

**Medway Integrated Urgent Care Redesign  
Programme Update  
22<sup>nd</sup> August 2017**

## **Introduction**

The following aims to provide an update on the approach for public engagement for the Medway Integrated Urgent Care Redesign since discussion within the Health and Adult Social Care Overview and Scrutiny Committee in June 2017.

## **Summary of proposals for urgent Care services in Medway**

The delivery of Urgent Care Services nationally is based upon the requirements for developing integrated services, from online support, through to telephone based services (via NHS111) and then to local face to face services. Providing more streamlined, responsive services for patients which aim to support patients with advice and, where required, direction to the most appropriate service for their immediate needs.

The local Integrated Urgent Care Redesign is therefore focussed on the provision of telephony (through NHS111) and face to face services (e.g. GP Out of Hours services). Telephony elements of the programme include the re-procurement of NHS 111 and the creation and procurement of an Integrated Advice and Clinical Assessment Service (ICAS) including GP Speak to services as per the Commissioning Standards Integrated Urgent Care. The face to face element of the programme includes all access to unscheduled urgent care services in Medway including the walk in centre, and out of hours access to primary care.

Work is in progress to support bringing together the existing services – Emergency Department, GP, mental health, minor injury - to provide rapid review and treatment of patients. This concept will form the basis for the ongoing development of the proposed Urgent Care Centre.

The proposed Urgent Care Centre development also needs to be considered in the context of significant planned changes to GP services. By April 2019, CCGs are required to ensure that same day and bookable GP appointments will be available 7 days a week, from 8am to 8pm. Work is in progress to develop plans to deliver this which will include joint working across practices to ensure significantly increased provision of same day GP appointments at Healthy Living Centres across Medway.

Based upon feedback received during the design and engagement process as well as review of best practice, the preferred model for the provision of local face to face urgent care services is an Urgent Care Centre co-located with the Emergency Department at Medway Maritime Hospital. This option will include the relocation of services currently provided by the Walk In Centre at Balmoral Gardens Healthy Living Centre to the Urgent Care Centre.

The proposed UCC will build upon services already available, with the benefit of:

- bringing services together in one location to support patients with multiple needs,
- providing consistent streaming of patients from arrival in the department to the clinician most suitable for their immediate needs
- making better use of clinical staff and resources
- improving health outcomes, and experience, for patients

The UCC will be open 24 hours a day, 7 days a week. It will be GP led and provide a single point of access to urgent and non-urgent care services. It will provide walk in and pre-bookable access to face to face appointments, including home visits, with a variety of clinicians offering self-care advice as well as access to treatments for both minor illness and minor injury. Co-location with the Emergency Department will enable patients presenting with serious or life threatening conditions can be swiftly transferred for immediate emergency care, as well as providing access to diagnostic tests for UCC patients if needed. The UCC will also include mental health and social care professionals to identify and address patients individual needs swiftly, and enable patients to return home as soon as clinically appropriate, with support where required.

An additional out of hours provision will be made available in the locality to accommodate patients needing to be seen outside of GPs normal working hours. This will be accessed via 111 and ICAS and accommodate booked appointments with no walk in facility.

### **NHS England Assurance Process**

As part of the approach to reviewing local commissioning plans, NHS England has implemented a series of assurance processes related to service reconfiguration, for novel or complicated contracts and for the development of Integrated Urgent Care Services.

Medway CCG, in line with arrangements for plans across North and West Kent CCGs, is currently being reviewed against key elements of these assurance processes. This includes ensuring that proposed changes will bring improvement in quality, safety, effectiveness of care and that proposals are clinically sustainable within available resources. This includes meetings the requirements of key tests:

1. strong public and patient engagement
2. consistency with current and prospective need for patient choice
3. clear clinical evidence base
4. alignment with commissioning plans
5. bed closure test

This process is in addition to local governance processes both within and between NHS organisations and system oversight and feedback arrangements.

### **Plans for Public Consultation and Engagement**

Following sharing of the draft consultation document and plans at the meeting on 20th June 2017, Medway CCG has received further guidance and undertaken a review of the consultation and engagement arrangements for the Urgent Care redesign programme. Based on this review we are proposing that we undertake a period of comprehensive engagement with local people, rather than a formal public consultation. The rationale for this is:

1. The proposed changes to local urgent care services sit within the context of a number of developments across healthcare nationally. The most important of these is the development of extended primary care access, 7 days per week from 8am to 8pm. Plans are in development to ensure this access is available, locally to all patients.

The current GP Walk In Centre service provided 7 days per week, from 8am to 8pm at Balmoral Gardens Health Living Centre, which we propose is relocated to Medway Maritime Hospital (around 1 mile away) as part of the Urgent Care Centre, therefore duplicates much of this extended access. GP and other services will continue to be provided from this site.

CCG plans have therefore evolved since early discussions with the Committee and the implementation of extended primary care access should address areas of concern over local service provision.

2. A wider engagement approach will enable discussions on the impact on local urgent care services of extended primary care access, development of the Medway Model and other key plans. These richer discussions will facilitate and support understanding of the issues by local people and provide more detailed, system wide feedback rather than focussing on one key aspect of healthcare provision.
3. Plans for the development of Urgent Care Centres (known as Urgent Treatment Centres in national guidance), as well as the enhancement of NHS111 services are outlined within national requirements. These requirements are based on best clinical practice and feedback from members of the public and patients, as well as clinical teams and urgent care service providers, with the aim of providing improved patient experience and outcomes while making best use of local resources.
4. The proposals address the key areas which patients identified during engagement events in 2014/15 as needing addressing. Namely – the provision of a simpler, more coordinated urgent care system.

5. Feedback from NHS England through the assurance review process for the urgent care redesign programme included reference to the programme not requiring public consultation. In addition, the engagement approach aligns with that agreed for Dartford, Gravesham and Swanley CCG for a similar relocation of the walk in centre currently located in Ebbsfleet. This enables clear and consistent messages for people across North Kent – who may use services in each of the three CCGs - minimising confusion while ensuring clear routes for public feedback.

However, the proposal to move from consultation to engagement will not alter our plans to undertake discussions with local people through a number of routes and we propose to provide the same amount of discussion and information. The activities planned to be included within the public consultation period will continue through the engagement process and are outlined below:

1. A dedicated area on the CCG's website, where all consultation information will be made available (go live 3<sup>rd</sup> August 2017)
2. Creating links to the information on partner organisation's websites
3. A public discussion document which will be available on the website
4. We are undertaking public and clinical surveys as part of the "Nicholson Four Tests", the recent STP guidance and NHSE good practice guidance
5. Two public events held in key localities:
  - a. 9<sup>th</sup> August 2017 - at Priestfield stadium, Gillingham
  - b. 5<sup>th</sup> September - at St Georges Hotel, Chatham
6. These events will be supported by a further engagement session in conjunction with Swale CCG on 30<sup>th</sup> August to seek feedback from swale patients using urgent care services at Medway Maritime Hospital.

The CCG has also been working with the community and voluntary sector through the Involving Medway Partnership to ensure sharing of plans as widely as possible. This includes ensuring access and routes of engagement are identified for hard to reach communities.

Following the engagement period and subsequent development of the Full Business Case, further feedback to Committee will be provided on the feedback received, and how this has supported development of the final clinical model. A full report on the engagement process and outcomes will be published by December 2017 and information from engagement in July is shown below.

In light of the above, the Committee is asked to consider whether formal public consultation is still required or whether strong engagement with the public and partners will provide a reasonable level of input to properly shape the plans.

## Feedback from engagement events held July 2017

A total of 4 groups have taken place, with 47 attendees, who were asked:

1. Thinking about current urgent care services, the following statements represent some of the key feedback we have received from the public and other stakeholders. To what extent do you agree with each of the following?

1. Something needs to be done to reduce pressure and waiting times in A&E		
AGREE	DISAGREE	NOT SURE
46		1

2. The current urgent care services are confusing and it's difficult to know where to go		
AGREE	DISAGREE	NOT SURE
40	5	2
	<i>"not confusing, just doesn't work very well"</i> <i>"experts are available to point in right direction"</i> <i>"hospital well signposted"</i> <i>"good service at Woodchurch House"(session held here)</i>	

3. Urgent care services need to be simpler and more connected		
AGREE	DISAGREE	NOT SURE
45	2	
	<i>"clear, well signposted"</i> <i>"just go to reception"</i>	

4. Urgent care should be available through one point of access 24 hours a day, 7 days a week		
AGREE	DISAGREE	NOT SURE
43	4	
	<i>"not enough space"</i> <i>"unless more resources provided to those triaging, likely there'll be more delays"</i> <i>"will increase waiting time"</i>	

5. People should be seen, diagnosed and treated in one place, as far as possible		
AGREE	DISAGREE	NOT SURE/DON'T KNOW
46		1