Urgent Treatment Centres Engagement: Next Steps

Friday 27 September 2019
10am – 12pm
Leeds City Museum

#UrgentCareLeeds
Housekeeping

- Agenda
- Questions
- Toilets
- Break
- Fire alarms
- Photos / consent
- Social media #UrgentCareLeeds @nhsleeds
- Evaluation

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Welcome…

Debra Taylor-Tate
Senior Commissioning Manager, Urgent Care
NHS Leeds CCG

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Welcome and thank you for coming

Hello my name is…
What we’ll cover (our objectives)

1. Background
2. Our engagement – what we did
3. Our engagement – what people said
4. Our engagement – recommendations
5. Q&As
6. Next Steps
7. Table work
8. Q&As
Background

Kate Parker
Senior Commissioning Manager, Urgent Care
NHS Leeds CCG

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Who we are

• We plan and pay for the majority of healthcare services in Leeds
• We are clinically led and locally focussed implementing national guidance as well as developing tailored services to meet local needs
• Legal duty to engage with the public affected when we make changes to services including equality impact assessment
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Here’s a quick summary…

We are proposing changes to urgent care services in Leeds and need your views.

leedsccg.nhs.uk/UTCSurvey

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What is urgent care?
Urgent care is when somebody needs treatment on the same day but their illness or injury is not life threatening or doesn’t put their long-term health at risk. This covers a wide range of situations, such as cuts, bites, sprains and strains, fevers, and vomiting.

What is emergency care?
Emergency care is needed in a medical emergency when life or long-term health is at risk. Examples are serious injuries, severe infections, blood loss, chest pains, choking or passing out.
### What’s wrong with the current system?

It can be confusing. You could use:

<table>
<thead>
<tr>
<th>Service</th>
<th>Equivalent Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self care</td>
<td>Your GP practice</td>
</tr>
<tr>
<td>NHS 111</td>
<td>GP out-of-hours</td>
</tr>
<tr>
<td>Pharmacies</td>
<td>Walk-in centre</td>
</tr>
<tr>
<td>Minor injury unit</td>
<td>St George’s urgent treatment centre</td>
</tr>
<tr>
<td>999</td>
<td>A&amp;E</td>
</tr>
</tbody>
</table>
Our challenges

• Need for healthcare services continues to rise
• Staff recruitment and shortages
• People find current urgent care system confusing
• Meeting the four hour A&E target
What was the engagement about?

Our plans for five urgent treatment centres

- Two co-located within A&E, open 24 hours a day
- Three in the community, open 8am – 11pm:
  - Wharfdale Hospital in Otley
  - St George’s Centre in Middleton (already open)
  - Seacroft (probably, based on projected housing growth)
- We wanted feedback from the public on these plans, including how it will affect their access, and on the location and opening hours
Where will the urgent treatment centres be based?

1. At St George’s Centre in Middleton where there is already an urgent treatment centre. This will be a ‘community-based’ centre.

2. At Wharfedale Hospital in Otley, where there is already a minor injuries service. This will be a ‘community-based’ centre.

3. At Leeds General Infirmary (LGI) as a ‘co-located’ centre with the A&E department.

4. At St James Hospital.
   The centres at LGI and St James are called ‘co-located’ centres, because they are in the same place as the A&E service.

5. We are proposing that the fifth centre will be set up in east Leeds, likely to be in Seacroft.
   We have not decided where in Seacroft it will be, but we know that this will be a community-based urgent treatment centre.
Our engagement

Adam Stewart
Engagement Officer
NHS Leeds CCG

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What did we do?

21st January- 15th April

• Developed an ‘engagement document to explain the proposals
• Ran events and drop-in sessions to share views on the proposal
• Ran a survey (online, paper and easy read formats)
• Videos produced to help explain the engagement – including a video of one of the engagement events
• Raised awareness of the proposal and consultation on social media, through local organisations and via GP practices
• Partnered with Voluntary Action Leeds and other organisations in the city to enhance reach and engagement within seldom communities; facilitate focus groups and conduct interviews with people who face additional challenges to accessing services and barriers to engagement.
Supporting the engagement

Karl Witty
Engagement Development Co-ordinator
Voluntary Action Leeds

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What did Voluntary Action Leeds (VAL) do?

55 engagement activities
- Work with engaging voices partners
- Focus groups
- Work with working voices partners
- Social media campaign
- On-street data collection
- Drop-in sessions at community venues

- 1,419 individual survey responses
- 88 people took part in focus group discussions
What did people tell us?

Adam Stewart
Engagement Officer
NHS Leeds CCG

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Who responded to the engagement?

- **3227** people completed the survey
- **173** people took part in focus groups or interviews
- **73** comments on social media posts
- We commissioned Brainbox Research to analyse the responses
What did we ask people?

• How people currently access healthcare services in an urgent care situation and how confident they feel about making the most appropriate choice
• People’s thoughts about how the proposed changes will affect access to urgent care services in the future
• People’s views on proposed locations and opening hours
• Any additional suggestions for improving access
How do people currently access services in an urgent care situation?

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What people thought of our proposals?

Easier
- I will know where to go
- It provides greater choice & capacity
- It’s an alternative to my GP
- It’s convenient

Might be easier
- It depends on accessibility
- It depends on the facilities
- It depends on communication

Might not be easier
- It’s already easy
- They’re not accessible
- I’m not going to change
- Adding another option is confusing
- There are wider problems

“These centres will be the perfect bridge between GP & A&E.

If there’s a simple and clear message about where they are, when they’re open and what they’re for, then it could make it easier for me to access urgent care. Maybe the message should be: “for urgent care just start with 111” because then I don’t have to remember anything else.

Cannot see how additional choices make it any easier than it is now. I do not want any more.
Opening hours

- The majority of people who filled in the survey (77%) believed the 8am-11pm opening hours for the community-based centres is correct.
- Others wanted earlier opening so that you could go before work or school drop-off.
- Some wanted later as children are often ill in the night.
Location

• The majority of people (72%) believed the Seacroft location is correct
• Those who didn’t mainly wanted it to be located near to where they live
• However, west Leeds, Wetherby and north Leeds were identified more often as possible locations
Suggestions for improving access

• Provide sufficient parking
• Ensure good public transport
• Consider the needs of a range of patients (e.g., sensory impairments)
• Provide transport (especially at night)
• Ensure staff reflect the diversity of the community
• Ensure staff are trained in communicating with diverse people, including those with special needs (autism, deaf, mental health problems)
• Have an on-site pharmacy
• Provide good IT systems
• Tell people about the centres and what they can be used for
Overall impact on accessing urgent care

- Most people (63%) said it would improve access.
- Only 5% said it would not.

I would feel more confident that I was not making a visit to a health service unnecessarily and wasting both their time and mine.

You would know exactly where to go.

The very fact of being able to access care in a more direct way, would give a feeling of security, when you are at your most vulnerable.
Equality impact

Do people with protected characteristics believe that the proposed changes will impact on their access any differently to others?

- Age: none
- Disability: positive
- Ethnicity and race: positive
- Gender reassignment: none
- Marriage and civil partnership: none
- Maternity and pregnancy: none
- Religion or belief: none
- Sexual orientation: none
- Carer: none
- Parents of children under five: positive
Conclusions and Recommendations

Kate Parker
Senior Commissioning Manager, Urgent Care
NHS Leeds CCG

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Conclusions

• People support the proposals as it will improve access by increasing capacity, clarifying where to go, and providing a realistic alternative to their GP practice.

• People struggle to understand the term urgent care and need guidance about which service to use.

• The urgent treatment centres should be presented as an alternative to existing services, not as an additional option.

People feel it will improve accessing urgent care, making it much easier for people to know where to go and improve waiting times.
Considerations

• Can the community centre open earlier than 8am?
  • We will continue to review how services are accessed and when. We'll work with partners across the city to determine to assess demand.

• Is there sufficient access for people living in Wetherby and west Leeds?
  • We acknowledge the coverage of the five proposed UTCs aren’t ideal but we are constrained by a number of factors. We are open to exploring ‘mini’ UTCs in areas of the city where there perhaps the best coverage or is difficult to access.

• Is the range of facilities sufficient to provide a credible alternative to A&E?
  • Yes. Though important to note that UTC’s are not ‘alternatives’ to A&E, they will provide urgent primary care, aiming to reduce the number of presentations at A&E.
Considerations

• Can we create a decision aid?
  • The Communications teams across the city are working on a standardised suite of posters, leaflets, video clips etc. to help the public (and professionals) make the right decisions about where to go when experiencing an urgent primary care need. Though we would like your help with that later today.

• Is there good public transport and parking? How can we help people with mobility problems to get there?
  • The locations were in part selected due to being close to relatively good public transport links. Car parking is available at/close by to the sites, and unfortunately car parking (including the cost of car parking) is not anything the CCG or health services is responsible for, however we will continue to try and influence this agenda.
Considerations

• Can we design the centres so they are easy for people with disabilities to use?
  • The findings from the engagement told us the difficulty people have in accessing services in general. We have working groups per UTC site considering how to make the UTC’s as accessible as possible.

• Are staff sufficiently trained to communicate with diverse people and those with special needs?
  • The organisations who deliver the UTC services will be expected to be able to communicate with all those who attend, using the support services available when required (such as translators/interpreters etc.).
What we are already doing…

- Extended opening hours at GP practices – evening and weekend appointments with a nurse or GP
- Ran an urgent treatment centre pilot last year resulting in our first urgent treatment centre opening at St George’s Centre in Middleton
- NHS 111 has been reviewed and will have additional clinical support
It’s Coffee Time…
Questions and Answers

Vicky Annakin
Contracts & Commissioning Manager – Primary Care

Kate Parker
Senior Commissioning Manager, Urgent Care
NHS Leeds CCG

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Table work – Addressing our Priorities

Adam Stewart
Engagement Officer
NHS Leeds CCG
Table Work

On your table are three flipcharts sheets looking at three of the key themes from the report. We want you to help us think about how we can involve patients and the public in getting these bits right.

1. **Communication and Awareness** – how can we ensure people know about Urgent Treatment Centres, what they are for and how to access them as well as other services to reduce demand on A&E?

2. **Accessibility** – how can we help make our services more accessible to support everyone in Leeds especially those who may have additional needs?

3. **Keeping people involved** – how can we continue to involve people in Leeds in developing our Urgent Treatment Centres and ensure they meet your needs once they’re running?
Next Steps for UTCs in Leeds
Questions and Answers

Vicky Annakin
Contracts & Commissioning Manager – Primary Care

Kate Parker
Senior Commissioning Manager, Urgent Care
NHS Leeds CCG

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Questions and answers

You can also contact us after today by:

- Calling us on: 0113 843 5470
- Emailing us: leedscrg.comms@nhs.net
- Twitter: @nhsleeds
- Facebook: nhsleeds
Evaluations

Please take five minutes to complete the evaluation, it helps us make sure future events are even better!
Stay in touch

Join our CCG Network to stay up to date with opportunities to get involved and find out about changes to healthcare in Leeds.

Fill in one of the blue ‘Get Involved’ forms before you go.