**Lancashire and South Cumbria ICB General Practice SitRep and Escalation guidance notes – Nov. 2023**

1. **Introduction/ Background**

The ICB asks for all practices to make weekly SitRep Submissions to the ICB using the EMS+ system, or in Pennine using GP Teams Net. For some areas this is also a new ask in the GP Quality Contract in the Practice Succession Planning section (should you have any queries about the GP Quality Contract please contact your Local Team).

Practices’ submissions are incredibly valuable to the ICB; to let us and System Partners know what pressures are being experienced and it is also a method by which practices can notify the ICB of an issue and receive support. ***Submissions received are only used for escalation reporting and not for any contract monitoring purposes.***

Practices can review their submissions over set time periods, and regular escalation could indicate the need to consider succession planning and/or operational changes which may lessen pressures.

Many practices have been submitting regularly for some time now, however the below information provides a reminder of the requirements, where you can gain support and set up new users.

In parallel to the ICB’s SitRep reporting system the LMC has also recently launched the GPAS system to collate information about primary care pressures. The submissions and processes for the two reports are separate and have different purposes but overall allow practices to be supported by both the ICB and the LMC and will benefit our understanding of general practice.

We thank you for your contributions over the past four years and ask for your continued support.

1. **Where and how to make submissions?**

Submissions can be made through:

* **EMSPlus** at [**www.emsplus.nhs.uk**](http://www.emsplus.nhs.uk) or via the EMS+ App on a smart phone - go to your app store and search for EMSPlus (this is for practices in the Morecambe Bay, South Cumbria, Fylde Coast, Central Lancs and West Lancs areas). ***See Appendices A and B for further information on how to register and make submissions.***
* or using **GP TeamNet** if in Pennine Lancashire area.

Practices are asked to make a single weekly SitRep Submission each Tuesday morning by 11am.

***For the Christmas week (w/c 25.12.23) practice should make their submission on Wednesday 27.12.23.***

The submission consists of just two elements:

* a single **RED**, **Amber**, **Blue** or **Green** status (***Please use the descriptions in Appendix C to decide on your correct status escalation level).***
* a free text box to provide a short description of the issues, pressures and support required.

Practices are only asked to make additional submissions (on any other days) if they have a change in their RABG status; either up or down. Therefore, it will be assumed that a practice’s status submitted on a Tuesday remains constant for the rest of the week unless additional submissions are made.

1. **How will submissions be used?**

The EMS+ system is used to collate all practice submissions received, including those initially submitted via GP TeamNet. It enables the local teams to support practices, identify ‘hot spots’ and ensure that the current state of primary care is reflected in System-wide discussions alongside other providers including hospital trusts (all acute and community services report onto EMS+ which can therefore provide a detailed overview of System pressures).

The SitRep reports will continue to be reviewed by Place Teams and at a System level in the ICB, tying them into the System Control Centre (formerly Gold Command) discussions and escalations. ***They******are only used for escalation reporting and not for contract monitoring purposes.***

The submissions received to date, have helped us to support practices with operational issues and have been essential to aid our understanding of primary care issues, allowing escalation region and national levels when required.

1. **What should the practice do if they are struggling or escalate to Amber or Red?**

* Update your EMSPlus status (if you are able to)
* Contact your Place Based Team – they are here to help and support wherever possible!

N.B. The ICB also has 24/7 on-call arrangements in place for significant/major incidents:

* If the incident occurs during normal office hours (Monday-Friday 9-5pm) please contact your local primary care place team by phone (details attached) in the first instance who will support you to escalate as appropriate
* If you are unable to immediately contact your primary care team, or if the incident occurs outside of normal office hours then contact the ICB Manager on call via **0300 3730 900**

All situations are different, but practices have found that taking the below actions can relieve some pressures/help support practices:

* Enacted your Business Continuity Plan/s.
* Contact your PCN colleagues to see if they can support you during this time. This could include having temporary access to increased Enhanced Access appointments.
* Contact local urgent care services (if applicable) to advise that they may see an increase in activity.
* Update your entry on the Directory of Service (DOS) by emailing the DoS Team at [**mlcsu.111dos@nhs.net**](mailto:mlcsu.111dos@nhs.net), this will stop NHS111 directing pts to the practice, but remember to update again once things return to normal.
* Consider using locums or alternative staffing options.
* Speak to your Buddy Practice(s) to see if they can offer any support.
* Speak to your local community pharmacies to let them know of the pressures you are facing and if they are likely to see an increase of activity. See if they can offer any additional support, this could include increasing signposting to the Community Pharmacy Consultation Service.

If you need any support with the above, contact your Place Primary Care Team.

1. **What support can you expect from Place Primary Care Teams**

The key role that the Place Primary Care Teams can play to support escalated Practices is to facilitate and coordinate support from other ICB functions and System Partners and ensure System awareness. The operational responsibilities remain that of practices.

Examples of support the Teams have provided in the past include:

* Facilitate discussions with the PCN to help identify support options.
* Notify NHS111 and local urgent care services that they may receive additional activity and request that patients are not passed back to the practice.
* Liaising with Estates and other local services to obtain generators, source access to fridges, seek alternative working spaces where possible.
* Contacting the ICB’s Comms Team to provide support in notifying patients of service changes.
* Liaise with IT and escalate issues.
* Facilitate contact with other appropriate specialist teams as required i.e. infection control, safeguarding.
* Link practices to the Training Hub or signpost to other providers of wellbeing support.
* Attend, coordinate and support practices at local tactical meetings.

**Appendices**

**Appendix A. How to get setup on EMS+ or access support?**

You will need to have an EMS+ account to make submissions, practices can have a number of accounts so the task can be shared between staff members.

Follow the below guides to set up an account and to manage your profile. If you need any help with access, logins or submissions please don’t hesitate to contact the EMS+ Team at [**mlcsu.rcmt@nhs.net**](mailto:mlcsu.rcmt@nhs.net) or call on **0121 612 1733**.

 

**Appendix B. EMS+ Guidance notes for making submissions:**



**Appendix C. Lancashire and South Cumbria GP SitRep Escalation Status descriptions and responses**

Practice should use the descriptions in the table overleaf to decide on your correct status escalation level.

The actions detailed below will be completed in response to the raising of a new issue on the SitRep if the practice has not already contacted the Team about the issue.

**SitRep Escalation Status descriptions and actions:**

* Extreme risk to business continuity, or
* Unable to provide any nationally and locally agreed services, or
* Catastrophic loss of resource (e.g. people, buildings, equipment, etc.) and/or increase in demand, or
* Mutual aid required.
* High risk to business continuity, or
* Providing limited nationally and locally agreed services, or
* Significant loss of resource and/or increase in demand, or
* Mutual aid to be prepared.
* Moderate risk to business continuity, or
* Providing most or all nationally and locally agreed services, or
* Significant loss of staffing resource and/or increase in demand but managing to self-cover
* Potentially unable to offer mutual aid

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| *Status* | *Actions* |
| * Low risk to business continuity, or * Providing all nationally and locally agreed services, or * Minimal loss of resource and/or increase in demand, or * Able to offer mutual aid. | * No action required unless support requested. |
|  | * Practices that require support should detail this is the comments section of the submission and/or contact their ICB Place Team direct. * The ICB Place Team will arrange follow-up support calls with the practice and any other relevant partners if required. * ICB Lead will contact the PC Sub Cell/SCC if any support is required or if a pattern or common themes are identified to escalate these to the System. |
|  | * An initial supportive conversation will take place between the ICB Place Team and the practice within 24hrs (weekdays) to understand the issues faced, mitigations put in place by the practice and any support required from the ICB or elsewhere. * Where it is agreed that mitigations need strengthening and further support is required an initial Support Meeting will be convened, attendees may include the Practice, PCN, ICB and LMC to coordinate support, mutual aid and other mitigations. * ICB Place Team will arrange follow-up support calls until the position de-escalates to blue. |
| * Extreme risk to business continuity, or * Unable to provide any nationally and locally agreed services, or * Catastrophic loss of resource (e.g. people, buildings, equipment, etc.) and/or increase in demand, or * Mutual aid required. * High risk to business continuity, or * Providing limited nationally and locally agreed services, or * Significant loss of resource and/or increase in demand, or * Mutual aid to be prepared. * Moderate risk to business continuity, or * Providing most or all nationally and locally agreed services, or * Significant loss of staffing resource and/or increase in demand but managing to self-cover * Potentially unable to offer mutual aid | * Practice will be contacted by the ICB (aiming to be within 1 hr of submission) to understand the issues faced, mitigations put in place by the practice and any support required from the ICB or elsewhere. * A Support Meeting will be convened on the day of the escalation, attendees may include the Practice, PCN, ICB, NHSEI and LMC to coordinate support, mutual aid and other mitigations. * Support calls will continue to be held as required until the practice’s status deescalates. |