### Getting the Balance Right in Community Based Health Services

#### Introduction

- 1. Following a public consultation in the summer, the CCG decommissioned the Walk-in service at Bitterne Health Centre on 31 October 2015.
- 2. The Board supported the case set out in the proposal to close the Bitterne Walk in Service and to divert the funding into supporting community services. The Walk in Service is a relatively low priority service and duplicates other alternatives available.
- 3. As part of the decision making of the Governing Body, the following actions were identified:
  - A clear plan to be developed with the GP federation and other primary care providers to improve GP access. This is to be brought back to the Board in early 2016. It will also inform the Primary Care Strategy
  - An urgent piece of work to be undertaken to increase public awareness on urgent and emergency care.
  - A detailed communication plan to be developed and brought back to the November 2015 Board meeting.
  - A detailed report reviewing the impact of the change to the service, both in terms of Key Performance Indicators (KPIs) and qualitatively. The report will be brought back to the Board meeting in March 2016.
  - Work to take place to support Southampton City Council and other partners to explore the establishment of a new community hub on the East side of Southampton

All actions agreed would take place in parallel with the implementation of closing the Walk in Service and there would be no delay in the closure of the service. This was to ensure that community nursing remained sustainable.

- 4. Subsequent to the decision by the Governing Body, Southampton City Health Overview and Scrutiny Panel (HOSP) accepted the decision and made the following monitoring recommendations:
  - That the draft Urgent and Emergency Communication Plan is circulated to the Panel for comment. The Governing Body should note that this action was completed at the HOSP meeting on 1 October 2015.
  - That response times and key performance information relating to the NHS 111 and GP Out of Hours services are circulated to the Panel.
  - That the proposal for a community hub on the east side of Southampton is considered at a future meeting of the Panel if the scheme progresses. The Governing Body should note that this action lies with Southampton City Council.
  - That the Panel scrutinise the impact and implementation of the closure of the Walk-In Service at each HOSP meeting until the Panel informs the CCG that the information is no longer required.
- 5. The aim of this paper is to report on progress of the decommissioning of the BWIS and the actions that were agreed at Governing Body and HOSP.
- 6. The paper will cover the following:

- Update on the actions taken to decommission the service.
- Update on the plan to increase public awareness on urgent and emergency care. This includes the communication plan.
- Update on the plan to monitor impact of the closure of the Walk-In service.
- Summary and Recommendations.

# **Decommissioning the BWIS**

- 7. The CCG has been working closely with Solent NHS Trust on the decommissioning of the service. The project has three work streams: publicity, partners and people.
- 8. **Publicity**. The CCG undertook a comprehensive publicity campaign to ensure that people throughout Southampton were aware of the closure of the walk-in service. This campaign included:
  - Posters distributed to all Southampton GP practices (including branch surgeries), pharmacies, health provider buildings (including the Royal South Hants Hospital, Southampton General Hospital, Princess Anne Hospital and Bitterne Health Centre) libraries and to Bitterne Leisure Centre.
  - Email versions of the poster were also sent to all primary schools, nurseries, preschools and a number of voluntary organisations with suggested text for newsletters.
  - All GP practices received a phone call to discuss the messages and asking for website and voicemail amendments where necessary.
  - Phone call to pharmacies in the west and central areas of the city to discuss the closure and ask for their support in promoting NHS 111 during patient consultations.
  - Walk-in service staff handed out NHS 111 cards and alternative services leaflets to around 800 people.
  - Notice of closure added to the CCG website.
  - The closure was reported in the media by BBC news online, BBC Radio Solent (including an interview with John Richards), BBC South Today, Southampton Daily Echo (nine articles), BBC Sunday Politics Show (interview with John Richards), Unity 101 FM and Breeze FM (both in live news bulletins and online).
  - Closure along with alternative services detailed on the local community website bitternepark.info.
  - Social media messages on Twitter and Facebook reached just under 17,000 people. As part of this work the CCG contacted major employers in the city asking them to share our messages.
  - Text message to almost 19,000 people advising them of the closing date of the walk-in service and the availability of NHS 111.
- 9. **Partners**. The CCG wrote to system partners (UHSFT, Care UK, PHL, SCAS 111 and 999, West Hampshire CCG, Fareham & Gosport CCG) on 12 October 2015 to confirm the closure date of the Walk-In service and request written confirmation of:
  - receipt of the information.

assurance on the actions being taken.

A copy of the letter can be found at Annex A.

- 10. All parties acknowledged the correspondence and provided a satisfactory response and assurance regarding actions being taken. See Annex B.
- 11. In addition, the CCG also wrote to City GPs, the GP Federation and pharmacies to inform them of the decision.
- 12. The CCG Primary Care Team have also followed up with face-to-face meetings in east Southampton to ensure the pharmacies were aware of the closure.
  - The team visited all 17 pharmacies in the East of the City.
  - All pharmacies were aware of the closure and were willing to put posters up to advertise the closure date.
  - Promotional cards for 111 were provided to the pharmacists with instructions to be given to clients during discussions about onward referral.
  - Pharmacists confirmed that they were happy to refer to 111, and most did so already.
  - Six pharmacies in east Southampton currently provide the Minor Ailment Scheme (see Annex C), and the others were aware of the service and where to refer patients to.
  - There are two Healthy Living Pharmacies and one 100 hour pharmacy in the east of the city. The majority of the other pharmacies were aware of the additional services they could provide.
  - There is interest by the 100 hour pharmacy to take on additional services and undertake
    Healthy Living Pharmacy accreditation to utilise the pharmacy skills. They have agreed to
    engage in the Emergency Hormonal Contraception service under a Public Health Locally
    Commissioned Service.
  - Three other pharmacies expressed an interest in starting the Minor Ailments Scheme and are undertaking the required training before starting.
- 13. **People**. Solent NHS Trust have confirmed that all staff have either redeployed or (in the case of a small number of admin and clerical staff) opted to take Mutually Agreed Redundancy Scheme.

## Increasing public awareness on urgent and emergency care – communications plan

- 14. The initial focus for communications works was aimed at ensuring people were aware of the closure of the walk-in service and the alternative services in place to support people when they become unwell. Following the closure of the service, attention has turned to building confidence in urgent care services across the city. This work has included:
  - distributing NHS 111 wallet cards to all GPs and pharmacists throughout the city with the aim that these cards will be given out during patient consultations.
  - issuing a press release regarding the Minor Ailments Scheme.
  - discussions at the Practice Managers Forum around how best to support practices in advertising their services and increase access.

- securing a three month contract for radio advertising aimed at disseminating messages to 15-40 year olds.
- 15. The outline project plan is at Annex D.

## **Monitoring the Impact**

- 16. The aim is to ensure that the impact of the closure is measured using both qualitative and quantitative information.
- 17. **Quantitative info**. A pack of baseline data has been produced for all key providers in the local urgent care system including Pharmacy Minor Ailments scheme, GPs, Primary Care Hubs, NHS111, GP Out of Hours, COAST, Minor Injury Unit and Emergency Department. Where possible this focusses on SC CCG and East GP registered patients' activity and quantified patient experience. This will be updated and reviewed on a monthly basis so that any impact can be measured, monitored and acted upon as necessary. The impact monitoring data will be made available to Governing Body and HOSP as required. See Annex E
- **18. Qualitative info.** The CCG will monitor feedback through established mechanisms which include our Patient Experience service, Patient Forum, Engagement reference group, Healthwatch as well as the GP friends and family test. In addition we will have a market stall in Bitterne during December to ask members of the public about the impact locally.

## Summary

- The Walk-In service at Bitterne Health Centre ceased on 31 October 2015.
- 20. A detailed decommissioning plan was enacted to ensure that partners and the public were aware of the cessation of the service.
- 21. The focus for the CCG has now switched to increasing public awareness of urgent and emergency care services as well as working with primary care partners to increase access.

### Recommendations

- 22. The Governing Body is requested to:
  - Note progress on decommissioning the Walk-In service.
  - Endorse the communications plan for urgent and emergency care services.
  - Comment on the plan for monitoring impact of the closure.

#### Annexes:

Annex	Description	Document
А	CCG Letter to system partners	Attached
В	Summary of response from system partners	Attached
С	Overview of Minor Ailments scheme	Attached
D	CCG Communications Plan	Attached
E	Measuring Impact	Attached