

Health and Wellbeing Board

Monday 8 December 2014

Urgent Care Review – Outcomes

1. Background

The aim of the Urgent Care Review “is to improve access and integration across services for people with urgent healthcare needs, by ensuring the system is well communicated and simpler to navigate. The Clinical Commissioning Group (CCG) wants to ensure that services are available at the right place, the right and first time for all patients using our services.” (Update Report, Health and Wellbeing Board 3rd March 2014; p3). This summary report sets out the proposals for decision by the CCG Governing Body at its meeting on 27 November 2014 with the more detailed management report being presented to the CCG Governing Body being available on request. A verbal update on the decision of the Walsall CCG Governing Body will be made at the Health and Wellbeing Board meeting itself.

2. Recommendation

That the report be received for information and discussion

3. Report Detail

3.1 This report describes the outcomes of the urgent care review which was initiated by Walsall CCG earlier this year and proposals going forward to Walsall CCG Governing Body on 27 November 2014 for decision. The review was in response to national guidance concerning future provision of urgent care services (Keogh Report), the capacity and performance of the urgent care services locally to provide high quality, safe and accessible services now and in the future, the requirement of Every One Counts Planning for patients guidance to reduce emergency admissions by 15% over the next 5 years, the need to integrate services and the redevelopment of Walsall town centre.

3.2 The review focused on 2 aspects of urgent care –

- The longer term vision for urgent care in Walsall
- Options for securing walk in urgent care access when the current town centre walk in centre has to close due to demolition work for the town centre redevelopment.

3.3 In taking forward the review, the CCG has worked hard to be as inclusive as possible and conducted the review in an open and transparent way. There has been

active clinical, public and other stakeholder engagement throughout the review that has informed the shape of the vision and options for urgent care walk in access. The CCG has considered all these inputs, and the outcomes of the formal public consultation, to inform the proposals that were put forward to the CCG Governing Body on 27 November. It should also be noted that there has been full engagement with the Health and Wellbeing Board and the Health Scrutiny and Performance Panel.

3.4 At the time of writing this report the CCG Governing Body is scheduled to receive a detailed management report on the outcomes of the urgent care review (copy available on request). This report is structured in 5 parts.

Section 1: explains the **context** for the Urgent Care review and how the vision and options for urgent care walk in access were developed. It explains why the CCG undertook a formal public consultation exercise and how in making a decision on the vision and the need for urgent walk in access, the CCG Governing Body would need to take into account the views of the public and other stakeholders.

Section 2 - sets out the **vision for urgent care and where the CCG aspires to get to** in the longer term i.e. by 2019 , and what respondents thought of the vision and how the CCG proposes to respond to feedback

Section 3 – Confirms that **Option 3** (the single point of access model) is not achievable in the short term i.e. within next the 5 years. Option 3 depends on Walsall Healthcare Trust completing its A&E redevelopment, which is not scheduled to start on site until 2016/17 at the earliest. The section therefore looks at **Options 1 and 2** for securing urgent care walk in access for at least the next 5 years, following closure of the current walk in centre due to town centre redevelopment.

Options 1 and 2 are interim options to allow the CCG to get to the long term vision. The section describes the options, how these were formally evaluated and the outcomes, the information and reports supporting this process, and the ranking of the options in terms of benefits. It also outlines the results of the formal public consultation. Taking all this into account, the section puts forward a proposal for Governing Body approval.

Section 4 - describes arrangements for the premises and concluding the specifications for the services required dependent on the Governing Body's decision on the proposals set out. It also describes the arrangements for procurement and contracts and a timeline to move from decision to operational status of the urgent care walk in access from 1 October 2015.

Section 5 - summarises the proposals for Governing Body discussion and approval

3.5 The review identified three options which were widely consulted upon –

Option 1 – To relocate the existing walk in centre to a new town centre location

Option 2 –To relocate the existing walk in centre to a new out of town location in the North of Walsall

Option 3 – To relocate the existing walk in centre and merge it with the current Emergency & Urgent Care Centre (located on the Walsall Manor Hospital site)

3.6 The results of the formal options appraisal which has taken into account the views of respondents to the CCG public consultation document are that the Governing Body should accept **Option 3** (see above) as the long term vision, although this isn't deliverable in the short term (because of the space required through the Walsall Healthcare Trust A&E redevelopment isn't expected to be available until 2016/17).

3.7 The proposal in the short term is to accept Option 1 (see above), and transition to Option 3 over 5 years, and to reduce walk in attendances at the Town centre site over that period by diverting patients back into primary care (i.e. GP Practices).

3.8 The CCG will work on effective communications and engagement to ensure appropriate use of both the A&E and walk-in centre. This means that activity that would normally fall within the scope of the GP contract will not be given under the new Urgent Care specification for the Hub and spoke sites, reducing the demand levels at Emergency and Urgent care Centre (EUCC) and the Town Centre Walk In Centre over the 5-year transition period. This means that in approving Option 1, the CCG will be 'reducing the volume of work' done at EUCC and the Walk In Centre, by specifying a narrower range of interventions, and ensuring that patients receive the same range of services at the Urgent Care Centre in front of A&E as they will in a Town Centre unit .

3.9 Option 1, if supported, will be an interim solution to carry the CCG through to the point where the combination of primary care access (GP core hours and extended week day/weekend GP access) and A&E single point of access will manage Urgent Care need effectively in accordance with the longer term vision.

3.10 NHS property services have agreed that in relation to the Option 1 site – the Saddlers centre- there is sufficient NHS Property Services Customer Capital slippage in year (2014 / 15) to fund the current estimated £785K requirement and further that NHS Property Services will consider taking on the lease of the proposed premises subject to agreeing terms with the Landlord, confirmation of Value For Money from the District Valuer and any required underwriting of revenue costs by the CCG. Revenue costs currently worked up based on a capital cost of £785K depreciated over a 5 or 10 year term (dependent on length of lease). There remains a risk to securing this capital and in order to provide further mitigation the CCG is

also actively considering an option whereby the developer will make the required capital investment to be paid back over the life time of the lease.

3.11 If option 1 is approved the Governing Body is also being recommended to approve commissioning a piece of work that explores the need for Urgent Care access in the North of the Borough including Pelsall.

3.12 In any event that Option 1 proves to be unsuccessful or in a situation where there is gap between having to vacate the existing Walk in Centre and the new Option 1 site becoming available that Pelsall Village Centre is recommended as a contingency scheme and further that the Governing Body commissions a piece of work that identifies mitigating actions that would be required to manage potential increased patient flow impact that this contingency scheme would have on Walsall Health Care Trust A&E department and Emergency Urgent Care Centre.

3.13 Finally the Governing Body is being asked to agree separate procurement contracts for the short and long term visions is agreed by the Governing Body as the preferred procurement route

3.14 A summary of recommendations to Walsall CCG Governing Body at its meeting on 27 November 2014 is as follows:

- i) Approve the longer term vision set out in Section 2 of the report
- ii) Approve Option 1: In Town Urgent Care Access centre – Section 3 of the report, as the interim option for delivering urgent care access while transitioning to the longer term vision of GP led urgent access centre at the front end of A&E.
- iii) Note that NHS property services have agreed that in relation to the Option 1 site – the Saddlers centre- there is sufficient NHS Property Services Customer Capital slippage in year (2014 / 15) to fund the current estimated £785K requirement and further that NHS PS will consider taking on the lease of the proposed premises subject to agreeing terms with the Landlord, confirmation of Value For Money from the District Valuer and any required underwriting of revenue costs by the CCG. Revenue costs currently worked up based on a capital cost of £785K depreciated over a 5 or 10 year term (dependent on length of lease).
There remains a risk to securing this capital and in order to provide further mitigation the CCG is also actively considering an option whereby the developer will make the required capital investment to be paid back over the life time of the lease.
- iv) If option 1 is approved, that the Governing Body commission a piece of work that explores the need for Urgent Care access in the North of the Borough including Pelsall.
- v) In any event that Option 1 proves to be unsuccessful or in a situation where there is gap between having to vacate the existing Walk in Centre and the new Option 1 site becoming available that Pelsall Village Centre is approved as a contingency scheme. In this situation that the Governing Body commissions a

piece of work that identifies the potential risks associated with this contingency scheme. This would include the potential impact on emergency services at Walsall Healthcare Trust. In this case an action plan to mitigate these risks would be developed.

- vi) That separate procurement contracts for the short and long term visions is agreed by the Governing Body as the preferred procurement route.

A verbal update on the decision of the Walsall CCG Governing Body concerning the recommendations above will be made at the Health and Wellbeing Board meeting itself.

4. Relationship to Health and Wellbeing Board

The CCG is a key partner and an active contributor and leader of health care delivery in Walsall Borough.

Authors

Salma Ali
Accountable Officer (designate)- Walsall Clinical Commissioning Group

Phil Griffin
Strategic Lead for Transformation and Redesign – Walsall Clinical Commissioning Group

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