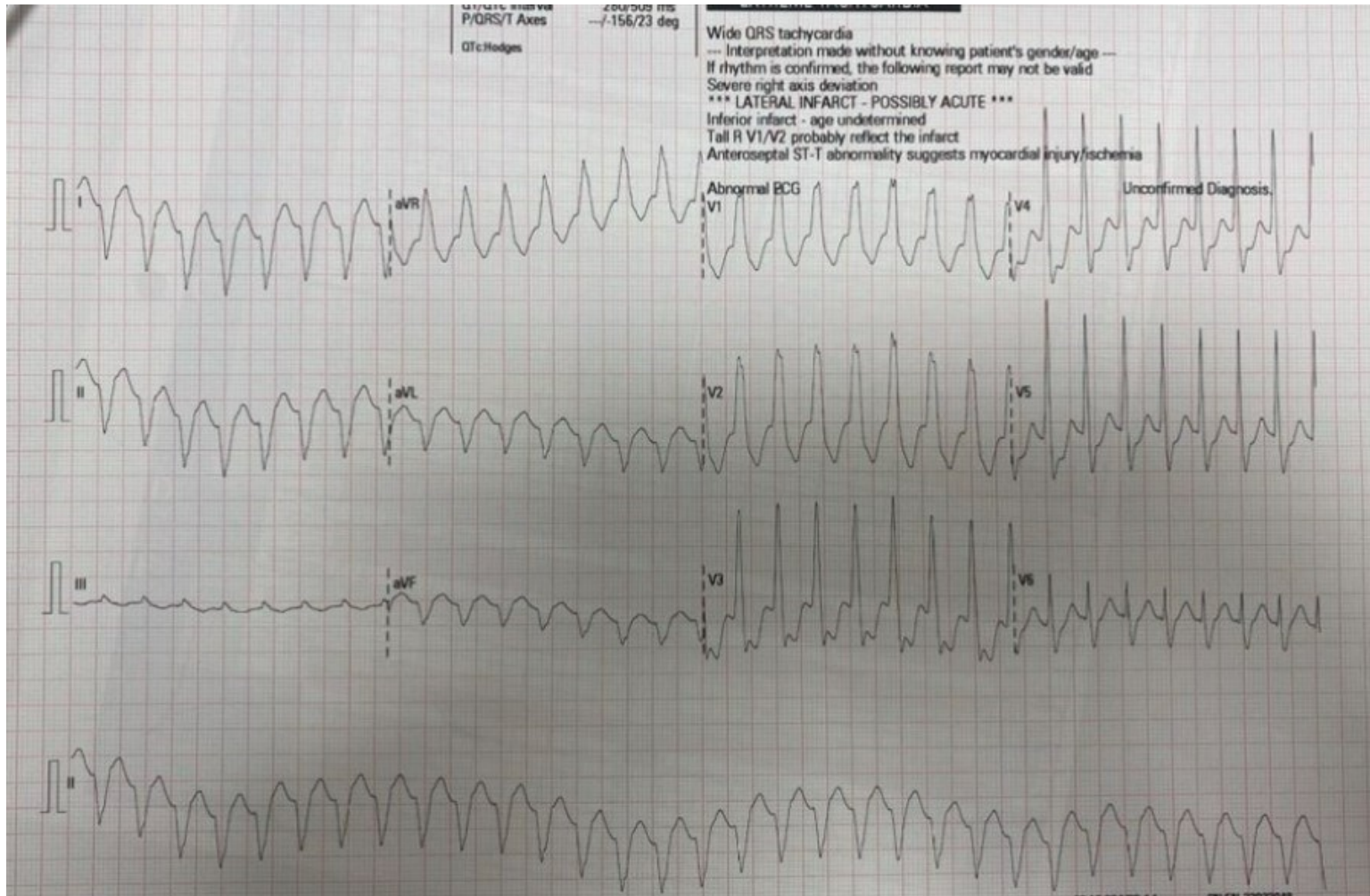
NB: This report will not match total attendances by MIU due to selected exclusions - see the iButton for more information

Financial Year  
All

Graph shows Immediate Resus, Very Urgent, Urgent and Non Urgent only. Unassessed and Standard have been removed









# Innovation and Quality Improvement

**Quality Improvement (QI) starts with making a difference. Better patient experience and outcomes are achieved through changing behaviour and processes, using a systematic change method and strategies.**

We're proud of our on-going work to improve the quality of the services we provide and the lives of our service users.

Recent projects include:

- M-OPEL
- MiDoS
- Telephone Triage Service
- Co-production with other acute services and agreeing streaming pathways to refer patients to services, avoiding ED.
- SWAST referrals.
- Cinapsis
- Honorary contracts and Link staff to ED / PAU and VFC



# Innovation and Quality Improvement

## M-OPEL

The NHS England Operational Pressures Escalation Levels (OPEL) Framework 2016 has been used to build this MIU SOP, which is referred to as M-OPEL 1 to 4.

This allows staff to escalate when there is pressure, increased acuity, unsafe staffing levels within each unit.


	Amber	Red	Purple	Black – CLOSE UNIT
Level of Escalation	Minimal staffing levels Increased demand (any unit) <b>Update MOPEL tool</b>	Staffing pressures, Increased demand <b>Update MOPEL tool</b>	Staffing pressures, Unit has hit capacity for walk In patients Booked appointments continue and the unit closes to walk ins. (Patients who present will be Triage and signposted)	Unacceptable staffing to provide a service Report to Service Director – escalates to Execs with planned opening time (all details on MOPEL sit rep in SHREWD inbox) <b>Update Matrons (OCM via pager if OOH).</b> <b>Update Hospital Matron/Ward</b>

# Innovation and Quality Improvement




















## MiDoS

### Live information easily accessed by staff

With clinical pathways, service opening hours, contact details, policies, SOPs and protocols.



The screenshot displays the MiDoS web application interface. At the top, there are two search bars. The first bar is labeled "Add patients GP for RR, SPCA or Comm Nurses" and the second bar is labeled "Search here OR the A-Z OR under the buttons". Below the search bars is an alphabetical index (A-Z) and a numerical index (0-9). The main content area is a grid of colored buttons, each with an icon and a label:

 Community Urgent Care Services inc. EDs	 Same Day Emergency Care Acute - Clinician same day advice for alternative acute services	 Ambulance and 111 Bypass Details
 GP In and Out of Hours	 Pharmacies and Pharmacy Services	 Telephone Triage
 KEY CLINICAL LINKS	 Policies (SOPs on M Drive)	 MOPEL Escalation Portal
 NHS.UK - Symptom Checker and Medicines Guide	 MIU Audits	 PATIENT - Symptom Checker, Health Information and Medicines Guide
 Community Services	 Mental Health	 Sexual Health
 Search Services in Wales	 Opticians	 Public MiDoS - Click here then send the information to the patient using the email icon
	 Dental, Dentist	

# Innovation and Quality Improvement

## SWAST Direct Referrals

**This project is aimed at reducing attendance at ED by working with SWAST to direct patients to our MIUs.**

The inclusion criteria included falls with wounds and simple fractures – this was triaged via the Telephone Triage line prior to accepting, which enabled the team to re-direct if not appropriate for our service.

Numbers redirected so far have been small



# Innovation and Quality Improvement

## Cinapsis

**This project connects MIU staff with local specialists normally at Gloucestershire Hospitals NHS Foundation Trust.**

The service offers specialist advice and referral platform as well as a full documented record of discussion and plan of care.



# Innovation and Quality Improvement

## Link Staff

**Link staff with honorary contracts to GRH Emergency Department, Paediatric Assessment Unit and Virtual Fracture Clinic.**

Best practice and learning shared across teams in dedicated alternate week clinical supervision sessions



# Innovation and Quality Improvement

## Staff wellbeing support

- Support is led by a clinical psychologist
- Face-to-face sessions held on each unit
- Online Teams session
- Separate sessions for team managers
- Wellbeing champions in each team supported by clinical psychology team.





# Future thinking

Collaborative working with OOH and Clinical Assessment Unit (CAS)

Discussions continue about Urgent Treatment Centres.

Emergency Practitioners progressing toward Advanced Practice and digital badge.





Questions?