

# Health and Wellbeing Scrutiny Committee – Response to the Urgent Care Consultation and Proposals

#### 1. Introduction

1.1 The Health and Wellbeing Scrutiny Committee, in providing a final response to the Urgent Care Consultation and Proposals would like to raise a number of points in this statement. It should be noted that the Committee has already submitted an interim response to the consultation raising a number of issues. The Committee would ask that Sunderland CCG Governing Body, in making its final decision, takes into account both the interim response and this final statement of the Health and Wellbeing Scrutiny Committee.

#### 2. Context

- 2.1 Sunderland Clinical Commissioning Group must follow national guidance as prescribed by NHS England, and they have stated that urgent and emergency care must be reviewed. This is to meet national requirements around an urgent treatment centre, an improved NHS 111 service and GP appointments on evenings and weekends.
- 2.2 The proposals were put to public consultation starting on Wednesday 9 May 2018 with a closing date of Sunday 2 September 2018.
- 2.3 The Health and Wellbeing Scrutiny Committee comprises 12 members from Sunderland City Council.
- 2.4 This formal response of the Health and Wellbeing Scrutiny Committee includes, in full, the views of the committee, with the specific reasons for those views.

## 3. The Consultation

- 3.1 The Health and Wellbeing Scrutiny Committee are assured from the independent analysis undertaken that the consultation is broadly representative at a local authority level of the city's population, if not of actual service users. Sunderland CCG and North East Commissioning Support Unit have clearly undertaken an extensive consultation process in order to gather opinions from a wide cross-section of the public, patients, interested groups and stakeholders.
- 3.2 However the Committee does have reservations on the actual questions posed to respondents relating to the Extended Access Service. It is important to note that the consultation does state that the Extended Access Service is

currently available; although the Committee does feel that the consultation gives the general impression to respondents that the Extended Access Service will be a new provision for the people of Sunderland. This effectively offers something that residents presently have, with a reduction in the provision of minor injuries treatment in the outlying localities of Houghton, Bunny Hill and Washington. Members are concerned that this could be construed as leading the survey participants into believing that this is an improvement in the service offer by Sunderland CCG, when in reality this may not be the case.

- 3.3 The Health and Wellbeing Scrutiny Committee would also draw the CCG's attention to concerns raised by the public, in the consultation feedback report, that the consultation document was unclear. There were also concerns of the actual consultation events with feedback on limited time and over-running presentations. The Committee acknowledges that a clarification addendum was issued by Sunderland CCG in relation to the consultation document, but would like reassurances that these issues have not affected the consultation process.
- 3.4 Members were also acutely aware of the use of digital platforms i.e. social media, Sunderland CCG website and e-bulletins in advertising events and relaying information relating to the urgent care consultation and associated activities. The Committee agrees it is very important to ensure information reaches as wide an audience as possible and provides a relatively cost effective way for advertising events and providing up-to-date information. However Members also expressed their reservations on the potential overreliance on digital media channels, and would argue that not every area in Sunderland is digitally inclusive with many residents still relying on more traditional methods to access consultation events e.g. posters in public places (including local GP practices), local media etc.
- 3.5 A number of these issues were also expressed by members of the public as highlighted in the consultation analysis report. This includes lack of awareness of events, timing of events and information required in local GP practices. The Committee would recommend that this is taken into serious consideration for any future consultation events.
- 3.6 Once again the registration process for consultation events is raised as an issue by the Committee. While Members understand the need for a registration process, the Committee would recommend that the procedures employed for registration are revisited to ensure they allow the widest audience possible to attend, including those members of the public without access to digital channels.

# 4. Extended Access Service v Current Provision

- 4.1 Members of the Committee would also like a clear indication of what the Extended Access Service will provide and how this will differ from the current walk-in centre provision. The consultation feedback report does have a number of comments both for and against the current walk-in centre provision, but Members do recognise that these centres are an existing resource in local areas and their future is certainly of interest to residents and patients.
- 4.2 The consultation feedback report does provide a number of considerations, provided by a variety of stakeholders, in relation to the walk-in centre provision. The Committee would hope that these issues are considered closely in relation to the future of the walk-in centres and as part of the whole urgent care solution.
- 4.3 The Committee would also recommend that the final proposals clearly identify the services that will be provided at the Extended Access Service locations and the Urgent Treatment Centre, including a clear message that creates clarity of the treatment pathways for patients, minimising redirection and confusion. It would also be reassuring to local residents and patients to have an understanding of the future use of the walk-in centre buildings as these are a beneficial and convenient resource, already located and established in communities.

# 5. Capacity of GPs

- 5.1 The consultation states that the proposals will see an additional 42,000 GP appointments per year. The Health and Wellbeing Scrutiny Committee would reiterate the current difficulties faced by the NHS locally and nationally in relation to the recruitment and retention of GP's and the extensive pressures facing local practices. This is an issue that has been debated on a number of occasions by the scrutiny committee and raises a number of issues for decision makers.
- 5.2 The Health and Wellbeing Scrutiny Committee recognises, within the consultation, that there are concerns around the ability of GP practices to support the proposals as they struggle to meet current demand and face staffing shortages. The consultation feedback highlights that patients still need to be convinced that they will be able to get an appointment more easily. With this in mind the committee would welcome assurances from Sunderland CCG around the levels of clinical resource (GP or nurse practitioner) and the number of bookable appointments that will be available at each Extended Access site during opening hours of any preferred option.
- 5.3 Members of the Committee are also interested to understand if all the Extended Access sites will be open simultaneously or will centres be closed at certain times if there is a perceived lack of capacity or demand locally? The

Committee would recommend that any decision taken provides a clear understanding and guarantee of the operation of the Extended Access Service throughout the area.

# 6. Urgent Treatment Centre – Pallion

- One of the key aspects of the proposals for urgent care is the creation of an Urgent Treatment Centre. The Health and Wellbeing Scrutiny Committee acknowledges that this is prescribed national guidance set by NHS England, which requires that each area have an Urgent Treatment Centre.
- 6.2 Members of the Committee are more concerned around the suitability of Pallion Health Centre to be the Urgent Treatment Centre as outlined in the consultation proposals. Members understand that its proximity to Sunderland Royal Hospital is an obvious benefit and supports national guidance on the ideal location being alongside the emergency department for more effective joint working. However there are a number of concerns which Members have raised and many of these are also prevalent throughout the consultation feedback report.
- 6.3 There is a concern of how Pallion Health Centre will be able to cater for the potential rise in patient numbers as a result of the proposals. Consultation feedback also raises these concerns around Pallion Health Centre's physical capacity to deal with the potential increase in patient numbers. The Committee would certainly like to see a number of these concerns addressed in any final proposals with assurances from modelling of patient flows to support any decisions made.
- 6.4 Linked to increased capacity is the issue of car parking at the Pallion Health Centre site. Patient feedback highlights a significant concern around car parking at Pallion Health Centre, comprising limited parking (including disabled parking) and no on-street parking in the surrounding area, which may disadvantage those patients with disabilities, severe illnesses or carers of vulnerable patients. Members of the committee would like to see some acknowledgement of this issue in decisions made by Sunderland CCG including potential remedies to patient concerns e.g. patient parking schemes, subsidised parking and priority parking for those most in need.
- 6.5 The location of Pallion Health Centre as the proposed Urgent Treatment Centre has perhaps elicited the most comments and discussion throughout the consultation period. While this location clearly supports NHS England guidelines it does create a disparity in access to minor injury services for those patients living furthest from the City Centre. Those living in the Coalfields and Washington areas appear to be far more disadvantaged through the proposed location for the Urgent Treatment Centre and the consultation feedback reinforces this strongly. There are also clearly issues related to travel and transport and these are detailed in a separate section.

6.6 This also does not support the most important principle to patients, as highlighted by the consultation feedback report, in ensuring appropriate access to treatment as close to home as possible. The committee would like the CCG to give careful consideration to the location of the Urgent Treatment Centre, taking into account all the concerns raised by local people throughout the consultation process. Members would recommend that the CCG should also explore other suitable locations that would reduce the physical distances to travel for some people. The Committee would welcome serious consideration for an additional minor injuries resource closer to those disadvantaged by these proposals, which could reduce the burden of travel while supporting the key principle of treatment as close to home as possible.

# 7. Travel and Transport

- 7.1 One of the primary concerns highlighted by both the Health and Wellbeing Scrutiny Committee and local people is the issue of travel and transport. The Health and Wellbeing Scrutiny Committee is acutely aware that Sunderland features areas of high deprivation, low incomes and lone parent families which results in 35.1%<sup>1</sup> of Sunderland households not owning a car or van.
- 7.2 The current proposals will result in greater travel times and distances for residents and patients located in areas such as Washington and the Coalfields in accessing minor injury services. This has the potential to create greater logistical and financial burdens on those patients and families. In fact Sunderland CCG's own transport analysis indicates that the proposals will result in 54% of people from 'no car' households being able to reach minor injury services within 30 minutes by public transport, compared to around 73% currently.
- 7.3 This is further supported through the consultation feedback where respondents ranked access to treatment as close to home as possible as the most important decision making criteria. The Committee has also stated previously its concerns on an over-reliance on desktop analysis in relation to travel and transport, and would advocate a balanced mix of desktop analysis and field testing. This would be of particular importance in those areas where travel times and distances look to increase significantly, in fact the independent transport and travel analysis also recommends further work to monitor patients' ability to access services. The Health and Wellbeing Scrutiny Committee would also request that this work is undertaken prior to any decisions being taken by Sunderland CCG Governing Body.

<sup>&</sup>lt;sup>1</sup> ONS – 2011 Census

## 8. Enhanced NHS 111 Service

- 8.1 A key component to the success of the urgent care proposals will be the enhanced NHS 111 service, this will aim to provide greater health advice getting patients to the right service and reducing the need to travel. The Health and Wellbeing Scrutiny Committee recognised some positive comments around the introduction of an enhanced NHS 111 service with promotion of self-care acknowledged as a good idea.
- 8.2 However there were also a number of concerns around the previous negative experiences from the 111 service which may be a barrier to increased or improved usage. Members would expect the CCG to be confident with the triage system used by the NHS 111 service and that capacity can meet the demand as it increases or spikes due to specific or unforeseen pressures. Therefore Members of the Committee would recommend that the NHS 111 service is robustly monitored to ensure it is performing as expected. The Committee would also suggest that information relating to the early performance of the enhanced NHS 111 service is referenced in the final decision to provide some assurances for potential users.

# 9. Petition – Keep Our NHS Public (KONP) Sunderland and District Branch

- 9.1 The Committee would also like to recognise and acknowledge the strength of feeling from the public to the urgent care proposals. This is clearly evident from the petition presented at a full council meeting of Sunderland City Council on 19<sup>th</sup> September 2018 by Keep Our NHS Public Sunderland and District Branch (KONP). KONP collected 6,453 signatures from local people opposed to the CCG proposals and the removal of the urgent care services at Bunnyhill, Houghton and Washington (A full description of the petition wording is attached at **Appendix 1** of this report). It should also be acknowledged that a further 7,542 signatures were also collected via the Change.Org petition website, making a total of 13,995 signatures.
- 9.2 The petition was received by Sunderland City Council and forwarded on to the Health and Wellbeing Scrutiny Committee for their attention and was subsequently submitted to Sunderland CCG for their consideration. The Health and Wellbeing Scrutiny Committee would ask that this petition is given serious consideration by Sunderland CCG and that this strength of feeling is clearly recognised and accounted for in any final decision made.

## 10. Conclusion

10.1 Making Urgent Care Work Better in Sunderland has presented options that will have an impact on minor illness and minor injury services in Sunderland. The Health and Wellbeing Scrutiny Committee has considered

the process and implications of the proposals set out within the consultation documentation. It should be noted at this point that the Committee does recognise and acknowledge the cooperation and commitment of key staff from Sunderland CCG and the NHS who have provided the Committee with the information and evidence required throughout this process.

- 10.2 However there do remain some concerns and uncertainties that arise from the consultation and the feedback analysis report. Clearly NHS policy and guidance has dictated that emergency and urgent care is reviewed providing certain requirements for any proposals to fulfil. However it is important that people within Sunderland are able to access both minor illness and injury services as close to home as possible, which is one of the key principles for the proposals. The CCG must be mindful that the final decision taken does not greatly disadvantage any group in Sunderland and in particular those living on the periphery of the City.
- 10.3 However urgent care is shaped in the future one of the key issues will be how these changes are communicated to patients and residents across Sunderland. It is important that one complicated system is not replaced with another system where people do not know where to go or are re-directed to another service. Clear, consistent and concise messages around any changes will help transition and ensure that any proposed changes are implemented in a measured way.
- 10.4 The Health and Wellbeing Scrutiny Committee would greatly appreciate their comments and recommendations being considered in detail by the CCG and its governing body. The Committee also hopes that many of the comments made by local residents provide some valuable insight for decision makers about what is important to patients when accessing urgent care services. The Committee would also request the CCG to consider strongly the strength of feeling that has been exhibited at events, through petitions and from this committee to help ensure that the decisions taken for urgent care provide an improved and safe service for all the people of Sunderland.
- 10.5 It should be noted that the Health and Wellbeing Scrutiny Committee retains the right to refer the decision to the Secretary of State for Health.

Health and Wellbeing Scrutiny Committee Sunderland City Council