

Right Care, Time & Place – The Review of Urgent Care Services in North Tyneside

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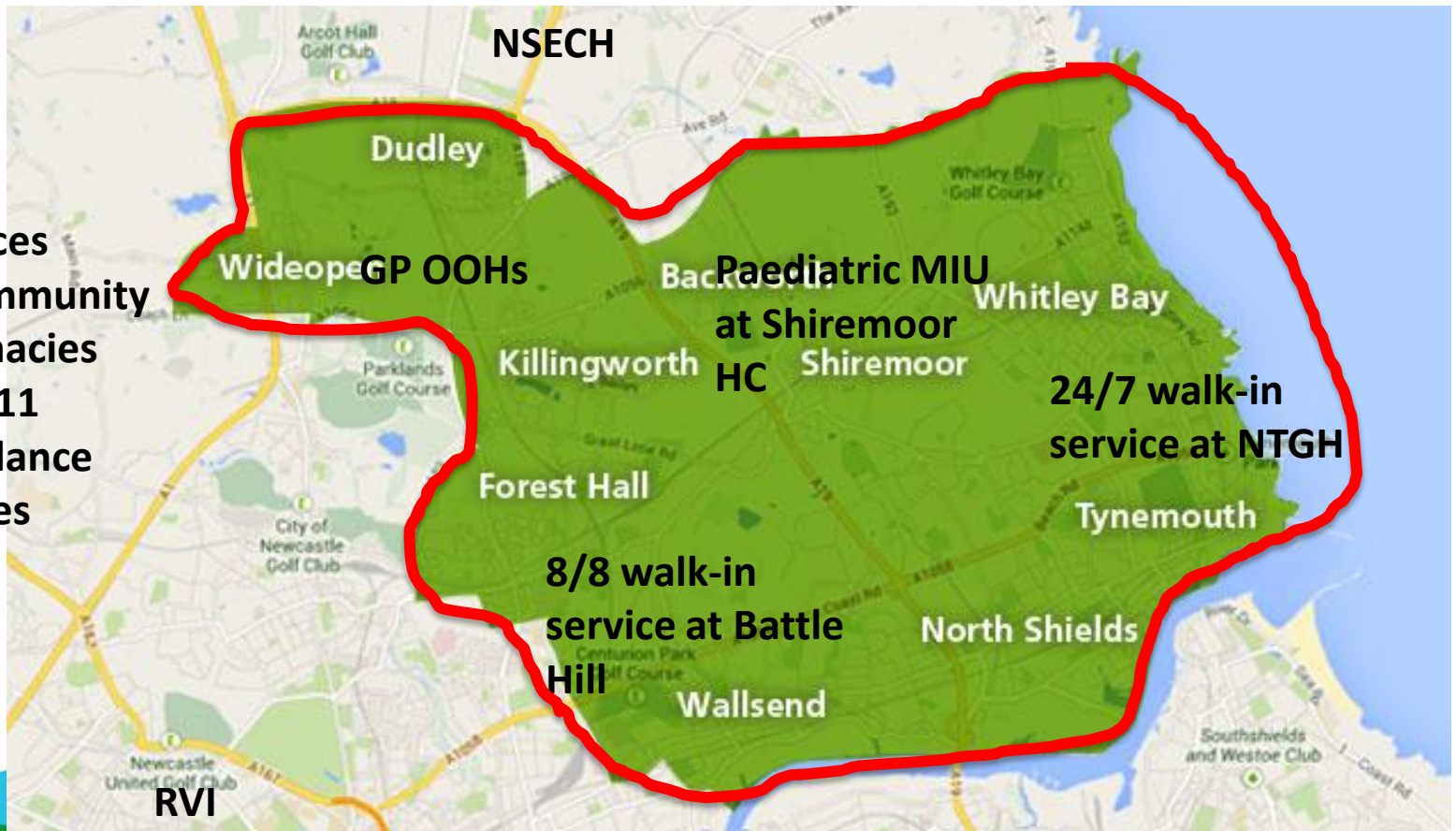
Background – Why are we reviewing urgent care?

- The current system is inefficient and confusing for patients
- All NHS commissioners are required to commission simpler, more integrated urgent care services
- The CCG has to reduce the cost of urgent care



Background – The current landscape of urgent care provision

- 29 GP practices
- 53 community pharmacies
- NHS 111
- Ambulance services



Preparing for the consultation

Date	Activity
January 2015	Clinical workshops to develop new models of care
February – July 2015	Early engagement with the public and stakeholders
August 2015	Stakeholder event to further refine consultation scenarios
September 2015	Desktop review to finalise consultation proposals
October 2015	Consultation begins
January 2016	Consultation ends



Consultation proposals

- The CCG will commission a new urgent cares service which will commence from 1st October 2017
- The CCG will decommission all of the existing urgent care services which fall within the scope of the review from 30th September 2017
- These services will be replaced by a single urgent care service offering integrated access to in-hours and out-of-hours urgent care
- The CCG has developed the following future scenarios in conjunction with the public and its stakeholders



Consultation proposals

1. A single North Tyneside Urgent Care Centre based at North Tyneside General Hospital
2. A single North Tyneside Urgent Care Centre based at Battle Hill
3. A single North Tyneside Urgent Care Centre based at North Tyneside General Hospital supported by locality based minor ailments services in three other areas
4. A single North Tyneside Urgent Care Centre based at Battle Hill supported by locality based minor ailments services in three other areas



Findings of the public consultation

- The public wanted a simpler urgent care system with fewer access points which was more directive in nature
- Location was perceived to be the most important issue and preference was often determined by proximity to one of the proposed sites
- The perceived accessibility of the site was also an important factor in determining preference



Findings of the public consultation

Scenario	Most preferred scenario
A single North Tyneside Urgent Care Centre based at North Tyneside General Hospital	47%
A single North Tyneside Urgent Care Centre based at Battle Hill	12%
A single North Tyneside Urgent Care Centre based at North Tyneside General Hospital supported by locality based minor ailments services in three other areas	20%
A single North Tyneside Urgent Care Centre based at Battle Hill supported by locality based minor ailments services in three other areas	9%
No answer	11%



The public consultation

- Consultations are not plebiscites and the outcome has to be considered in conjunction with other evidence before a decision is made
- The consultation process has been audited by The Consultation Institute and found to be consistent with recognised standards of best practice



The new clinical model of urgent care



A Single Integrated Urgent Care Centre

- Open on 24/7 (although opening times may be subject to further review)
- GP-led service providing care for minor injuries and minor ailments
- Triage on arrival will result in streaming to service or referral to primary care
- Bookable appointments via NHS 111
- Access to appropriate diagnostics (x-ray, bloods, urine etc)



How will the service fit into the wider healthcare system

- Seriously ill patients will be transferred to A&E
- The service will provider urgent care for children but emergencies will be transferred to A&E
- Patients with specialist / acute mental health needs will be transferred to specialist mental health teams
- The service will offer patient with minor ailments the alternative of a same-day appointment with a GP / pharmacy



Location of the new service



- 70% of the people who responded to the consultation opted for a service based at NTGH
- However the CCG must follow procurement regulations which stipulate that suitable providers should not be excluded from bidding to deliver the service
- Failure to adhere to these rules could result in the decision being overturned



- Northumbria Healthcare declined to allow the CCG to run a competitive procurement for a service based at NTGH
- The CCG will therefore have to allow other providers to suggest alternative sites that they have access to
- The location of site will depend on which provider wins the contract



Activity and financial analysis



Activity assumptions

- Bringing all the urgent care services together in one site will reduce the total number of urgent care attendances by around 20%
- The new service will see between 51,000 – 58,000 attendances per year
- Some activity may need to be absorbed back into primary care
- Depending on the location of the service, there may be a small increase in the number of North Tyneside patients accessing A&E service and / or urgent care services in Newcastle



Financial assumptions

- The CCG has set the affordability envelope for the new service at £3.3m
- This secures a minimum financial saving of £0.2m on the forecast financial position at the start of 2017/18
- The service will be commissioned on a block contract
- 2 ½ year contract



How does this fit in with the North Tyneside Primary Care Strategy?

Tripartite strategy with four key themes:

1. Redesigning access to primary care
2. Extending the primary care team
3. Integrating specialist support
4. Prevention and self-management



Summary

The CCG will:

- Commission a single integrated urgent care centre providing in-hours and out-of-hours care for patients with minor injuries and minor ailments from 1 October 2017.
- Decommission the existing urgent care services at NTGH, Battle Hill, Shiremoor Health Centre and the GP OOH service from 30 September 2017.
- Commission the new service on a block contract at a maximum cost of £3.3m.
- Undertake a competitive procurement process.



Next steps

Date	Action
Oct – Dec 2016	Service specification and procurement strategy developed and approved
Jan – Feb 2017	Tendering period
March 2017	Evaluation of tender documentation and recommendation made to CCG Governing Body
April 2017	Contract awarded
April – Oct 2017	Service mobilisation period
1 st Oct 2017	Service commences

