Consultation on the future of the walk-in service provided at Bitterne Health Centre

Interim Report

Public Consultation Feedback Report

1. Introduction

The purpose of this document is to report on the progress to date on the public consultation which commenced on the 15th November 2010 and will end on 11th February 2011, in relation to the future of the walk-in service at Bitterne Health Centre.

2. Background and Overview to the Proposals

NHS Southampton City is only too aware of the value of walk-in services to residents in Southampton, particularly those in the East of the City. On pages 11-12 of the full consultation document we summarise the comments received from members of the public in our pre-engagement phase and it is clear that the NHS walk-in service based at Bitterne Health Centre is a much loved local service. However the combination of the challenging financial environment and the wider strategic direction around unscheduled care services means that things have to change. That is not to say we do not believe there is a place for the provision of walk-in services in Southampton, merely that how they are currently provided and when, needs to be re-considered.

NHS Southampton City's Board met in public on 22 July 2010, and approval was given to enter a pre-engagement phase on the future of the walk-in service at Bitterne.

Clinical engagement

Since NHS Southampton City began its review of unscheduled care services in 2009, GP colleagues have been closely involved at each stage of the process. Their views have been sought both formally and informally through the bi-monthly GP Forum and discussions have taken place at the NHS Southampton City Clinical Leadership Board and the East Southampton Urgent Care Board which have GP representation.

Public engagement

As part of the pre-engagement phase we invited comments from members of the public. In total over 1,300 contributions from the public were received including letters, emails, petition signatures, one to-one interviews with users of the service and responses to a questionnaire. This questionnaire was made available on our website and distributed via the NHS Southampton City Network and Southampton Voluntary Services newsletter.

How the walk-in service at Bitterne is being used

Responses to our questionnaire have helped us understand how patients are currently using the walk-in centre. They revealed that 64% of people use the service in the evening or at the weekend, compared to 36% who use it during the day (before 6pm).

Listening to you

Below is a summary of the main issues raised during the pre-engagement phase and an outline of the work already underway to address them. A more detailed version of this section is available to read in the Consultation Document produced by NHS Southampton City (Appendix Six).

Don't close the walk-in service at Bitterne

What we are doing:

Closure of the walk-in service at Bitterne Health Centre has never been NHS Southampton City's preferred option for the future. We understand the service is much valued and so closure is not an option we are consulting on.

Difficulty getting a GP appointment

What we are doing:

NHS Southampton City is aware that there have been problems with GP access in the East of the City in the past; however a lot of work has taken place with GP colleagues to address this issue. As mentioned above most practices in the City offer extended hours to increase the convenience and make appointments available outside of office hours and on Saturday mornings.

Difficulties with transport

What we are doing:

As part of our pre-engagement work NHS Southampton City has met with Southampton City Council and raised local concerns about transport links between the East of the City and the City Centre.

Perception that East of the City is ignored

What we are doing:

There are 12 GP practices available in the East of the City, all of which offer extended hours for routine appointments on specified days and all include Saturday morning surgeries. We continue to work very closely supporting GPs and other service providers as we consider the options, particularly the impact that any changes may have so they are able to plan future requirements for their services.

Desire to avoid pressure on GPs and Emergency Department What we are doing:

We are working to inform the public about the best use of healthcare services through the Choose Well campaign. It is hoped this will increase the use of

self-care and services such as pharmacies for minor illness and therefore help reduce inappropriate use of other services such as the Emergency Department.

What does this mean for the Public Consultation?

NHS Southampton City was keen to ensure that the public consultation was based on proposals which are both realistic and reflect the views of local people. As a result there were a number of options available for the future that were ruled out as unworkable. These include:

• No change to the current service

This is considered unfeasible given the current financial pressures facing the local healthcare system.

Closure of the walk-in service at Bitterne Health Centre

Closure has never been NHS Southampton City's preferred option, and for the reasons outlined above this option will not be consulted on.

Integrated GP and community service network

This would create an integrated network between GPs and local community services, but would take considerable time to set up thereby limiting it's feasibility.

Minor Injuries Unit

It has been suggested that the walk-in service could become a Minor Injuries Unit, similar to that provided at the RSH. Whilst there are advantages to this approach, it would require the provision of x-ray services and mean significant alterations to the building to accommodate this. In addition, the level of demand required to make this option viable is questionable. Therefore this option is considered unfeasible and has not been included.

How the proposals were developed

During NHS Southampton City's ongoing review of unscheduled care services, in September 2009 the Trust's Board recommended that suggestions on how services could be further improved be brought to the Board for consideration. In particular attention was focused on:

- The future use of the walk-in service at Bitterne Health Centre
- The reduction in duplicated services
- Retaining high quality and effective services
- Affordability.

As a result NHS Southampton City has been working with local stakeholders including GPs and patient groups to explore what the future might look like. Based on this work and the feedback received as part of the pre-engagement phase outlined above, two options were developed for further consideration.

3. The Proposals

OPTION 1

Service during weekends and bank holidays

Overview

Provision of a walk-in service during the hours of 8.30am – 10pm during weekends and bank holidays.

Detail of revised service

• During the day and in the evenings (Monday to Friday) patients will continue to access their GP and the Out of Hours Service

Patients attending the walk-in service at Bitterne would be seen by a GP or nurse and offered an assessment without the need for an appointment
Where necessary, patients attending the walk-in service will be directed

towards more appropriate services (Minor Injuries Unit, GP, pharmacy etc) • Patients will be able to phone the walk-in service. They will either be given advice on self-care options, be directed towards other services where appropriate (Minor Injuries Unit, GP, pharmacy etc), or may be offered a home visit by a healthcare professional

• NHS Southampton City would work with providers and the local community to ensure that the facility is used to best effect during the week.

Benefits

• Maintains walk-in service (at busy times, during weekends and bank holidays)

- Access to telephone advice
- No appointments necessary
- Additional medical support available from the Out of Hours Service
- This option encourages more appropriate use of self-care and pharmacies
- Supports future strategic direction for unscheduled care services
- Maximises reduction in cost and resource duplication with other services
- Makes best use of the 12 GP practice facilities in the East
- Better use of existing GP service through extended hours.

OPTION 2

Service during weekday evenings, plus weekends and bank holidays

Overview

Provision of a walk-in service during the hours of 6.30pm – 10pm Monday to Friday also during the hours of 8.30am – 10pm at weekends and bank holidays.

Detail of revised service

During the day Monday to Friday patients will continue to access their GP
Patients attending the walk-in service at Bitterne between 6.30pm -10pm on weekdays and between 8.30am – 10pm at weekends and bank holidays will be seen by a nurse or GP and offered an assessment or treatment without the need for an appointment

• Patients contacting the service outside practice hours by telephone will be assessed and offered a range of services including advice on self-care, sign posting to other services where appropriate (Minor Injuries Unit, GP, pharmacy etc), or a home visit by a GP

• NHS Southampton City would work with providers and local community to ensure that the facility is used to best effect during the week before 6.30pm.

Benefits

• Maintains walk in service at busiest times (evenings, weekends and bank holidays)

- Access to telephone advice
- No appointments necessary
- Additional medical support available from the Out of Hours Service.
- This option encourages more appropriate use of self-care and pharmacies
- Supports future strategic direction for unscheduled care services
- Reduces cost and resource duplication with other services
- Limits service change whilst still reducing duplication during the day

4. Consultation Methods

A range of methods are being used to inform and consult on the proposals:

- The consultation documents have been distributed to 2,074 stakeholders, groups and voluntary organisations. For a full list of recipients please see Appendix 1.
- Articles in the press and local radio; Southern Daily Echo, Newsextra, BBC Radio Solent
- Publications:
 - City View
 - City Check –up (for NHS Southampton City staff)
 - Eastleigh & Southern Test Parishes Newsletter
 - Inform (for NHS Southampton City stakeholders)
 - Shine, Solent Healthcare newsletter (for staff and stakeholders)
 - NHS Hampshire stakeholder newsletter
 - SVS newsletter
 - o NHS Southampton City Primary Care Newsletter
 - Hampshire Partnership Foundation Trust stakeholder newsletter
 - SOS Polonia (Polish newsletter)
- Workshops and focus groups
 - Young people's workshop at SCC
 - Older Persons and disability forum
 - Sure Start East group
 - Carers Strategy group
 - Patients Forum/Links

- o Maternity Service Liaison Committee
- Hard to reach groups
 - CLEAR (asylum seekers and refugees)
 - Black Heritage
 - Disability & Older Persons Forum
 - Chinese Association
 - Southampton Centre for Independent Living
 - Learning Disabilities group
 - Southampton Mencap
 - o Learning Disabilities Partnership Board

N.B. A number of groups from our BME communities were consulted with during the pre-enagement phase, all of those consulted used the minor injuries unit at the RSH as it was easier to access, therefore they felt unable to comment on Bitterne.

- Public Meetings
 - Eastpoint
 - Harefield
 - Eastleigh & Southern Test Parishes (Hilldene, West End)
 - Ludlow Junior School
- Public Exhibitions
 - o Bitterne market
 - Central Library
 - Bitterne Library
 - o Bitterne Leisure Centre
 - o Marlands Shopping Centre
- Meetings with Groups & stakeholders
 - Southampton City Patients Forum (monthly)
 - Southampton Links (monthly)
 - GP Forum (Two meetings)
 - Southampton Health Scrutiny Panel
 - Project group (including staff and GPs)
- Chief Executive briefings
 - Caroline Nokes MP
 - o Alan Whitehead MP
 - John Denham MP
 - Meeting with City Councillors (Conservative and Labour Groups)
- Internal meetings
 - QIPP meetings

- Trust Board (including clinical leadership board)
- Integrated Governance
- Opportunities to Feedback Via:
 - Opinion poll on Community Voices online website
 - NHS Southampton website
 - Twitter
 - Solent Healthcare

All full programme of all the consultation activity can be found at **Appendix 2**.

5. Recording Feedback

A database has been established to record feedback. In addition to the feedback forms, notes from meetings, forums, letters etc have also been recorded.

6. Feedback to date:

To date over 250 responses to the consultation have been received. Below is an overview of some of the emerging themes.

12 (4.8%) chose option 1 - weekends

221 (89.6%) chose option 2 – weekday evenings and weekends17 (6.8%) didn't select an option, the comments on some of these suggest they would by unhappy with any reduction in service.

• Pressure on other health services

A number of respondents have expressed concerns that a reduction in opening hours at the walk-in centre could lead to additional pressure on A&E and GP services. NHS Southampton City's experience following the closure of the Shirley walk-in centre was that there was no resulting increase in attendance at A&E. Whichever option is taken forward, NHS Southampton City will work with it's provider services to monitor the impact on other health services including A&E, the minor injuries unit at the RSH and local GP practices.

• Transport difficulties

Mirroring the feedback received in the pre-consultation phase, a large number of respondents have expressed their view that health services such as the Minor Injuries Unit at the RSH, and A&E at Southampton General are difficult to access via public transport. Travelling there as an alternative to the walk-in centre can require two buses or an expensive taxi fare, and is particularly difficult for the elderly, or mothers with young children. Evidence shows that the vast majority of those who visit the walkin centre during the day could be treated by their GP. However NHS Southampton City will be writing to the Cabinet member for transport to highlight residents concerns regarding transport from the East of the City.

• GP Access

A large proportion of respondents outlined their concerns that they would be unable to get a GP appointment if the walk-in centre was not available during the day. Since NHS Southampton City's review of unscheduled care began in 2009 much work has been put in place to improve access to GP services, through extended opening hours and open access arrangements (as outlined in the public consultation document available in Appendix 6). However it is clear that residents on the East of the City don't perceive there to be easy access and we need to understand why this is. NHS Southampton City has fed back these initial findings from the consultation to GPs and has agreed to work with them on a possible marketing/awareness raising campaign to ensure that all the methods of accessing primary care services are better understood by the local population. Where access may be an issue in a limited number of practices, NHS Southampton City will continue to work with them to improve their service.

Feedback from Public Meetings

Meeting on 29 November 2010 at Eastpoint. Poor attendance but generated good table discussions please see **Appendix 3**.

Meeting on 14 December 2010, at Harefield Community Hall. 19 people attended. A request was made to the Chair of Links to stop the consultation and add a third option "to do nothing". A member of the public asked for a vote on this and all who attended agreed. For full comments please see **Appendix 4**.

Meeting on 18 January 2011, at Hilldean Centre, West End. 60 people attended the meeting. The question of GP access was the main issue. People commented that they understood the need for change and felt that if the GP practices offered efficient and accessible services, the proposed changes were acceptable but that the reality was somewhat different.

Meeting on 25 January, 2011 at Ludlow School. 80 people attended. Again, access to GP services was the main issue. For details of all comments and questions please see **Appendix 5**.

6. Timeline

11 February 2011 Consultation Ends

21st February 2011 (tbc) Consultation Report sent to Southampton LINk for validation

28 February 2011 (tbc) Consultation Report presented to Integrated Governance

9 March 2011 Consultation Report presented to Trust Board for consideration and recommendations

Appendix 1

Consultation on the future of the walk-in service provided at Bitterne Health Centre – Stakeholder list

NHS Southampton Network (members of public) 878 copies of the consultation documents distributed NHS Southampton City Patients Forum - 12 copies NHS Southampton City GP practices (including branch surgeries) - 43 copies NHS Southampton City GPs – 76 copies NHS Southampton City Practice Managers – 41 copies NHS Southampton City Practice Nurses - 61 copies NHS Southampton City Pharmacies in Southampton – 44 copies NHS Southampton City Pharmacists – 22 copies Southampton City Councillors - 48 copies Mike Allott, Thornhill Plus You – 100 copies Ludlow Infant School - 250 copies Chinese Association - 50 copies Lynda Walton Chair of Holyrood Tenants and RA - 12 Copies 32 members of public who wrote to NHSSC to raise concerns 11 members of public who requested a copy of the document 10 Libraries in Southampton 24 copies handed out at Macmillan Cancer Trust Event 32 copies handed out at Healthy Bite Restaurant, RSH John Denham MP Caroline Nokes MP Alan Whitehead MP Chris Huhne MP Graham O'Reilly - Socialist Party Caronwen Rees - Southampton OSC Active Southampton SVS members – 3 Chinese Association of Southampton Debbie Fleming, CEO, NHS Hampshire Denise Holden, Hampshire OSC Sheila Williams, Wessex LMC Louise Halfpenny Lynsey Malpuss, SCC Ron Foulkes, Countess Mountbatten Hospice Celia Fraser, SCC Chris Hawker, SCC Dave Shields, SCC Martin Day, SCC Suki Sitaram, SCC Southampton Centre for Independent Living Southampton Partnership Steve Lent, CMH Charity Age Concern Southampton

Anti-Poverty Forum Brad Roynon, CEO, SCC Bill Lucas, Change Implementation Group CEO. Solent Mind **Community Workers Network Disabled Persons Consultative Forum** Empathy Penny Furness-Smith, Exec Director of Health & Adult Social Care, SCC Gill Duncan, Hampshire County Council Director of Adult Social Services Federation of Southampton Tenants and residents Harry Dymond, SLINks CARE UK – 2 copies Rose Road Association Southampton Carers Together Southampton Children's Play Association Southampton City Sports Development Southampton Council of Faiths Southampton Pensioners Forum Southampton Rethink Carers Network Rob Marsden, Southampton YMCA Will Hancock, SCAS Amanda Hames, Hampshire LINk Southampton University Sarah-Jane Wareham, Southampton Solent University Ros Tolcher, Chief Officer, Solent Healthcare Sara Tiller, Head of Comms, NHS Hampshire Alison Ayres, Head of Comms, SUHT Carol Deans, Head of Comms, HPFT Andy Hollebone, Head of Comms, Isle of Wight David Barker, Head of Comms, Portsmouth Diane Andrews, Secretary, Eastleigh and Test Valley Parishes - Older Peoples Forum Kate Dench, SCC – Learning Disabilities Strategy Group Richard Whineray, Chair of LOF at Moorgreen Ian Lloynes, Southampton Centre for Independent Living Peter Davis, Peartree Community Action Forum Don Spake, Bishops Crescent T & RA Ross Davis, Townhill Action Group Tessa Tappin, Harefield Tenants and Residents Association David Brown, Peartree Community Action Forum Maureen French. Peartree Tenants Association Reg Taylor, Itchen Estate Tenants & RA Mary Carnegie, Sholing Community Action Forum Yvonne Harryman, Waterside Park RA Becky Thorne, Ashurst Park RA Roisen Conlon, Cliff RA Barrington Little, Midanbury Court RA Weston Shore T & RA

Barrie Crease, Keynsham Action Group John McCarthy, Furze Road & Furze Close RA Southampton Society for the Blind Jenny Davies, Harefield T & R Sub Group Brenda Scarlett, Merryoak Computer Club Stroke-Dysphasia Group Thornhill Health and Wellbeing Network Royal British Legion Social Club, Upper Deacon Road Amy Parsons, Thornhill Youth Centre Little Roos Soft Playgroup Southampton City Youth Service Bev Weir, Weston Court Community Project The Saturday Morning Club **Thornhill Senior Citizens Club** Brenda Downes, Thekchen Buddhist Centre Rainbow Tots Hampshire Deaf Association Brian Sinclair, The Door UK **Eastpoint Social Club** Southampton City Youth Parliament Bruce Hartnell, Parish of Sholing Fairfax Court Social Club Rev Geoff Awnas, St Christopher's Church of England – Thornhill Caroline Wright, Guide Association - Southampton Itchen Division Medwall Court Social Club Amanda Bowens Ladder4Learning Chris Ricketts, Sholing Baptist Church Christine Hammond, Southampton Rethink Carers Support Group Kate Martin, Southampton Commons & Park Protection Society Mrs G Wood, Mellowtones Over 55 Choir Christine Tebano, Parent Support Link Kim Wherry, Books for Children Group – Southampton Mrs J Roles, Sholing Community Association Cyril Hallman, Thornhill Senior Citizens Club Mike Dawe, Southampton Hard of Hearing Club Mrs Janet Harley, Townhill Park Community Association Dianne Yexley, Chrysalis Miss Joanne Barry, Southampton Samurai Judo Club Mrs Mary Evans, Solent Strutters Howard Trundell, Priestwood and Woodland Residents Group Mr E Hannaford, Festival Britain (Itchen) Community Association Ms Lynda Taylor, Alzheimer's Society John Ansell, Bitterne Manor Community Association Mr R D Edwards, Psoriasis Association Nigel Hughes, Southampton Action for Employment Julie Turley, Weston Shore Community Room Mrs Elaine Rackett, Choices 4 Families

Pat Kenner, Abbeyfield UK Patricia Semark-Jullien, Eastleigh Bereavement Service Sylvia Percy, Back Pain Association Brian George, Southampton Animal Concern Pauline Vaughan, Thornhill Health and Wellbeing Network Terence Windibank, Freemantle & Shirley Amateur Theatrical Society Brian Wetman, National Society for Epilepsy Phil Budd, Southampton Natural History Society Lordswood Residents and Community Association Rosalind Dean, Hampshire Buddhist Society Abigail Withey, Learning Links Caroline Oates, Queen Elizabeth II Activity Centre S Cleasby, The Gantry Youth Theatre Amanda Kelly, Sure Start - Weston Chris Fry, Sholing Valley Study Centre Association Stanley Fitzgerald, Spina Bifida & Hydrocephalus Association Andy Iles, Southampton Jazz Club Chris Stevens, Mediation and Reparation Service (crime Concern) Sue Hutton, Youth Offending Team Barbara Vijayakumar, Kathakali - Indian Dance Drama Company Christine Jones, Woolston Jobcentre Jenni Fletcher, Telling Everyone About Multiple Sclerosis David Bonney, VITALISE Jillian Abrahams, St Johns Ambulance - Social Care Mrs Joan Veal, Itchen South District Scout Campsite Debbie Pearce, Playtots Toddler Group Keery Anteney, Harefield Community Pre-school Mrs M Ranger, Penguin Swimming Club for orthopedically disabled Mark Wilson, Pirates for Peace Mrs Webster, Guide Association - Southampton East Division Eastpoint Centre Mr A Strudwick, James Street Church Olivia Barnes, Southampton Real Nappy Network Flautissimo Mr Gerry Harding, Hedge End Retirement Club Peter Hunt, Thornhill Plus You Peter King, The Nomads Short Mat Bowling Club Southampton Rape Crisis & Sexual Abuse Counselling Service Rachel Hampton, Mayfield Nursery Horticultural Therapy Project Stan Fitzgerald, Southampton Carers Together Rebecca Downes. NHS Direct Sue Jacobs, Southampton Aspergers Support Group Tessa Lovell, Cobbett Road Library Toddlers Group Sandra Chapman, No Limits Southampton Domestic Violence Forum Sandra Lawton, West End Stoke Group Trish Liddan, Weston Adventure Playground Sophie Sinclair, Jubilee Sailing Trust

Dial a Ride Southampton Surestart Bitterne Walk-in centre MIU at Royal South Hants Weston Lane Centre for Healthy Living Maternity Service Liaison Committee meeting with parents, midwives and Health Visitors, 10 copies

URGENT CARE EAST SOUTHAMPTON

CONSULTATION ACTIVTY LOG

Stakeholder	Activity	Lead	Date		
	NOVEMBER				
Public	Article in Daily Echo	EM	12.11.10		
All	Distribution of consultation	ALL	12.11.10		
	documents (see stakeholder list)				
Public	NHS Southampton City Patient	DB	15.11.10		
	forum				
Public	Poll on Southampton LINks website	DB	15.11.10 –		
			11.02.11		
Public	Beavois & Bargate Community	JG	15.11.10		
	Health group				
Public	Interview with Dr Adrian Higgins on	EM	15.11.10		
	BBC Radio Solent				
Public	News item on Wave 105 FM	EM	15.11.10		
Public	Information made available on NHS	SR	15.11.10		
	Southampton City website				
Public	News item in News Extra	EM	18.11.10		
Vol.group	Wayne Howard Trust	JG	18.11.10		
Public	News item on Southampton LINks website	EM	18.11.10		
Public	Information made available on	SR	19.11.10		
	Solent Healthcare website	••••			
Young People	Newtown Youth Centre, women's	JG	19.11.10		
3 3 4	group				
Hampshire	Information on use of WiC by	DB	23.11.10		
osc	Hampshire patients sent to OSC for				
	info				
Public	Stand at Bitterne market	DB/LB	24.11.10		
Vol.group	League of Friends RSH	JG	25.11.10		
Public	Public consultation event	DB/EM	29.11.10		
	(Eastpoint)				
Public	Article in Daily Echo re public	EM	30.11.10		
	consultation event				
Public	Eastern European families, parent	JG	30.11.10		
	and toddler group				
DECEMBER					
Public	Western Surestart Parents Forum	JG	1.12.10		
Public	Womens Group Central	JG	1.12.10		
Public	Article in NHS Southampton City	EM	12.10		
	stakeholder newsletter, 'Inform'				

Consultation on the future of the walk-in service provided at Bitterne Health Centre Interim Report 3 February2011

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Public	Advert in City View	EM	12.10
Public	Article in Solent Healthcare Stakeholder newsletter, 'Shine'	EM	12.10
Public	Article in NHS Hampshire stakeholder newsletter, 'Dialogue'	EM	12.10
Public	Article in SVS newsletter	EM	12.10
Public	Public display at Central Library	DB/EM	06.12.10 – 11.12.10
LINks	Steering group meeting	DB	06.12.10
Public	Disability and Older Persons Forum	DB	08.12.10
Agencies	Sure Start East Group	DB	10.12.10
Public	Mount Pleasant JR School governors	JG	13.12.10
Public	Carers Strategy Group	DB	14.12.10
Public	Public Consultation Event, Harefield Community Centre	EM/DB	14.12.10
Public	Distribution of consultation documents at Healthy Bite restaurant, RSH	JG	14.12.10
Primary care staff	Article in primary care newsletter on consultation, plus an article on how to promote opening times and services to patients	MB	16.12.10
Chris Huhne MP	Letter to Bob Deans regarding WiC consultation	EM	20.12.10
Public	Article in Daily Echo publicising Bitterne library exhibition	EM	29.12.11
	JANUARY		
Chris Huhne MP	Letter to Secretary of State concerning reasons behind Bitterne consultation	EM	06.01.11
Public	Public display at Bitterne library	EM/DB	10.01.11 – 15.01.11
Public	NHS Southampton City Patient forum	DB	11.01.11
GPs	Article in GP Primary Care newsletter	MB	01.11
Public	Public display at Bitterne Leisure Centre	DB/LB	17.01.11 – 22.01.11
Public	Press release re public meeting 25 Jan	EM	13.01.11
Public	Eastleigh Southern Parishes Older People's Forum	DB/LJ	18.01.11
Public	Article in Daily Echo publicising 25 Jan public meeting	EM	18.01.11
Public	Black Heritage group	JG	19.01.11
Public	Chinese Community Needs	JG	20.01.11

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	Meeting			
Staff &	25 Jan public meeting publicised	EM	14.01.11 &	
stakeholders	via Health E News.		21.01.11	
Public	CLEAR meeting (refugees and	JG	21.01.11	
	asylum seekers)			
Public	Article in Echo from John Denham	EM	25.01.11	
	encouraging attendees at public			
	meeting			
Public	Public Consultation Event	EM/DB	25.01.11	
Public	Stand at Central Library where	JG	25.01.11	
	BWiC documents available			
Public and	Maternity Service Liaison	JG	27.01.11	
staff	Committee meeting with parents,			
	midwives and Health Visitors			
GPs	Stand at GP Forum	MB	27.01.11	
Agencies,	Learning Disabilities Partnership	KT	31.01.11	
users of	Board			
services				
FEBRUARY				
MPs	Meeting with SW Hampshire MPs	MB	02.02.11	
	to discuss health reforms			
Public	Sure Start Toddlers group x 2	JG	07.02.11	
Public	Sure Start Playgroup Harefield	JG	09.02.11	
Soton Osc	Southampton City Council, Scrutiny	DB	10.02.11	
	Panel B Meeting			
Public	Stand at Marlands Shopping Centre	DB	08.02.11	

Bitterne Walk-in Centre Consultation Public Meeting Monday 29 November, 7.00-9.00pm Eastpoint Centre, Thornhill

Chaired by Harry Dymond, Chair of S.Link Presentation: Bob Deans, Chief Executive, NHS Southampton, Dr. A. Higgins

Attendance: 8

The meeting began with a brief presentation from Dr Adrian Higgins providing an overview of the options for consultation and the process. This was followed by a brief question and answer session. Below are some of the main issues raised during this section:

- It was requested that the PCT representatives provide more detail on the integrated GP and Community Care model which was not included in the options for consultation
- Further information was requested on the SHIP wide strategy for unscheduled care and in particular how other areas (Hampshire, Portsmouth and Isle of Wight) would be influencing the future of healthcare in Southampton
- Why isn't there a third option for consultation which maintains the status quo?
- Is there any detail on the numbers of people who go to A&E but could otherwise be using the walk-in centre?
- What will be the impact of the proposed options on local GP practices? What will those people who need a GP appointment do when they cannot get an appointment with their practice?
- Are the proposed changes all about making a profit (through GP fundholding)?
- Where did the figures regarding the use of Shirley Walk-in Centre come from?
- Why can't GP practices be charged for inappropriate use of the WiC by their patients?

Following the question and answer session those present were asked to form into break out groups to discuss the issues surrounding the consultation and the proposed options for the future. Below is a summary of the main points.

Comments on the options

- With either option 1 or 2 there should be scheduled GP surgery rotas covering the hours when the Walk-in Centre isn't open
- Favoured option would be option 2
- Model of integrated GP/WiC is a good option

• What happened to the other options (there were originally five)

General comments

- Are GP receptionists well versed on when to forward a patient on to a walk-in centre? Could GPs be dealing with some of these ailments?
- Getting through on the phone to your GP surgery is very difficult
- There is an ongoing need for the health service to promote and advise the public on using the WiC
- Is there a danger that with GP led services in the future that they may not be able to cope in the East of the City with the influx of patients when the WiC is closed
- Historical perception is that a GP appointment won't be available, so more effort is required to advise people to try for a GP appointment first before going to the WiC
- What use will be made of the WiC building during the hours it is closed? GPs should consider social care or perhaps a taxi base
- More receptionist required at A&E to cut down on inappropriate waiting when patients are not using the appropriate service
- Phone advice (NHS Direct) is not good
- Need to build confidence in whatever the system can provide
- Need to improve access to GP appointments
- Need for good triage/customer care from the outset
- Need to market the Minor Injuries Unit
- Could Bath Lodge practice join up with the WiC?
- Which GP practices have the most patients who frequently use the WiC?
- Transport access is key- including to the Minor Injuries Unit
- Could GPs offer a Minor Injuries Unit type of service?
- Why not close A&E?
- Patients should be able to get prescriptions from walk-in service over the weekend
- Bigger role for pharmacists in minor ailments
- Decision to consult started after the White Paper- is it not a waste of time to change things now?
- Patients would like access when it doesn't affect their work
- Blood tests- early appointments needed
- Savings- do they warrant the changes?
- Where are the savings going to be spent?

Comments on 'What steps can we take to enable you to access your GP?'

- Have clear notices outside GP surgeries and WiCs indicating which service is open
- Greater advertising of the 111 number
- Promote the nurse triage service at GP surgeries
- Display of leaflets at WiC and at GP surgeries

Bitterne Walk-in Consultation event at Harefield Community Centre – 14 December 2010

Chaired by Harry Dymond – Chair of S.Links Lisa James, Commissioning Manager, NHS Southampton Judy Hillier, Director of clinical Excellence and Delivery, Solent Healthcare Attendance: 19

Issues raised at this event included:

- 1. What consultation took place regarding the closure of Shirley Walk-in Centre?
- 2. NHS Southampton City is not offering a status quo, there are only two options. There should be a third option to keep the BWIC as it is
- 3. Is NHS Southampton City able to draw upon the patients who access the WIC, e.g. patients who live outside of Southampton?
- 4. "I have a petition here with 2000 signatures against the change in hours to the WIC. People cant get into their GP surgery, where do they go if the WIC is closed during the day? LINk should reject the proposal"
- 5. Will NHS Southampton City withdraw the consultation?
- 6. What are the numbers for the patients who access the Bitterne Walk-in Centre?

Comments

- Patients who fail their GP appointments should be fined
- This is the first that I have heard about the consultation
- Old people won't use the WIC at night
- There were three WICs in Southampton and they are now being closed
- You are not giving patients the chance to have their say, there is no where for patients to go
- I like to have a choice of where I have my blood test, either WIC or GP
- Taxi costs to the SGH are very high
- The WIC is used well during the daytime
- The BWIC is very necessary to this side of the city, it takes two buses approx 1 hour 30 minute journey to get to the SGH

A member of the public asked the attendees to vote that a request should be made to Southampton LINk to liaise with the Health Scrutiny committee and ask that the consultation be stopped, with a third option "to do nothing" should be added.

Ludlow Junior School Event – 25 January 2011

Chaired by Harry Dymond, S.Link Dr. A. Higgins, Medical Director Dr. R. Tolcher, Chief Officer, Solent Healthcare Attendance: 80

Below is an overview of the questions and comments raised from this event, as well as answers from the panel where applicable. The panel was made up of Dr Adrian Higgins, Clinical Director for NHS Southampton City and Ros Tolcher, Chief Officer, Solent Healthcare. Responses given are from Dr Adrian Higgins unless otherwise stated.

- **1.** At Chessel Surgery there is a sign on the door which states 'by appointment only'
 - A. Dr Higgins [who appeared on the panel and is a practicing GP at the surgery] is not a partner so has no control how the service is run at Chessel. Feedback to PCT if there are problems. It is useful if patients pre-book appointments
- 2. Harefield has lots of children, elderly people and carers they cannot get to the hospital easily, it takes two buses and is too far to travel. Where should I go for medical help?
 - A. GP surgeries are closer than the Walk in Centre for the majority of people and many patients pass their own GP practice to attend the Walk-in Centre.
- 3. If you cut the Walk in Centre then patients will have to go to A&E
 - A. (Dr Ros Tolcher) We are not cutting the service. There is the MIU at the RSH and 12 GP Practices on the East side of the City. (Harry Dymond) For transport and GP access, patients can

(Harry Dymond) For transport and GP access, patients can contact SLINk

- There are thousands of names on our petition so why not keep it as it is and listen to patients (Tim Cutter Socialist Party)
 A. It is unaffordable (Dr Ros Tolcher)
- **5.** My doctor (Chessel Surgery) is turning patients away for bandage changes and sending patients to the Walk-in Centre- surely this is not an appropriate place to go for treatment?
 - A. GPs are not the best people to dress wounds
- 6. I took a baby to the Walk in Centre but it was so busy we went to A&E who told us to go back to the Walk in Centre. We need the Walk in

Centre. Whenever I have been to the Walk-in Centre it is very busy- it is obviously needed

- **7.** This consultation doesn't have any options for the public and decisions have been made behind closed doors
- 8. People find it easier to travel to Bitterne Walk-in Centre from Shirley rather than the Minor Injuries Unit at the RSH Hospital because of transport
- **9.** Many people come from outside of the city (West End etc.) for blood tests which impacts on waiting times at the Walk in Centre,
- **10.** Patients don't want to wait 48 hours to see a GP. Where do they go in an emergency?
 - A. We need to get the service right the first time. It is a nurse led service.
- **11.** I know someone who died from bacterial meningitis. They waited 12 hours for a phone call from the OOH service and ended up going to the Walk in Centre as they couldn't wait any longer. People are going to die. The service should continue to be provided.
- **12.** The Walk in Centre was used by my family over the Christmas period and it was very busy
- **13.** The Walk in Centre is used as a 'back-up' system for when treatment is not available from GPs
- 14. I can see that many people here tonight are scared about losing a valuable service, however as a parent I will go away reassured that I can access out of hours care for my family We have to make cuts what do you think should go instead?
- **15.** My GP practice now has a Walk in service which is excellent. There were problems but the GPs listened to patients and made changes.
- **16.** Is there a time limit when the changes will take place so that there is a time to make the changes?

A. There is no fixed timetable. We will speak with GPs practices. It will not be left indefinitely.

- **17.** Why is there only an hour for this event?
 - A. We have previously had a number of events and there are more still to come.
- **18.** How will the GP Commissioning Consortia affect the WiC in the coming months?

- A. There is no fixed time. The change over is for 2013
- **19.** GP access is impossible. Why do you think people can slot their illnesses in?
- **20.** There hasn't been enough consultation.
- **21.** Are there any GPs here? Do we have reassurance from GPs that there is capacity for the fifty Walk in Patients to be absorbed into their service?

A. Yes, GPs can accommodate this. Most patients are from the Bitterne Centre practice.

- **22.** I am not at all reassured by this meeting you shouldn't have discounted the other options.
 - A. There are many challenges facing the NHS which need to be considered and this work is an important part of this.

John Denham –I was the Minister who opened the first Walk in Centre but the NHS has half of the money now than they had then. Ten years later is it not possible for the NHS to offer a Walk in Centre service. There is money in the system. GPs need to offer a walk in service. We need to speak to GPs.

Councillor Royston Smith – SCC is trying to balance its budgets. GPs must step up to the mark. Ministers need to be unanimous that GPs need to change. GPs need to listen to patients.

John Denham – There are only two options on the feedback form, what should patients do?

Harry Dymond - Write a third option on the form.

General comments

- Not enough info was given on resources which are being duplicated. The meeting should have been longer, as it was previously at the Eastpoint Centre.
- I felt sorry for the speakers due to the instant negativity in the room. No need for 'case studies' from the floor, not listening to answers. Doctor surgeries' appointment / walk in access needs to be improved, but there is still a need for daytime walk-in care if your local surgery does not have appointments. If it was easier to get a GP appointment walk-in care would not be needed. Glad to see Out of Hours is being kept either way.
- Not able to get a child seen by a GP has an impact on school attendance which in turn affects a school's ofsted inspection result and score. GPs need to improve appointment system
- The hysteria in the room has been caused by a complete breakdown in communication between health service planners and the rest of the

population <u>BUT</u> how much was spent on the glossy consultation booklets?? Something simpler would have been quite adequate.

- Get the GP service right first then have another look at the drop in service
- This meeting was not long enough.
- A microphone should have been used
- Consultants and Doctors at SUHT are asking people to go to the WIC to get dressings done.