

UNSCHEDULED CARE BACKGROUND

Unscheduled care can be described as:

“NHS care which cannot reasonably be foreseen or planned in advance of contact with the relevant healthcare professional, or is care which, unavoidably, is out with the core working period of NHS Scotland. It follows that such demand can occur at any time and that services to meet this demand must be available 24 hours a day.”

In the past the largest group of patients requiring unscheduled care tended to use one of the following routes:

- an urgent appointment with their GP
- advice from NHS 24
- referral to the Out of Hours service via NHS 24

More recently service developments in community pharmacy have led to pharmacies becoming an important access route for people requiring unscheduled care particularly over weekends and public holidays. Examples of the tools available to pharmacists include:

- the National Patient Group Direction for the Urgent Supply of Repeat Medicines and Appliances
- community pharmacy Direct Referral to local Out of Hours services
- the NHS Minor Ailment Service element of the new community pharmacy contract which has established community pharmacy as the first port of call for the treatment of minor or routine ailments

Unscheduled Care Developments In The Future

Delivering for Health sets out the Scottish Executive’s commitments to redesign the model of unscheduled care throughout Scotland, building on the National Framework document *Building a Health Service Fit for the Future* and the work of the Unscheduled Care Collaborative Programme. The purpose being to develop a stratified unscheduled care system which will improve integration, quality and productivity by:

- maintaining care at local level for the majority of unscheduled cases through multi-disciplinary teams working in Community Casualty Units
- allowing a greater separation of planned and emergency care wherever possible to protect capacity in both
- reducing the number of appointment cancellations for patients, and reduce waiting times
- achieve a more efficient use of limited facilities and specialist staff across the country

Part of this will mean a much greater emphasis on providing the majority of unscheduled care at local and community levels in a planned and co-ordinated way, thereby preventing inappropriate access to services such as Accident and Emergency and additional travel to and unnecessary stays in the hospital setting. It will require GPs, community pharmacists, the Scottish Ambulance Service, district and community nurses and NHS 24 to work together to act as the first point of contact for unscheduled care, especially for minor illness in the community. This, in turn, will result in people being assessed and either treated in a setting local to them or directed to a most appropriate part of the service.

NHS 24

NHS 24 is a confidential telephone health advice and referral service integrated with all 14 NHS boards and the Scottish Ambulance Service. It acts as the front end to local out of hours services, which are provided by individual local NHS Boards during the out of hours period when GP surgeries are closed (evenings, weekends, public holidays, protected learning time).

NHS 24 does not replace existing out of hours care. It links with existing services so that, if people need to be seen by a clinician, they will be cared for by the local out of hours service. The provision of local out of hours services remains the responsibility of each individual local NHS Board. NHS 24 acts as a 'gateway' for patients needing urgent access to out of hours services.

NHS 24 nurses within the contact centres around the country will assess and triage the calls they receive. They may explain how the patient can look after themselves at home or they may forward them to a local NHS board out of hours service. There are no patient records available at NHS 24 and all GPs are based at the out of hours centres not within the NHS 24 contact centres.

NHS 24 is designed to help the patient get the right care from the right people at the right time. The community pharmacy should be the first port of call for access to medicines and minor ailments and can assess whether the patient needs treatment or advice. If a patient needs to be seen in the out of hours period please refer to section 5 for guidance to avoid unnecessary calls to NHS 24.

With the introduction of the direct referral service pharmacists can now act as a gateway for patients needing access to local out of hours services. This will significantly improve the patient journey and avoid unnecessary calls for the patient to NHS 24 if the pharmacist has assessed they need seen by a GP in the out of hours period.