DECISION-MAKER:		HEALTH OVERVIEW AND SCRUTINY PANEL					
SUBJECT:		SOUTHAMPTON CITY CCG CONSULTATION - "GETTING THE BALANCE RIGHT IN COMMUNITY- BASED HEALTH SERVICES"					
DATE OF DECISION:		1 OCTOBER 2015					
REPORT OF:		DIRECTOR OF SYSTEM INTEGRATION, SOUTHAMPTON CITY CCG					
CONTACT DETAILS							
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STATEMENT OF CONFIDENTIALITY	
None	

#### **BRIEF SUMMARY**

This report describes the process and findings of the consultation on Southampton City CCG's proposal to close the walk-in service at Bitterne Health Centre in order to maintain quality community-based health services in Southampton.

The CCG Board will meet on 30 September 2015 to consider the recommendations emerging from the report, attached as Appendix 1, and make a decision regarding the proposal.

A verbal report will be made to the Panel on 1 October 2015 to inform them of the outcome of the CCG Board meeting.

### **RECOMMENDATIONS:**

That the Panel:

- (i) Review the process and outcome of the consultation.
- (ii) Note the feedback and the proposed actions being taken in response.
- (iii) Consider receiving an update report in April 2016.

#### REASONS FOR REPORT RECOMMENDATIONS

1. The Health Overview and Scrutiny Panel has requested a discussion on the proposal and outcome of the consultation.

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#### ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. Not applicable

#### DETAIL

- Overview. NHS Southampton City Clinical Commissioning Group (CCG) conducted a consultation from 15 June to 4 September 2015 proposing to close the walk-in service at Bitterne Health Centre and to re-distribute the current funding to community nursing and community-based care.
- The proposal was developed as a result of a review of community based nursing provision and urgent care services. Upon reviewing provision for urgent and emergency services however, it has become clear that the nurse-led walk-in service in Bitterne, run by Solent NHS Trust, is not providing cost effective care and duplicates other services available for local residents. It is situated next to GP practices which are extending their opening times and offering nurse-led appointments, and opposite a pharmacy with other pharmacies close by. Furthermore, the service operates at the same time as both the out of hours GP service and the NHS 111 telephone advice service which is available 24 hours a day, seven days a week.
- 5. During the consultation:
  - 1668 responses were received, these includes completed surveys, emails and telephone feedback
  - 172 people attended three public meetings
  - 1521 people also participated or engaged in focus groups, meetings, public events.
- 6. **Summary of Views Expressed**. The detailed feedback is in the attached report. It should be noted that strong feelings (both for and against the proposal) emerged during the consultation period. The views can be summarised as follows:
  - Many people were worried about stopping a service that is well regarded locally. Some felt that the CCG should be able to fund both the walk-in service and other community services: these people appeared to reject the premise of the consultation questions.
  - Some people suggested that the levels of service should be reduced.
     Examples given were to have the service run on alternate weekends or for shorter periods of time during the week. People also suggested the CCG request a contribution from West Hampshire CCG to pay for those patients from outside the city who access the service.
  - Others felt that the CCG had made a strong case that:
    - other more appropriate services were available to people with urgent needs

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- the Walk-in Service duplicates these
- the CCG is struggling to fund those services which support the growing number of people with long term health conditions.
- People who felt that the CCG had made its case nevertheless expressed concerns about the themes set out below in section 7. These concerns were mirrored by the HOSP who accepted the CCG proposal and recommended the following:
  - an outline communications plan identifying how the CCG will seek to increase awareness of, and confidence in, alternative provision be presented to the HOSP meeting on 1 October 2015.
  - the CCG to outline their proposals to develop an understanding of how patients currently travel to the Walk-in Service and how to improve access to health services from the east of the city through exploring solutions with bus companies, voluntary transport services and any other alternatives.
- 7. **Concerns raised and actions being taken**. There were four main areas of concern that require action:
  - a) Better access to GP services. It was felt that it is difficult to get a GP appointment whilst others were not aware of the services that GP surgeries offer and how to access them. In tandem with these concerns, the issue of people not attending their booked appointments was raised by GP practices. The solutions to improving access to GP services centre on:
    - Improved communications by GP practices to highlight:
      - i. the types of services (for example, telephone consultations; role of nurses in dealing with minor illness) that are on offer
      - ii. the opening times, including extended opening hours
      - iii. the methods by which an appointment can be booked (e.g. online booking).
    - GP practices to consider the learning from the winter pilot scheme that saw Advanced Nurse Practitioners working in GP surgeries to good effect.
    - Education for the public on how to register with a GP; how to book an appointment with a GP surgery and the importance of not missing appointments.

The CCG has developed an action plan for implementation in quarter three 2015. The plan will be presented to HOSP as requested on 1 October 2015.

b) The need to increase awareness of, and confidence in, the

### appropriate services for the population.

- The main appropriate services for the people who currently use the Walk-in Service are NHS 111, pharmacies and GP surgeries.
   There has already been much work done by the CCG on promoting these services (for example, the Think First campaign).
- This work provides a firm foundation for an enhanced communication campaign to improve awareness and understanding of these services to commence in quarter three of this year. To address the needs of many current users of the Walk-in Service, two key areas that the plan will include are: options for young families/parents with young children and availability of emergency contraception. The plan will be presented to the HOSP on 1 October 2015.
- The work done by the CCG during the pharmacy winter pilot scheme on minor ailments has proved to be successful and has been expanded to cover more conditions across more pharmacies.
- c) Access to health services from the east of Southampton. In addition to the points made around access above, it was noted that the residents of the east of the city feel somewhat disconnected from the rest of Southampton. The main area highlighted was around transport, specifically buses.
  - A lack of convenient buses to the rest of the city from the east of Southampton was raised. This issue was highlighted early in the consultation process. It was also an area that was highlighted by the HOSP. The CCG has looked in more detail at this concern.
  - The CCG has already conducted a short transport survey of the users of the Walk-in Service. The snapshot survey covered 48 people over three days. 79% drove to the Walk-in Service and 94% had a journey of less than 30 mins.
  - With the support of councillors, the CCG met with the City Council
    Officer who is responsible for buses to better understand the
    current situation. Given the outcome of the survey, the CCG will
    consider whether there is a demand for transport to health facilities
    and how best to ensure that these are provided in the future. A
    more detailed plan will be taken to the HOSP on 1 October 2015.
  - As part of the research, the CCG is also in discussion with Communicare (a voluntary sector group which specialises in transportation) to discuss potential transport solutions should they be required.
- d) Impact on urgent care services. A number of respondents raised concern that the proposed closure would create pressure on other services. The Emergency Department (ED) at University Hospital

Southampton (UHS) was highlighted in particular. The CCG has discussed potential impact with UHS: they support the proposed closure of the Walk-in Service and it is assessed that the impact on ED will be minimal. This reinforces the requirement to increase awareness of relevant services discussed above.

8. Members are asked to consider the information presented at the meeting and following discussions comment on the report.

### **RESOURCE IMPLICATIONS**

### Capital/Revenue

9. None.

### **Property/Other**

10. None.

#### LEGAL IMPLICATIONS

### Statutory power to undertake proposals in the report:

The duty to undertake overview and scrutiny is set out in Section 21 of the Local Government Act 2000 and the Local Government and Public Involvement in Health Act 2007.

### **Other Legal Implications:**

12. None.

### POLICY FRAMEWORK IMPLICATIONS

13. None.

KEY DECISION? No

WARDS/COMMUNITIES AFFECTED:	All
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## **SUPPORTING DOCUMENTATION**

# **Appendices**

1.	Southampton CCG Board Paper: Bitterne Walk-In Service Consultation – 30 <sup>th</sup> September 2015
2.	CCG Case for Change (Annex A to CCG report)
3.	Summary of Better Care Southampton plan (Annex B to CCG report)
4.	Overview of NHS England Urgent and Emergency Care Review (Annex C to CCG report)
5.	CCG Consultation Report (Annex D to CCG report)
6.	Think First Campaign 2014 (Annex E to CCG report)
7.	Future communications campaign (Annex F to CCG report)
8.	Report on urgent and emergency care activity for HOSP dated Aug 15 (Annex G to CCG report)
9.	Summary of pharmacy minor ailments scheme (Annex H to CCG report)

### **Documents In Members' Rooms**

1. None			
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# **Equality Impact Assessment**

Do the implications/subject of the report require an Equality Impact	YES
Assessment (EIA) to be carried out.	

## **Other Background Documents**

Equality Impact Assessment and Other Background documents available for inspection at: www.southamptoncityccg.nhs.uk/consultations

Title of Background Paper(s)

Relevant Paragraph of the Access to

Information Procedure Rules / Schedule 12A allowing document to be

Exempt/Confidential (if applicable)