North Yorkshire County Council

Scrutiny of Health Committee

17 January 2014

"Right Care First Time" - Improving Urgent Care Services in Scarborough and Ryedale

Purpose of Report

 The purpose of this report is to bring Members' attention the formal consultation being led by the Scarborough and Ryedale Clinical Commissioning Group (SR CCG) on proposals for improving urgent care services in Scarborough and Ryedale.

Introduction

- 2. 'Urgent care' is for a sudden illness or injury that needs treating fast, but is not considered to be a 999 emergency. No appointment is needed to access an urgent care service. Urgent care services should not be used to treat minor symptoms that could wait to be treated by your own GP, pharmacist or even yourself using over the counter medicines.
- 3. The current urgent care services in Scarborough and Ryedale that are included in this review include:
 - GP out-of-hours service
 - Walk-in service at Castle Health Centre
 - Malton Minor Injuries Unit (MIU)
- 4. Initial work carried out by the CCG indicates that local people feel the existing arrangements can be confusing in terms of what is available and what will best suit their needs. This can result in poor experiences and delays for patients before they finally receive the care they need. It can also lead to emergency services being used unnecessarily and delays for patients needing that level of care and is also a poor use of money in terms of highly qualified clinicians treating patients with minor symptoms and ailments.
- 5. The CCG wants to improve the way that urgent care services are provided by creating a new, integrated urgent care service.
- 6. A series of public events for the public to find out more and have a say on the proposals are being held:

Date	Time	Location
Thursday, 20 February 2014	7pm	The Street 12 Lower Clark St Scarborough

		YO12 7PW For Sat Navs use YO12 7PP
Wednesday, 26 February 2014	7pm	Ryedale District Council Ryedale House Malton North Yorkshire YO17 7HH
Wednesday, 5 March 2014	2pm	Eastfield Community Centre Eastfield High Street Scarborough, North Yorkshire, YO11 3LJ
Thursday, 13 March 2014	7pm	The Evron Centre John Street Filey YO14 9DQ

- 7. A copy of the consultation document is attached as APPENDIX 1.
- 8. Simon Cox representing the SRCCG will be attending the meeting to provide more information.

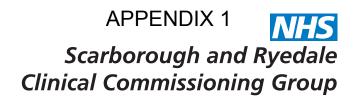
Recommendations

- 9. That Members note the proposals being brought forward by improving urgent care services in Scarborough and Ryedale area and offer comment on those proposals.
- 10. Members are invited to note the dates of the public consultation meetings with a view to attending one or more of them.
- 11. On an individual basis Members are invited to then complete the online survey.
- 12. That Members note the Committee will consider the outcome of the consultation and be given an opportunity to influence the final specification to be presented to the Board of the CCG planned for May 2014.

Bryon Hunter Scrutiny Team Leader County Hall, NORTHALLERTON

06 January 2014

Background Documents: None





Improving Urgent Care Services in Scarborough and Ryedale

www.scarboroughryedaleccg.nhs.uk #rightcarefirsttime

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1.0 Welcome

Whether it's for ourselves, a friend or a relative, it's likely that we will all need to access care and treatment for urgent health needs at some point in our lives. That's why it's really important that we have a clear, simple process in place so people know where to go for treatment and, ideally, that they receive the right care, first time.

Having already spoken with local people about their experiences of some urgent care services in the area, we know that it can be confusing for patients to know what health services are available and which one is most appropriate for their needs. This can not only result in poor experiences for patients in terms of having to access multiple services before finally getting the care they need, but can also lead to people using emergency services unnecessarily. The knock-on effect of this is significant and can lead to real problems for emergency services having to deal with excessive numbers of patients. This not only creates long waiting times for patients but is also a poor use of money for the NHS in terms of using highly qualified clinicians to treat patients with minor symptoms and ailments.

As the local leader of the NHS, we have a responsibility to make sure patients have access to the most appropriate services for their needs. We believe the only way we can do this is to have open and honest conversations with local communities about the issues we face and work together to identify opportunities for improvement. This is why on 6 January 2014, our Clinical Commissioning Group (CCG) is launching a 12week period to give members of the public the opportunity to hear about and provide views on a potential way to tackle these issues. As we are only at the beginning of the process to improve urgent care services, none of our proposals are set in stone. We want to use your feedback and ideas to further develop our proposal so that the end result is an urgent care service that meets the needs of local communities.

We have produced this document to tell you more about the issues we are facing, how we plan to resolve them and how we have developed our ideas. As you will see there are a number of ways for you to hear about and have your say on our plans. Most importantly, please make sure you complete and return the survey included in this document.

Thanks for your time,



Dr Omnia Hefni Urgent Care Lead



Dr Peter Billingsley Urgent Care Lead

About our CCG

NHS Scarborough and Ryedale Clinical Commissioning Group (CCG) is responsible for identifying and buying (commissioning) the majority of health services in the area. We do this on behalf of around 117,000 patients registered with 17 GP Practices in the area. The services we commission include:

- Planned hospital care
- Urgent and emergency care
- Rehabilitation care
- Community health services
- Mental health and learning disability services

We have an annual commissioning budget of around £145 million which is allocated by the Government.

At the heart of our organisation is our Governing Body which comprises a number of local GPs and other healthcare professionals. The role of the Governing Body is to make decisions about the best way to spend our budget and ensure that local health services meet the needs of local communities.

To help ensure our Governing Body has the information it needs to make the right decision, we often ask for views of patients and the general public about specific issues. These views are obtained in a number of different ways such as through surveys, focus groups and meetings.

2.0 About urgent care

Urgent care is for a sudden illness or injury that needs treating fast, but is not considered to be a 999 emergency. You do not need an appointment to access an urgent care service.

It is important to point out that urgent care services should not be used to treat minor symptoms that could wait to be treated by your own GP, pharmacist or even yourself using over the counter medicines.

Some examples of urgent care

The following scenarios would all require 'urgent care'. There is no need for any of them to dial 999 or go to A&E.

James is 14 years old and is a keen footballer. He lives with mum in Malton and plays in goal for his local team every Sunday morning. During the game last week, James fell awkwardly onto his left side. The game came to a halt and the coach was worried that James had broken his wrist. James needed to get his wrist examined urgently.

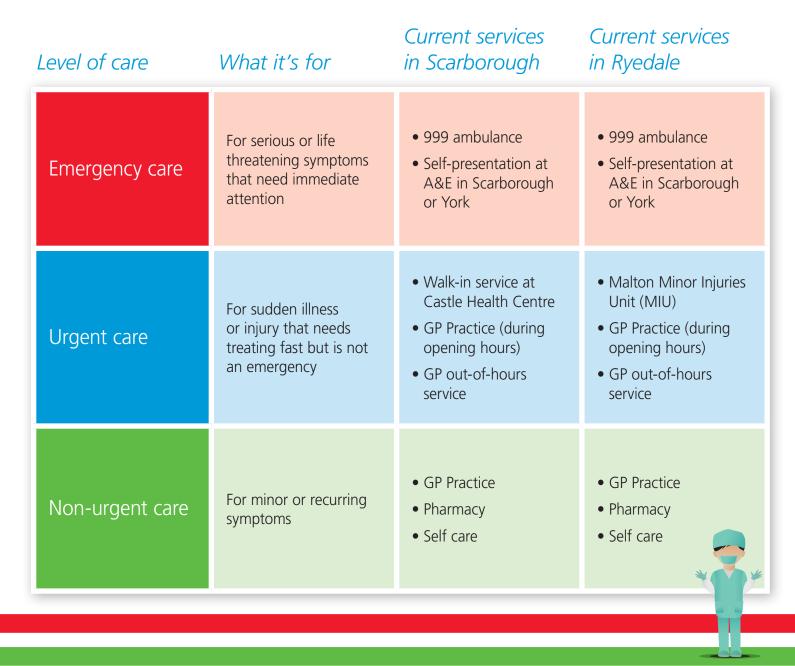
Alex is 31 and has a pet cat called Sammy. One night Sammy ran outside and hid in a bush. When Alex tried to get him out, the cat was startled and bit Alex's hand. It swelled immediately and Alex was worried it may be infected.

Nicole is 85. She was cooking tea one night when she accidentally spilt boiling water on her arm. Despite trying to cool it down under the cold tap, the pain was unbearable. She couldn't wait to be seen the following day.

Hayley is 7. She was sent home from school with a fever. Her mum put her to bed but her temperature got worse as the night went on. Her mum was really worried and didn't feel comfortable waiting until the next day to make an appointment with her GP.

2.1 The difference between emergency, urgent and non-urgent care

The following table shows the three main types of care that you can access and what services are currently available in Scarborough and Ryedale:





2.2 Urgent care services currently provided in Scarborough and Ryedale

In terms of urgent care services, the following services are available in Scarborough and Ryedale.

Walk-in service at Castle Health Centre (York Place, Scarborough)

This service is open 8am to 8pm, seven days a week and 9am to 5pm on bank holidays. Patients can be seen by an experienced nurse or doctor without an appointment. The service offers advice, assessment and treatment for minor ailments and injuries.



Malton Minor Injury Unit (MIU)

This service is based in Malton Community Hospital and is open 9am to 5pm seven days a week. Patients are seen by an experienced nurse who can provide assessment, advice and treatment for minor injuries such as cuts, sprains, minor burns and fractures.





NHS 111

If it is not an immediate emergency and you are unsure about action to take, patients can dial '111' to access a new service called NHS 111.

The service is available 24 hours a day, seven days a week, and can provide assessment and medical advice. The service directs patients to the most appropriate local service for further advice and/or treatment if required.





GP (in and out of hours)

Patients can contact their own GP for illnesses that are non-life threatening. In Scarborough and Ryedale the normal practice opening hours are 8am to 6:30pm (although this does vary between different GP Practices).

If a patient contacts their GP outside of the normal opening hours they will be re-directed to NHS 111. A GP is always available in the out-of-hours period, which is 6:30pm to 8am on weekdays and 24 hours a day on weekends and bank holidays.

If the patient needs to see a GP they will be transferred to the local GP out-of-hours provider, which is currently an organisation called Primecare.





2.3 Who uses urgent care services?

In reality, it's likely that we will all need to access urgent care services at some point in our lives – whether for personal reasons or for a family member or friend.

However, by looking at data for who has accessed urgent care services in the past, we have been able to identify specific groups of people who may be likely to access urgent care services more than others.

These include:

- Parents and carers of children under the age of four
- Young adults aged 18 to 24
- People aged 80 and over

We also know that:

- Urgent care services tend to be accessed more at weekends
- There is a peak in use during December
- People that have moved to the area from other countries are more likely to directly access A&E in times of need rather than seeking treatment from alternative services.

2.4 What does 'good' urgent care look like?

Our aspiration is to commission an urgent care service that meets all of the elements detailed here

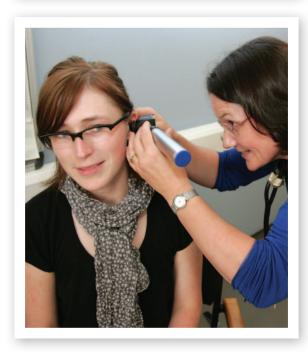


Designed with the needs of patients at the heart

That patients receive accurate diagnosis and treatment A good patient experience, including ease of access and convenience Timely, with care being provided as quickly as possible

Care that is provided right the first time and does not involve the patient having to access multiple services before receiving the treatment they need Available 24/7 to the same high standard





3.0 Why do we need to change?

There a number of reasons why it is important for us to review current urgent care services. Some of these are based on national evidence provided by organisations such as the Department of Health and the Royal Colleges, but others are based on what we know at a local level as health professionals working closely with patients in Scarborough and Ryedale.

At a national level there is a desire for the NHS to:

- Develop a more integrated urgent care system that ensures patients are treated in the most appropriate setting for their needs
- Simplify the structure of urgent care services to reduce confusion amongst patients and ensure they access the right service, first time
- Reduce pressure on accident and emergency departments by treating patients with minor symptoms either in primary care or in the community

Locally, there are a number of reasons why we need to change which are detailed opposite.

3.1 Issues with the quality of care

Whilst the standard of urgent and emergency care is generally good in Scarborough and Ryedale, we know there is room for improvement both in terms of patient experience and clinical outcomes.

Issues with the quality of emergency care at Scarborough Hospital A&E were identified in a recent Care Quality Commission (CQC) report. These issues were around the provision of safe and appropriate care that met the needs of patients. We know that the main reason for these issues is due to the large numbers of patients accessing the service, which could be reduced if we provide an urgent care service for those with non-emergency needs.



3.2 The need to reduce pressure on emergency services

Latest figures show that between 15 and 25 per cent of people accessing A&E at Scarborough Hospital had symptoms that could have been treated by other services outside of hospital. In a single year, this costs the local NHS over £1 million that could have been better spent on other health services.

3.3 Improve the experience for patients

When we need care it's only natural that we want to receive it as quickly and conveniently as possible. The last thing we want is to either wait for hours in a waiting room or be passed between different people and services before getting what we need.

Due to the volume of patients accessing emergency services with minor symptoms, this does inevitably cause delays and results in long waiting times in A&E departments.



The cost of inappropriate use of emergency services

The Accident and Emergency (A&E) department is for major, life-threatening illnesses and injuries. A&E departments offer access 24 hours a day, 365 days a year.

A&E departments assess and treat patients with serious injuries or illnesses. Generally, you should visit A&E or call 999 for life-threatening emergencies, such as:

- Loss of consciousness
- Acute confused state and fits that are not stopping
- Persistent, severe chest pain
- Breathing difficulties
- Severe bleeding that cannot be stopped

The doctors and nurses at A&E are highly trained in emergency medicine and have access to equipment and treatments for life threatening conditions.

Figures show that as many as one in four people who go to A&E could care for themselves or use alternative treatment. A single visit to A&E can cost the NHS between £59 and £117.





3.4 Create a simple system for urgent care

We know there are issues with patients knowing what services are available and what types of health needs they are designed to treat. For example, when we undertook a review of the opening hours at Malton Minor Injuries Unit (MIU) in 2013, it was evident that some people were using the MIU for minor symptoms that should really have waited to be seen by their GP or pharmacy.

3.5 Create a more cost effective urgent care system for the NHS

Having a number of separate contracts for different types of urgent care services isn't cost effective. In 2014/15, the contracts for the walk-in services at Castle Health Centre and the current GP out-of-hours service across Scarborough and Ryedale are due to expire.

This means we have an opportunity to move to a single, more cost effective contract for all urgent care services in the area. 3.6 Responding to an ageing population

The fact that people are living longer is something to be celebrated. By 2021 we expect the number of people aged 80 and over to have increased by around 30 per cent.

However, considering that one of the main users of urgent care services are people aged 80 and over, this will create more demand for services. It is therefore essential that we design services to be able to cope with this increase in demand and that it's clear to patients which service they should access.

4.0 Our proposal

In response to the issues and opportunities described earlier, we have been able to create a broad outline of an urgent care service that we believe would deliver 'good urgent care'.

It is important to reiterate that this proposal is still only an outline and more detail will be added based on feedback received during this exercise.



4.1 How we have developed our proposal.

As our CCG is a membership organisation made up of 17 local GP Practices, we have sought their expertise and experience of local services when developing this proposal. This has involved holding a workshop to highlight any issues with current urgent care services and identify opportunities for improvement. The principles of our proposal, along with the need to develop it further through this consultation, have been approved by our Governing Body.

We have also used feedback from patients about their experiences of some local urgent care services, particularly the GP out-of-hours service and the Minor Injuries Unit (MIU) at Malton Hospital.

An example of how redesigning urgent care services has made a real difference to A&E attendances

The NHS in Corby has already implemented an urgent care centre that is similar to our proposal. Since opening the centre they have seen a number of improvements, including:

- A&E attendances have reduced by 51%, putting Corby into the lowest 10% of CCGs in the country for A&E attendances
- There has been a 27% reduction in adult 24-hour admissions
- There has been a 14% reduction in paediatric 24-hour admissions
- There has been an estimated saving of £685,000 per year

4.2 Our proposal

The boxes on these two pages explain the main elements of our proposal

Create two urgent care centres – one based in Scarborough and one based in Ryedale. Both centres would be open 24 hours a day, seven days a week. The urgent care centres will replace the existing walk-in service at Castle Health Centre, the minor injuries unity (MIU) at Malton Hospital and the GP out-of-hours service across Scarborough and Ryedale.

A range of services will be provided at the urgent care centres that will aim to provide all types of treatment for urgent care needs. This will include things like:

- Walk-in service where you will see a doctor or nurse without the need for an appointment
- Treatment for injuries like cuts, sprains, burns and fractures
- Diagnostics which include things like x-rays, ultrasound and basic blood testing
- Support for patients with mental health problems
- Out-of-hours home visits when appropriate
- Out-of-hours telephone consultations when appropriate

We are unable to specify the exact location of the urgent care centres as this could limit the process we have to go through in order to find the best provider for the urgent care service. However, your feedback about location will be an important consideration when we select the provider.



The urgent care centre in Ryedale would provide a slightly smaller range of services than the centre in Scarborough, but at least the same range that is currently available. If a patient arrived at the urgent care centre with serious or life threatening symptoms, they would be transferred immediately by ambulance to the nearest A&E department.



Patients will access the centres by:

- Self-presentation (walking-in)
- Referral from NHS 111
- Referral from own GP/pharmacy
- Referral from A&E department

We are keen to look at how we can use technology (telemedicine) within the urgent care centres. This would provide a direct video link to consultants working in A&E departments.

We are aiming to launch the new service in April 2015.

RIGHT CARE

FIRST TIME







What will happen to Castle Centre?

Under our proposal, only the walk-in service provided at Castle Health Centre will move to the new urgent care centre. This means that all services other than the walk-in service provided at Castle Health Centre will remain the same. This includes the registered patient list.

The contract for the walk-in service at Castle Health Centre expires in October 2014, which means there would be a gap in service until the new urgent care centres open in April 2015. We plan to look at the impact this may have on patients and make suitable short-term arrangements.

What will happen to the A&E department at Scarborough Hospital?

Under our proposal, the A&E department at Scarborough Hospital will continue to diagnose and treat patients with serious or life-threatening symptoms. Any patient who attends the A&E department with a nonemergency care need will either be directed to the urgent care centre or to a non-urgent service such as their GP or pharmacy.

What will happen to Malton Minor Injuries Unit (MIU)?

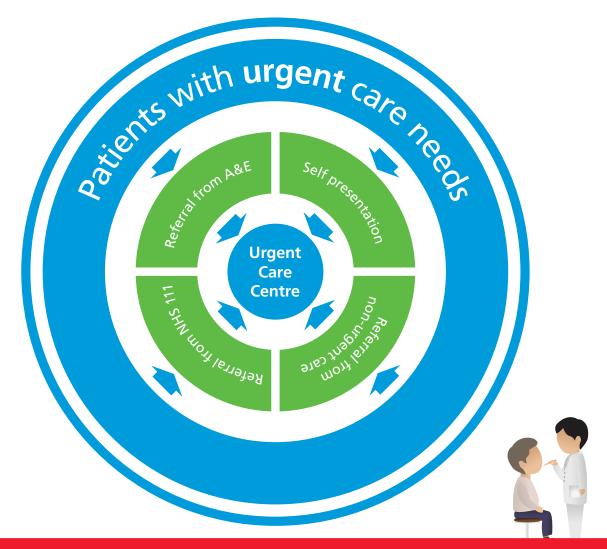
Under our proposal, the MIU will become part of the new urgent care centre. As we are unable to specify where the urgent care centre will be located, it could be that the MIU service is no longer located at Malton Community Hospital. If this were to happen, Malton Community Hospital would still continue to provide all the other services it does currently.

What will happen to the GP out-of-hours service?

The GP out-of-hours service will continue to operate in a similar way as now, only it will be provided by the same organisation as the one running the new urgent care centres.

4.3 Accessing the urgent care centres

One of the main requirements for urgent care is that patients can access it without the need for an appointment. The same applies for our proposal. The diagram below helps to show how patients would access the urgent care centres:



What should you do if you have an urgent care need?

Under the proposed model, if you require urgent care your first port of call should be your own GP Practice. They will be able to advise you about whether they can provide appropriate treatment in an appropriate timescale. If they can't they will advise of the best service to access, which may be the new urgent care centre.

If you have an urgent care need when your GP Practice is closed, you should call '111' and they will advise you of the best service to access.

If you are confident that your symptoms require treatment at the urgent care centre, you can choose to go there directly.



5.0 How to get involved and have your say

Now that you've read about the issues we are facing and how we think we can address them, we are keen to hear your views on our proposals.

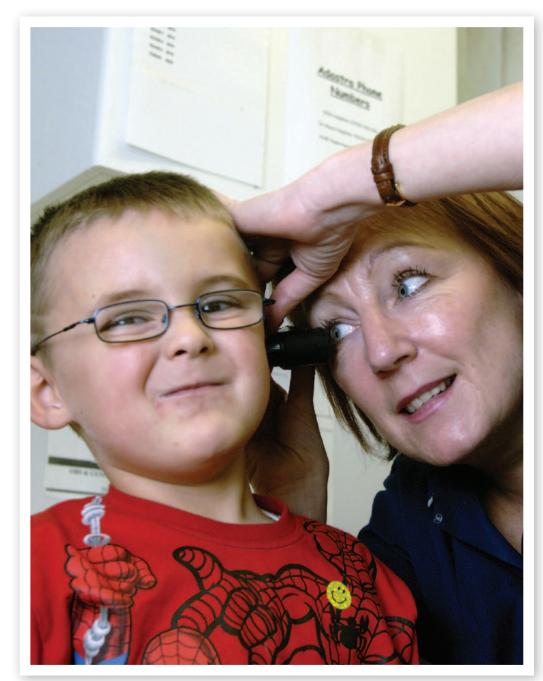
The main way we want to capture your views is through the survey included in this document. Please take time to complete it and return to us in the prepaid envelope provided. If you prefer, you can complete it online at www.scarboroughryedaleccg.nhs.uk.

We are also holding a series of public meetings to give you the opportunity to come and ask questions and speak with the GPs leading the review. We will record the questions and answers given to ensure we capture all feedback and comments made.

Details of the public events, along with a video about our proposal, will be promoted on our website www.scarboroughryedaleccg.nhs.uk.

In order to ensure we received feedback from those who may be more affected by the proposals than others, we are also looking to hold a series of focus groups and interviews. If you are interested in getting involved in this way, please email SCRCCG.enquiries@nhs.net or call the CCG on 01723 343660.

You have until 30 March 2014 to have your say.



5.1 What happens next?

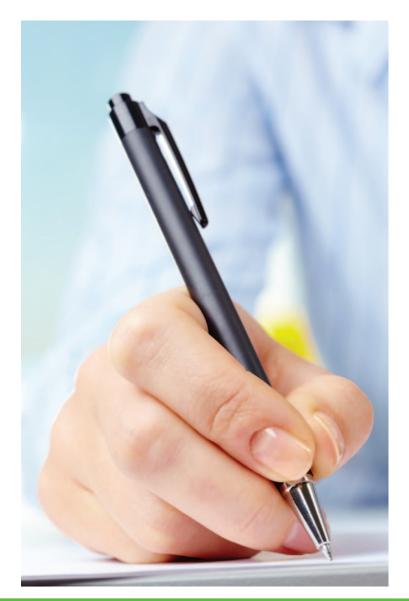
After 30 March 2014, we will collate all the feedback we have received to produce a report highlighting the main themes raised. We will then use this report to help us write a detailed specification for urgent care service that will form the basis for a tender process. A tender process is where we advertise the opportunity to provide the service to organisations who may be interested in submitting a proposal. Following a review of the proposals received, we will then make a decision about which organisation to award the contract to. We will also share details with the public about what the urgent care service will look like.

The diagram below shows the main steps between now and the new urgent care service launching in April 2015:

6 January 2014	Public "Have your say" opens	
30 March 2014	Public "Have your say" closes	
Mid-April 2014	Feedback report published	
May 2014	 Service specification for urgent care developed Presented to CCG governing body 	
End May 2014	Tender process starts	
August 2014	Preferred bidder announced	
September 2014	• Details of new urgent care service shared with public	
April 2015	New urgent care service launched	

6.0 Over to you

Please complete and return the attached survey by no later than 30 March 2014.





If you would like this publication in a different format, such as large print, braille or in a different language, please call 01723 343660.

Ref: SR004