

# North Tyneside Health & Wellbeing Board Report Date: 17 November 2016

## ITEM 9

**Title: Right Care, Time & Place – A Review of Urgent Care Services in North Tyneside and Primary Care Strategy**

**Report from :** North Tyneside Clinical Commissioning Group

**Report Author:** Mathew Crowther, Commissioning Manager (Tel: 0191 293 1161 )

### 1. Purpose:

The report provides a summary of North Tyneside Clinical Commissioning Group's Right Care, Time & Place – Urgent Care Review and Primary Care Strategy documents. It also explains the possible linkages between the two separate initiatives set out in these documents.

### 2. Recommendation(s):

The Board is recommended to note the contents of both reports, particularly the recommendations in the Urgent Care Review which were approved by the CCG Governing Body on 25 October 2016.

### 3. Policy Framework

This item relates to objectives 1, 4 and 6 of the Joint Health and Wellbeing Strategy 2013-18.

### 4. Information:

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

North Tyneside CCG made a commitment to review urgent and emergency care as part of a five year commissioning strategy for urgent and emergency care which was published in December 2014. Early engagement with the public and stakeholder organisations which took place in the first six months of 2015 demonstrated that:

- The current urgent care system is perceived by the public as being confusing and difficult to access. The complexity of the system has been increased by the opening of NSECH (Northumbria Specialist Emergency Care Hospital) and the perceived requirement for members of the public to understand the distinctions between an 'urgent' as opposed to an 'emergency' care need.
- The urgent care system within North Tyneside is inefficient and consists of multiple services offering overlapping access to treatment for minor injuries and minor ailments at various times throughout the day.
- The current system is financially unsustainable for the CCG.

The CCG therefore embarked on a formal public consultation which was based around the consideration of four future scenarios for the delivery of urgent care in North Tyneside:

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

The consultation concluded in January 2016. In summary, the main points raised by the public were:

- Accessibility and location were perceived as being the single most important issues to most respondents, with people's preference for location generally being determined by its proximity to their place of residence and / or perceived ease of access via public transport and / or car.
- The concept of a locality based service offering treatment for minor illnesses was seen as being overly complex and confusing. Respondents generally favoured a system with fewer access points that were easy to identify and use.
- The public did not readily understand the differences between an urgent and emergency care need and favoured a more directive system which did not require them to understand the nuances between different acuity levels of care.
- Respondents queried whether scenarios 1 and 2 would do anything to increase the accessibility of a North Tyneside-based service to residents living in the north-west locality, thereby reducing their use of Newcastle-based services.

The public was asked to express a preference for each of the four scenarios. The responses received were as follows:

<b>Scenario</b>	<b>Most preferred scenario</b>
1. A single North Tyneside Urgent Care Centre based at North Tyneside General Hospital	47%
2. A single North Tyneside Urgent Care Centre based at Battle Hill	12%
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	20%
4. A single North Tyneside Urgent Care Centre based at Battle Hill supported by locality based minor ailments services in three other areas	9%
5. No answer	11%

On this basis the CCG developed a clinical model which was based on the concept of a single Urgent Care Centre offering integrated access to urgent care around the clock.

The key features of this model are:

- One site offering 24/7 access to urgent care treatment for the resident of North Tyneside.
- The service will operate on an in-hours basis between 08.00 – 24.00 and out-of-hours basis between 24.00 – 08.00.
- The service will be GP-led during the in-hours period and will provide x-rays and other appropriate diagnostics.
- All patients walking into the service will be triaged on arrival and where appropriate offered a same-day appointment with primary care.
- NHS 111 will be able to offer patients a booked appointment with the service at a specific time, thus eliminating the need to present and wait to be seen.

The CCG has to run a competitive tender that allows any suitable provider to bid to provide this service. Failure to abide by public sector procurement regulations could result in referral to judicial review and a contract award being overturned at significant cost to the CCG. The only way to reconcile the requirement for a competitive tender with a pre-determined choice of site is for the owner of the premises to give their permission for other providers to bid to provide services from their estates. As North Tyneside General Hospital was identified as the public's preferred choice of site for the new Urgent Care Centre, the CCG initially approached Northumbria Healthcare to ask whether they would be willing to allow the competitive procurement of a service based on those premises. Northumbria declined to do this and consequently the CCG will have to allow providers to nominate suitable alternative sites which the service could be provided from.

The CCG Governing Body approved the following recommendations on 25 October 2016:

- Commission a single integrate Urgent Care Centre for North Tyneside from 1<sup>st</sup> October 2017
- Decommission the existing urgent care services at North Tyneside General Hospital, Battle Hill Health Centre, Shiremoor Health Centre and the GP Out of Hours service.
- The new service will be commissioned on a block contract arrangement for 3 years at a maximum cost of £3.3m
- The service will be procured via a competitive tendering process

## **4.2 North Tyneside Primary Care Strategy**

The CCG has developed a tripartite strategy for primary care in conjunction with Newcastle LMC and the members of the Tyne Health GP Federation. This strategy consists of four major workstreams:

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

The Redesigning access to primary care workstream includes proposals for the CCG to begin commissioning extended access to primary care services at evenings and weekends. At this stage the strategy document constitutes a high-level vision for what urgent primary care services in North Tyneside could look like in future. The exact form and function of these services is still being discussed with practices in North Tyneside and an action plan would have to be developed before any changes were implemented.

It should also be noted that any action plans which are developed from the Primary Care Strategy document will have to be informed by the Tyne & Wear Sustainability & Transformation Plan (STP) which is also currently under development.

Whatever the outcome of these discussions, any changes to the delivery of urgent primary care services will have to be coordinated with the recommendations set out in the Right Care, Time & Place business case. In principle the two initiatives are complementary and any moves to increase access to urgent primary care appointments for patients with minor ailments would help reduce pressure on both the Urgent Care Centre and A&E services in Newcastle and Northumberland. The integration of the new Urgent Care Centre with primary care services, through the electronic triage and streaming system that the CCG plans to introduce, will also provide a more seamless integration between urgent and primary care services in future.

**5. Decision options:**

The Board is asked to note the content of the report and the accompanying papers.

**6. Appendices:**

Appendix A - North Tyneside Primary Care Strategy

**7. Contact officers:**

Mathew Crowther, Commissioning Manager,  
mathew.crowther@northtynesideccg.nhs.uk, (regarding Urgent Care)  
James Martin, Commissioning & Performance Manager, jamesmartin2@nhs.net,  
(regarding Primary Care)

**8. Background information:**

The following background documents have been used in the compilation of this report and are available from the author:-

Right Care, Time & Place – Case for Change and Consultation Findings

## **COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

**9. Financial Implications**

The new service will be commissioned on a block contract arrangement for 3 years at a maximum cost of £3.3m.

**10. Legal Implications**

There are no direct legal implication for the Board arising from this report.

## 11. Consultation/community engagement

The CCG undertook a formal consultation on the future of urgent care services. The consultation took place between October 2015 and January 2016. An independent review of the findings was published in January 2016, the findings of which are outlined above. The Consultation Institute has also provided an independent assessment of the process which the CCG has followed in engaging with the public and using public opinion to inform the decision-making process. It has indicated that the actions taken thus far are consistent with recognised standards of best practice.

## 12. Equalities and diversity

A full equalities impact assessment has been undertaken and published on the CCG's website

## 13. Risk management

A project risk register has been created and a risk analysis has also been undertaken. NHS England has also asked the CCG to undertake a further risk assessment of the potential impact of the proposed changes on the wider health and social care system.

### SIGN OFF

Director of Public Health

X

Chair/Deputy Chair of the Board

X

Chief Finance Officer

X

Head of Law & Governance

X