



## Children's Ambulatory (Step- Up - ACE Team) Care Newsletter

Issue 5 - March 2018

This is the fifth of a regular newsletter which provides updates on developments in the Children's Ambulatory Care 'Step Up' project - ACE.

In the last issue we gave you some information on the service launch and the initial uptake of the service by our GP colleagues, ED and CCDA

### Key Points since the launch of the service

From the launch of the ACE service, on 04 December 2017 up until 26 February 64 referrals have been received, 59 were accepted and 5 were rejected on the grounds of not meeting the pathway criteria.

Hospital attendance and potential admission has been prevented for 48 children who remained at home for the duration of their episode of acute illness. 1 CYP was referred into ED and 7 were

referred into CCDA for further assessment.

Primary care have referred 35 CYP (from GP practices) and hospital based services have referred 29 CYP This data demonstrates the need for a strategy to increase primary care engagement.

The majority of children referred into the service on the 'Wheezy Child Pathway' were aged 2 – 3 years

All CYP and families were contacted within two hours of their referral being received.

All CYP have had remote access to a Consultant/Clinical Huddle.

To date there have been no adverse events in the service

### Introduction of New Pathways

The next pathway to be introduced in the Spring of 2018 will be the Gastroenteritis

pathway. The training and competence working group are currently developing a training programme for this. The Croup pathway will follow in April/May time

### **Introduction of Telemedicine**

The use of Telemedicine is currently being piloted and evaluated. Telemedicine allows senior paediatricians to view the child whilst at home, providing enhanced decision support. In addition this technology has in the future, the potential to be used by nurses to review the child remotely even after they have left the home We were asked by Clive Kay to talk about the ACE project to the NHS England National Director of Operations and Information -Matthew Swindells and Chris Hopson, Chief Executive of NHS Providers at their recent visits and that they both were really interested in the work and direction we are travelling in particularly around the use of Telemedicine.

### **Governance and Risk**

Prior to the launch of the ACE service, and to ensure reasonable steps had been taken to prevent harm to the CYP/family, or staff working in the service, robust risk assessments were undertaken and subsequent action plans developed and progressed for the following elements of the service:

For the duration of the pilot of the CYP Ambulatory Care Experience (ACE) Service there will be one ACE nurse on duty from 09.00 – 21.00hrs. Travelling to and undertaking home visits in urban and rural areas of the city will take place up to 20.00. ACE nurse lone working in the community poses a risk to the nurse in both terms of travelling to and carrying out a home visit. The family in most cases will be unknown to the nurse

The CYP will be referred to the 'ACE' Team by their GP, ED and CDA, at BRI. A referral will be sent to the ACE team and within 2 hours of that referral a nurse from the team will call the parent/carer and arrange a home visit to assess the CYP and agree a plan of care. There may be occasions where the ACE nurse is unable to contact the family.

The ACE nurses will use 3 or 4G laptops and smart phones in order to access relevant IT systems including Telemedicine and those to document in the patient record. These IT processes are reliant on Wi-Fi connectivity.

It is recognized that there may be occasions when staffing issues arise within the ACE team due to short notice sickness or absence for other reasons and on these occasions the Children's Community Nursing team has a responsibility to manage referrals from GPs as and when they are received.

To mitigate the potential risks Clinical Escalation, Full Capacity and 'Unable to Contact' protocols have been developed and ratified by the appropriate Governance forum. These protocols are accessible on the ACE shared drive and BTHFT Share Point Clinical Guidelines (Children's) web page. All documents will be reviewed by the end of March 2018.

### **Service Promotion**

The ACE service has been showcased at the recent 'Learning and Innovation Conference: Spur imagination and spark innovation...In Children and Young People's Service' and a Connected Health Cities meeting. Connected Health Cities, is a national project tasked to identify ways to connect information and knowledge (data) held by the NHS, social care and other local authority services: systems can then be planned and delivered more effectively

And once again a big thank you, from all the team, to all colleagues in Children's Services, the IT department and the wider Trust for all their support and patience which has allowed us to get to this point  
**Thank you!**