

# Urgent Care Clinical Dashboard

## Review

*“From the outset it has been clear that the dashboard is a powerful tool to help clinicians understand the quality and effectiveness of their care, providing an invaluable tool to integrate and proactively manage care across our local health economy”*

***Dr Anne Talbot, GP & Associate Medical Director, NHS Bolton***

# Background

In March 2008, as part of the Next Stage Review, NHS Bolton was invited to develop a prototype Clinical Dashboard for Primary Care. A Clinical Dashboard is a ***“toolset developed to provide clinicians with the relevant and timely information they need to inform daily decisions that improve the quality of patient care”***. \*

The Dashboard that NHS Bolton developed relates to Urgent Care, specifically to combine “real-time” information from their local Acute Trust on A&E attendances, admissions and discharges combined with “real-time” information from Out of Hours and the Walk in Centre to each GP Practice. This information is then displayed in a graphical, user-friendly way to help Practices to more pro-actively manage and co-ordinate patient’s healthcare, especially for the most vulnerable patients and those with long-term conditions. The Dashboard doesn’t contain any more information than the Practice already receives from their usual resources e.g. from discharge letters etc, but as these sources can traditionally arrive at different times, the Dashboard instead presents the information in a more timely way and displays all of this information together to present a more complete picture.

The Dashboard is used in a number of different ways within the Practice and is used by GPs, Nurses and Active Case Managers to name a few.

## Further reading:

Details relating to the original pilot: <http://www.connectingforhealth.nhs.uk/systemsandservices/clindash>

Recent (December 2010) Medical Directors bulletin article:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Bulletins/Medicaldirectorsbulletin/DH\\_122289](http://www.dh.gov.uk/en/Publicationsandstatistics/Bulletins/Medicaldirectorsbulletin/DH_122289)

# The Urgent Care Dashboard and QIPP

The programme is part of the Urgent Care Quality, Innovation, Productivity and Prevention (QIPP) workstream and has Sir John Oldham as the Programme Sponsor. The high level aim is to make the Urgent Care Clinical dashboard (based on NHS Bolton pilot) available to all PCTs /GP Consortia across England over the next 2 years starting with 10 pioneer sites .

## Objectives

To make the Urgent Care Clinical dashboard available to GP practices across England over the next 2 years

To inform the strategy and approach to the wider 'local' take-up of the Urgent Care dashboard

Development of Local SHA/PCT Cluster/GP Consortia capability to become self-sufficient in supporting local deployments following Pioneer stage

To support Pioneer sites in obtaining infrastructure, software and skills required to leave the Pioneer sites with an ongoing dashboard capability that they are capable of developing further

To create a toolkit to support wider take-up of the Urgent Care dashboard including Standards, Logical architecture, data feeds library, detailed design documentation, project management artefacts and updates to metrics repository

To engage with key suppliers to agree / produce standards and interfaces

# Available support

This section sets out at a high level the delivery and funding model that is in place for the Urgent Care Dashboard Programme.

In essence the centre is providing a small programme management, knowledge management and implementation support role, with only limited funding available to do this. The project delivery will be the responsibility of the local NHS/PCT/GP Consortia and there is no central funding available to provide local resources, hardware or software. As a result it is expected that each pioneer project will need to confirm their own business case (where required locally), and be able to provide the necessary resources, and fund the development or procurement of the technology elements.

The central programme management and implementation support is focused on spreading the knowledge and lessons learned from the previous work at Bolton and from the dashboard work at other trusts to help the local teams organise the best approach to achieve success in their environment. A set of standards will also be developed centrally to guide the technical elements of the local projects, and this is necessary due to the number of suppliers who will be involved in the delivery of the projects whether providing data feeds or the dashboard application itself. The procurement/contracting of suppliers will be at a local NHS level.

QIPP/NHS Bolton will be providing:

- Overall Programme Management
- Clinical and Informatics expertise on the model deployed across NHS Bolton

The Department of Health Informatics Directorate (DHID) will be providing:

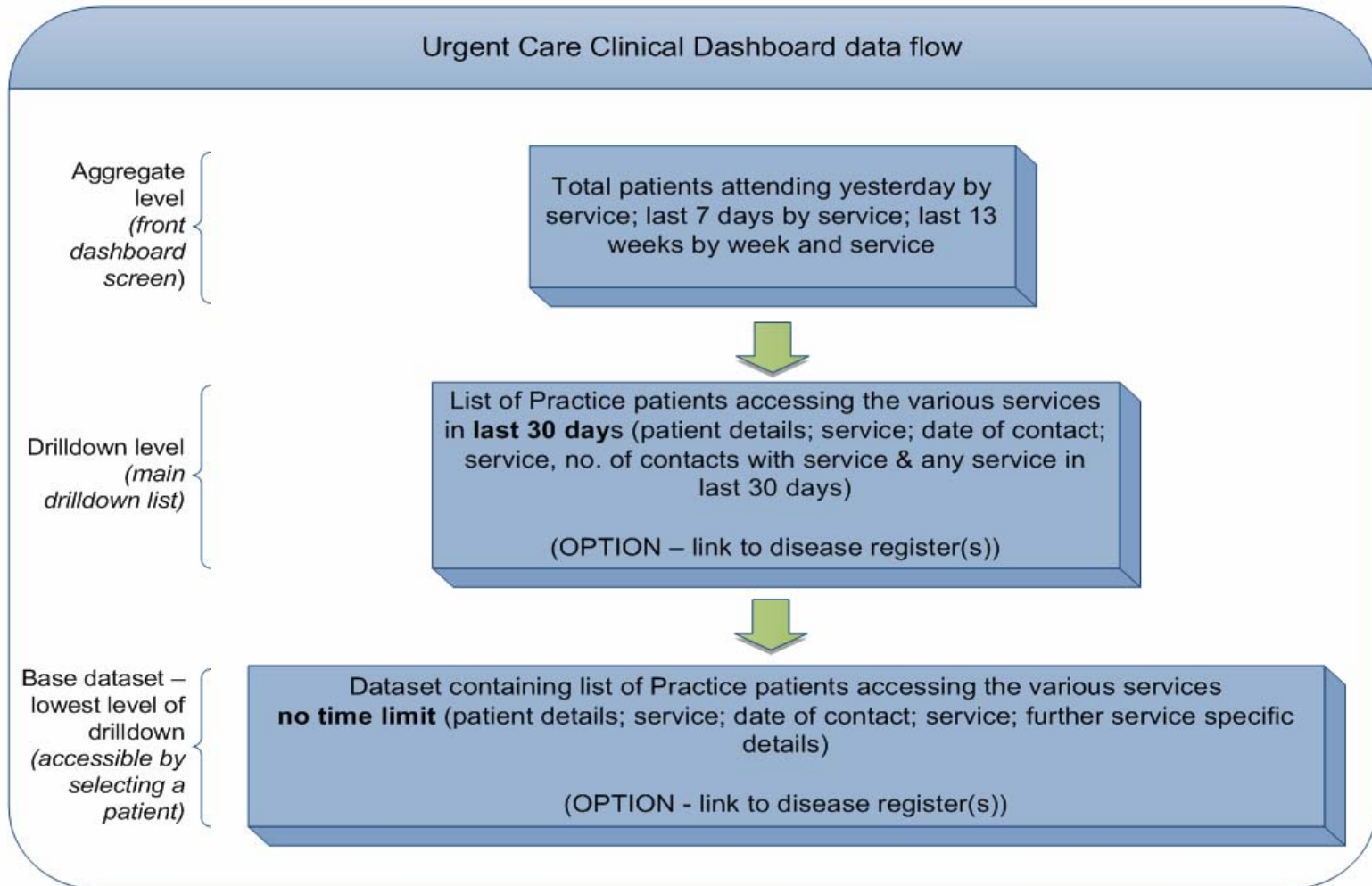
- A set of standards for use by the implementation projects
- Initial supplier/market engagement around the standards
- Initial mobilisation support and implementation consultancy to ensure maximum re-use from the current knowledge base and experience from the previous pilot programme
- Authoring and maintaining an implementation toolkit for the Urgent Care dashboard

Local NHS/PCT/GP Consortia:

- As per section 2.1 in the Expressions of Interest document
- Any supplier costs for software, hardware, development, etc

# Metrics in use at NHS Bolton

The high level diagram below shows the flow of data for the Urgent Care Clinical Dashboard



# Metrics in use at NHS Bolton

## Metric

The numbers of patient events at each of the various local, unscheduled care services yesterday and for the last seven days, with a drill down to patient details, covering:  
A&E attendances / Admissions / Admissions / Discharges / Out of Hour attendances / Walk In attendances

Total numbers of patient events at various local, unscheduled care services, for the previous 12 weeks

The numbers of patient events at each of the various local, unscheduled care services yesterday and for the last seven days, with a drill down to patient details, covering:  
Patients with more than one contact in the last 30 days

A list of patient details for those patients who have attended various local, unscheduled care services, who are on a disease register, and those with more than one contact in last 30 days:  
NHS number / Patient name / Contact date / Contact type / Admission Type / Frequency of usage (single and multiple unscheduled care services)

A list of patient details for those patients who have attended various local, unscheduled care services, in the last 14 days, including:  
NHS number / Patient name / Postcode / Date of Birth / Unscheduled care attendances in the last 14 days

A list of a single patient's details who has attended various local, unscheduled care services, from the beginning of the database set up, including:  
Dates of contacts / Dates of discharges / Contact types / Admission types / Discharge types / NHS number / Patient name / Postcode / Date of Birth / Symptoms / Outcomes / Disease registers / Prescribed items

A list of patient details with the selected type of unscheduled care service contact, occurring in the last 30 days, including:  
Dates of contact / Discharged dates / Contact type / Admission type / NHS Number / Patient name / Date of birth / Postcode / Symptom / Outcomes

A list of patient details for all patients attending unscheduled care on a chosen date, including:  
Dates of contact / Discharged dates / Contact type / Admission type / NHS Number / Patient name / Date of birth / Postcode / Symptom / Outcomes / Disease register / Prescribed outcomes

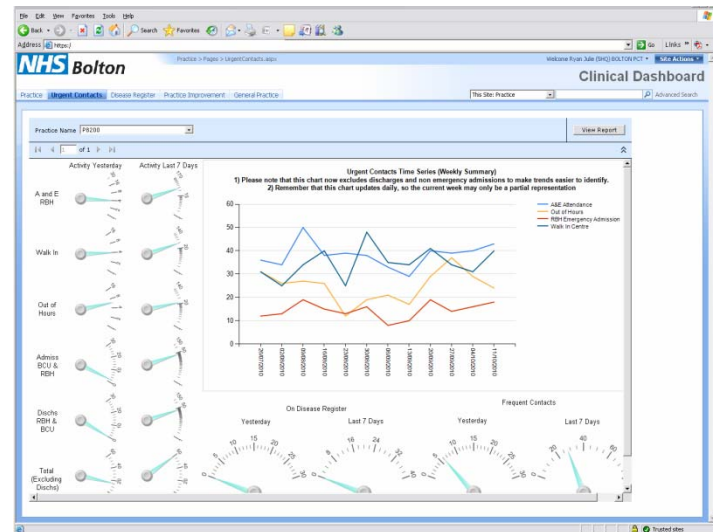


Fig 1. front screen of the Dashboard showing High level metrics.

The screenshot shows a drilldown view of patient details in a table format. The table has columns for Patient Name, NHS Number, Contact Date, Contact Type, Admission Type, Discharge Type, NHS Number, Patient Name, Postcode, Date of Birth, Symptoms, Outcomes, Disease registers, and Prescribed items. The table contains several rows of data, including patients like 'Shea, Paul', 'Harris, Maria', 'Jackson, Peter', 'Shea, Dan', 'Jackson, Peter', 'Jackson, David', 'Shea, David', 'Shea, Paul', 'Shea, Michael', 'Jackson, Tom', 'Shea, Paul', and 'Jackson, David'. Each row shows details for a specific contact event.

Row	Patient Name	NHS Number	Contact Date	Contact Type	Admission Type	Discharge Type	NHS Number	Patient Name	Postcode	Date of Birth	Symptoms	Outcomes	Disease registers	Prescribed items
35	Shea, Paul	NHS02019	19/03/2019	Walk In Centre	A & E/Walk In		02	1						
36	Harris, Maria	NHS02019	02/03/2019	Out of Hours	Walk In		6	2						
37	Shea, Paul	NHS02019	19/03/2019	A&E Attendance	First Attendance		02	1						
38	Harris, Maria	NHS02019	02/03/2019	Out of Hours	Walk In		6	2						
39	Jackson, Peter	NHS02019	19/03/2019	Walk In Centre	A & E/Walk In		46	1						
40	Shea, Dan	NHS02019	19/03/2019	A&E Attendance	First Attendance		20	1						
41	Jackson, Peter	NHS02019	19/03/2019	A&E Attendance	First Attendance		46	1						
42	Jackson, David	NHS02019	19/03/2019	Non-Emergency	Elective - Booked	Changeover	03	0						
43	Shea, David	NHS02019	19/03/2019	Non-Emergency	Elective - Booked	Changeover	40	0						
44	Shea, Paul	NHS02019	19/03/2019	Non-Emergency	Elective - Planned	Changeover	20	0						
45	Shea, Michael	NHS02019	19/03/2019	A&E Attendance	First Attendance		12	1						
46	Jackson, Tom	NHS02019	19/03/2019	Non-Emergency	Emergency - Walk In		72	1						
47	Shea, Paul	NHS02019	19/03/2019	Non-Emergency	Elective - Planned	Changeover	20	3						
48	Jackson, David	NHS02019	19/03/2019	Non-Emergency	Elective - Booked	Admission	03	1						

Fig 2. Example drilldown (not real data).