

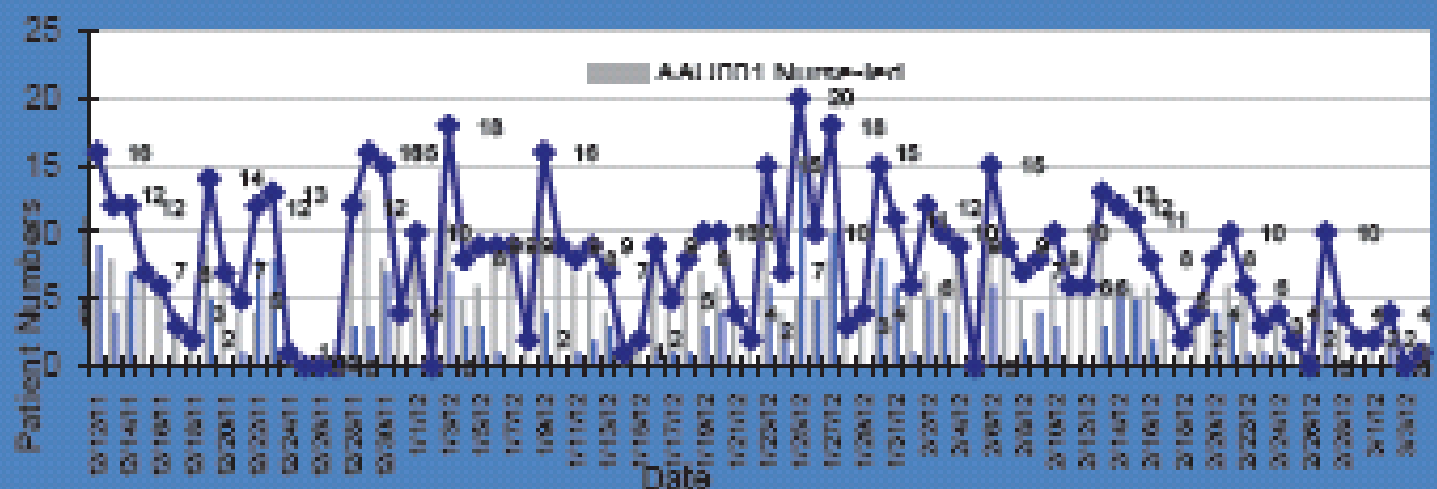
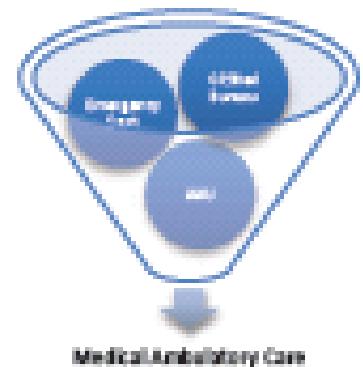
Ambulatory Emergency Care at Hull and East Yorkshire

Background

Key project as part of the Hull and East Riding blueprint for unplanned care

Tools Used

- Sustainability tool.
- AEC Directory.
- Experienced Based Design



Improvement so far

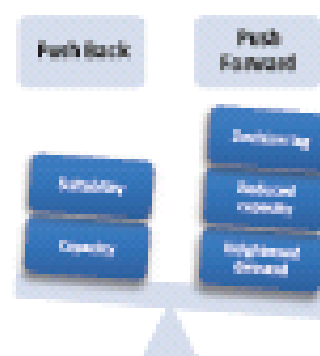
Nurse-led MACS

& Physician-led MACS

Monday – Friday - Category II conditions
community-acquired pneumonia, headaches,
first seizure,
recurrent ulcers, uncomplicated community-
acquired pneumonia, uncomplicated asthma,
stable gastroenteritis, stable anxiety, stable
haemorrhoids/haemorrhoids, uncomplicated
sprains.

Some Category II conditions will transfer to
Nurse-led MACS over time

Challenges



Dr Mo Aye
Dr Mark Simpson
Dr John Parker.
Michelle Page.
Erica Daley .

Results & Next Steps

Default MACS

Facilities: single geographical area
Economy of scale, flexibility in
supporting A&U, smoother patient
flow,

Acute physician-led:
smaller group, similar outlook, less
variation
Correlation between skill and
discharge/diagnostic utilisation

Working staff:
work to protocols, lower
dependency, varied skill set, focus on
safety, nurse-led (criterion-based)
discharge

Safety and quality formalised:
Mechanisms for recall, access to
specialties (early review)
Patient information and experience
to guide service delivery