

Implementing a Single Point of Access for Adults' Services

Northumberland, Tyne and Wear NHS Foundation Trust has implemented a single point of access (called an Initial Response Service). This was driven by an ambition to improve quality and safety, manage more patients' care in the community and reduce the reliance on inpatient beds.

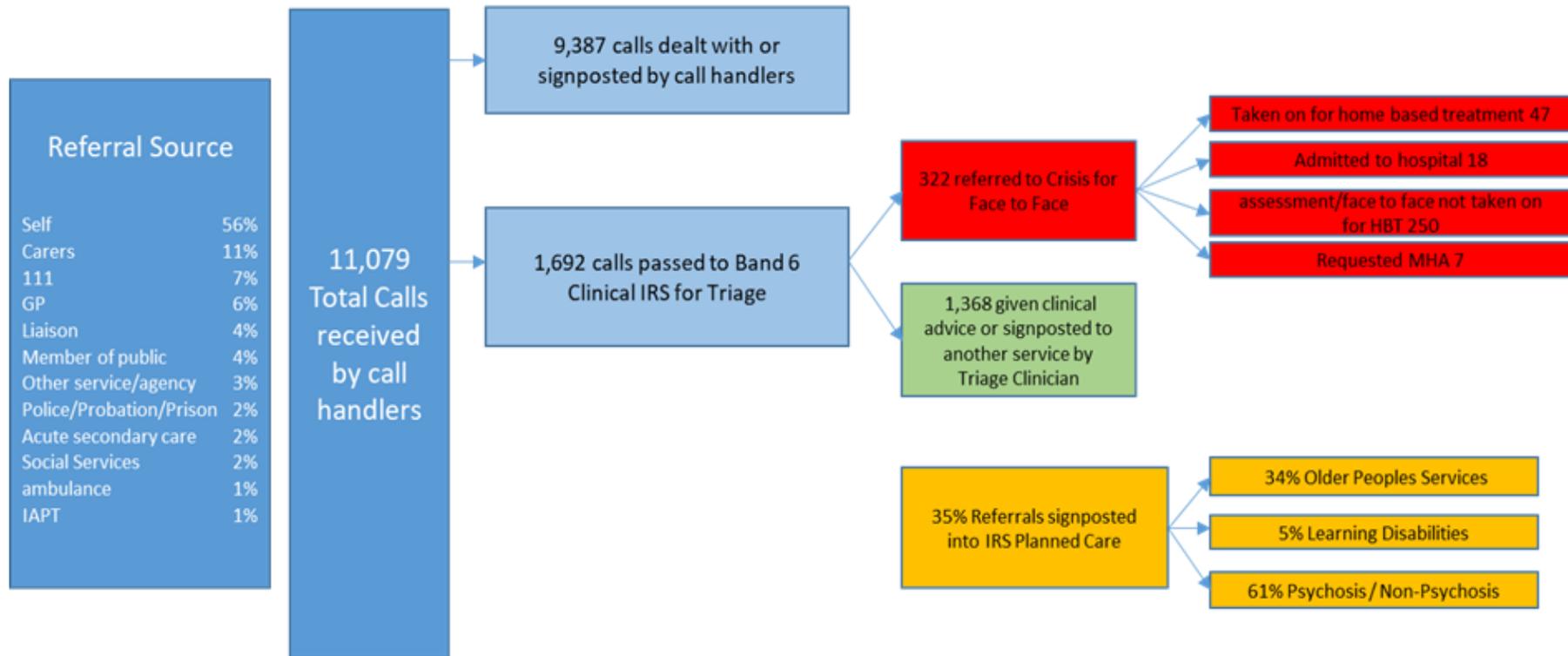
The single point of access now covers all the trust's adult services (except IAPT), including specialist services. It also covers services provided by partners, including crisis, and street triage which include police officers. It receives around 13,000 calls a month. There are improved results for patients as they are put on the right pathway the first time and experience a simpler process. This process has also improved relationships with referrers, improved triage consistency and reduced time managing referrals for the community teams.

The trust implemented this with a number of key principles:

- 1. Approaching the process from the perspective of patients and referrers.** Requests are accepted 24 hours a day from members of the public, partner organisations and direct from NHS 111. These range from urgent requests such as referrals to crisis services, to non-urgent requests such as booking appointments, to clinical queries from patients and carers. The single point of access manages requests with the principle of no 'hand offs' so that patients and referrers experience a supportive, effective and efficient process. The goal is to meet the request as well as possible, and the appropriate care being accessed efficiently.
- 2. Testing in a safe environment.** When implementing the new process, the trust initially re-directed calls to the community teams to the single point of access without changing the contact details that patients and referrers were used to using. The trust fine-tuned how it managed referrals in the single point of access before changing the process from the referrers' perspective.
- 3. Providing support and training for call handlers.** Call handlers undergo 6 weeks of training before handling calls independently. The input of senior nurses and consultant psychiatrists is available at all times. The trust and its partners develop and maintain a directory of services covering all partner organisations.
- 4. Phasing the roll out.** The trust started by developing this for urgent services before expanding to other adult, older people and children's services.



Activity Snapshot (Apr 2018)



- 87% Calls answered within 15 seconds
- 98% within 3 minutes (Average Wait Time = 11 seconds)
- 89% rapid responses achieved within 1 hour