

PRIMARY CARE COMMISSIONING COMMITTEE

Date of Meeting	16 March 2016	Agenda Item No	4
Title	Future of NHS Services at Guildhall Walk Healthcare Centre		
Purpose of Paper	<p>The contract for services at Guildhall Walk Health Care centre expires on 31 March 2016 and the CCG has to make decisions regarding the future of services currently provided as part of this contract.</p> <p>The natural end of the current contract is an opportunity to</p> <ul style="list-style-type: none"> • reconfigure urgent care services so that they are simpler and easier to navigate for the public. • start to test out models which extend access to primary care for the whole of the city's population, but lessen our reliance on separate walk in centres. • ensure this is done in a way which sustains and support primary care. <p>The attached paper summarises all of the feedback received from earlier engagement activities as well as the response to the formal consultation which closed on 19 February.</p> <p>The paper presents a set of revised proposals and how these take account the impact of our proposed changes and feedback we have received.</p> <p>In summary these proposals are:</p> <ul style="list-style-type: none"> • Retain the practice in the city centre for registered patients who will be able to access GPs and or nurse without the need to make an appointment with services being available in the evenings and at weekends. • Enhance the walk in service at St Marys by increasing capacity and providing access to GPs as well as nurses at this location. • Responding specifically to concerns regarding access in the city centre, expand the eligibility criteria and scope of the PHARMACY FIRST minor ailments service to ensure there is an enhanced service offered in the city centre/ Guildhall walk area. • Commissioning of a Pharmacy Urgent Repeat Medicines Service. 		

Recommendations/ Actions requested	The Primary Care Commissioning Committee are asked to consider the content of this paper, including all of the feedback received and to consider approval of the recommendations as set out in section 7.
Potential Conflicts of Interests for Committee Members	All GPs and the Practice Manger representative on the Committee have a potential conflict of item in this agenda item and should be excluded from the discussion.
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Date of Paper	8 March 2016

Future of NHS Services at Guildhall Walk Healthcare Centre

1. Introduction

The contract for healthcare service provision at Guildhall Walk Healthcare Centre (GWHC) expires on the 31st March 2016. The Governing Board of NHS Portsmouth Clinical Commissioning Group previously considered a full options appraisal for the future of services currently provided under this contract at its meeting in September 2015.

The CCG's vision for health and social care is described in the Portsmouth Blueprint, published in 2015, which sets out a future model of service provision that includes sustainable primary care with improved access on an equitable basis across the City, clear and easy-to-use urgent care for the City, and the integration of health and social care. A key building block of the Blueprint will be the creation of 'hubs' of urgent care services in known City locations alongside other primary care, community and social care services. The CCG has confirmed St Mary's as a key strategic site and the intention is for this to act as a hub for the delivery of urgent care.

The current model provided at Guildhall Walk Healthcare Centre is based around a GP practice which also operates as a GP walk in centre for unregistered patients. This means the city has two walk in centres, one which is nurse led which deals with minor ailments as well as minor injuries and one which is GP led which only deals with the management of illness.

The end of the current contract is an opportunity to:

- reconfigure urgent care services so that they are simpler and easier to navigate for the public
- start to test out models which extend access to primary care for the whole of the city's population, but lessening our reliance on separate walk in centres.
- ensure this is done in a way which sustains and support primary care.

As part of the options appraisal the Governing Board endorsed and supported the principle of the procurement of a GP practice, which ideally should be delivered from current void space in the city and the relocation of the GP-led Walk-In Centre (WIC) to St Mary's Treatment Centre. However the Governing Board required the CCG to conduct a formal 12 week consultation with patients, the public and stakeholders in order to understand the impact of these plans.

This paper presents the process and results of that consultation, identifies the issues raised and how the CCG may take these concerns into account. The Primary Care Commissioning Committee, (which has now been established as a stand-alone entity rather, than as previously embedded with the Governing board), is asked to consider the issues raised in this paper and to reach a decision regarding the future of services currently provided as part of the Guildhall Walk Healthcare Centre.

2. Background

GWHC is located in Portsmouth City Centre and provides two component services under a single contract: primary medical care services for registered patients; and a GP-led Walk-In

Centre (WIC) service for both registered and unregistered patients. This is currently provided by Portsmouth Health Limited (PHL) through an Alternative Provider Medical Services (APMS) contract, which is subcontracted to be delivered by Care UK Ltd. As at April 2015 the population was 5,921 but consisted of a diverse demographic including, among other cohorts of patients, students from the University of Portsmouth, homeless people, and people with a history of alcohol and/or drug misuse.

The service was set up by Portsmouth City Teaching Primary Care Trust (PCT) in 2009, providing services from 08:00-20:00, 365 days a year. The original contract was awarded for a five year period. This was due to expire on the 31st July 2014; however, this was later extended until the 31st July 2015, and another extension has now been issued until the 31st March 2016.

When re-procuring the St Mary's Treatment Centre, the GP led WIC activity was included in the procurement, regardless of the location of this service. Care UK Ltd therefore has been appointed the provider of future GP led WIC activity.

In reaching a decision regarding the future of services at GWHC, consideration needs to be given to wider plans around urgent care and future models of primary care. The national vision for the NHS as set out in the Five Year Forward View highlights the need to dissolve the traditional boundaries currently segregating healthcare services, which can be categorised as: primary care, community services, and hospitals. The strategy emphasises the need for the care provided outside acute hospitals to become a much larger part of what the NHS does. One example of this is the expansion of diagnostic services within community hospital settings to meet the urgent care needs of patients, as opposed to relying on patients increasingly visiting acute hospital settings.

3. Consultation and Engagement Process

There have been many separate elements of local engagement regarding urgent care services in recent years and more specifically the services currently provided at GHWC. The process and what we heard is presented here in three overarching phases – the engagement phase, the pre-consultation phase, and the formal consultation phase.

Overall timescale:

Engagement	Jan 2014 – Feb 2015		
Pre-consultation		June 2015 – Aug 2015	
Formal consultation			Nov 2015 – Feb 2016

3.1 Engagement: what we did

The engagement phase involved a broad effort to gain a greater understanding of the choices people make when deciding which urgent care service to use, the reasons lying behind those decisions, and to start to explore what might encourage people to make different choices in the future, therefore helping the local NHS to better manage demands on urgent and emergency care services. This phase was focused around public surveys – the first in conjunction with The News newspaper, the second organised solely by the three CCGs serving Portsmouth and South East Hampshire, and the third in conjunction with the radio station Wave 105FM.

The first survey, in partnership with The News in January 2014, primarily looked at people's experience of using different urgent care services, from same-day GP appointments, to walk-in services and the NHS 111 phonenumber. In total, 414 readers of The News took part.

The second piece of engagement was a survey carried out across the Portsmouth and South East Hampshire area, during June and July 2014. More than 800 people participated. This survey started to explore the reasons why people make the choices they do, and their preferences for the future.

The third round of engagement, in February 2015, was conducted with Wave 105FM. Altogether there were 2,637 respondents from across the Wave listenership area, including 450 from the immediate Portsmouth and South East Hampshire area.

Alongside the public engagement, there was also engagement with local clinicians, exploring how local GPs felt about potential changes – both in terms of urgent care services, but also the implications that any decisions may also have for primary care services in the city.

3.2 Engagement: what we heard

One part of the early engagement activities was to seek to test out what impact the changes to urgent care services locally may have had over recent years. The starting point for this was that, in the last decade or so, the range of urgent care services in the Portsmouth area has expanded hugely, and become more complex – but that expansion had not produced any apparent easing of pressure on the Emergency Department at Queen Alexandra Hospital. Questions were posed to local residents to ascertain whether public understanding of the services available had kept pace with these developments.

The responses to the second engagement survey, in June-July 2014, suggested strongly that although the range of choices had expanded, public knowledge had not kept pace. For example, when asked to explain the differences between the two city walk-in facilities at St Mary's and at Guildhall Walk, only 25% of Portsmouth respondents said they could do so. Similarly, almost one-third of respondents were unaware that the majority of practices offered a 'same-day' service for people who wanted access to primary care but didn't feel they could wait for an appointment. There was also a significant proportion of respondents who would prefer a simpler system of urgent care, even if that meant having fewer choices available.

The findings chimed with national thinking – that a decade of expansion of urgent care choices had ultimately made it more difficult for people to choose the 'right' service for them, and that a simplified, more streamlined structure of services may be required to produce a more effective system. Such views have been publicly expressed by both Simon Stephens, and Professor Sir Bruce Keogh.

The CCG survey findings also suggested that GPs remained the preferred option when people felt they had a minor illness, but that walk-in services have now become the natural choice for most people when they have a minor injury.

Many of these results were supported by the subsequent findings of the third survey, with Wave 105FM, in February 2015.

This engagement activity again found a surprisingly high number of people (almost one in three in Portsmouth) were not aware that GP surgeries offer same-day appointments. There were also strong indications that people would appreciate a simpler system of urgent care – when asked to choose whether they felt 'simplicity', 'quality' or 'distance' were the most important consideration in terms of urgent care, simplicity was the most popular response (not just in Portsmouth, but amongst all respondents too).

In another question, "a simpler system" was also favoured by more people valued than those highlighting the importance of "more choices" and "more resources", although most popular of all was "people need to take more responsibility for looking after themselves". Furthermore, when people were asked what they believed to be the reason why A&E

remained the default option in so many cases, the most popular answer related to people not being sufficiently aware of the alternatives.

Access to primary care was also a strong theme, both in terms of why people thought A&E was still chosen over other, more appropriate, options and also in terms of offering a solution to the pressures being experienced by local emergency services – “Make it easier to see a GP” was the most frequently chosen option in terms of easing pressure on A&E.

A summary of the findings from all three of these pieces of engagement around urgent care can be found in the document “Summary of early engagement findings about urgent care”, at www.portsmouthccg.nhs.uk/guildhall-walk-background.htm.

Discussions with local GPs also took place during this period, to find out more about the views of those working in frontline medicine in the city.

For minor illness, GPs still very much felt that they should retain primary responsibility for the care of local people – a view shared by the wider public as well. They felt that the minor illness service at St Mary’s was not currently offering the best possible service to patients due to the lack of a GP within the team, but supported the minor injuries service on that site strongly.

There was also a sense from family doctors that, although in the longer term there would need to be changes to GP practices to strengthen out-of-hours cover, in the short term it was considered necessary for some additional ‘walk-in’ capacity to remain in the city.

3.3 Pre-consultation: what we did

After the earlier, more general, engagement activity the CCG sought to develop its thinking with regard to future changes to urgent and primary care services, and then to further test that thinking by embarking on more specific engagement with local people.

The possibility of simplifying the range of urgent care walk-in services in the city, and the potential to replace the existing Guildhall Walk GP practice with another practice near to the city centre, was emerging as a definite option for the local NHS, and so in June 2015 the CCG sought to find out more about how such an approach was perceived, what the advantages and disadvantages were perceived to be, and the possible impact of such changes.

A further survey relating to walk-in services was publicised, this time asking questions specifically about the idea of moving the walk-in service currently operating at Guildhall Walk, to St Mary’s Treatment Centre. People who were registered as patients at Guildhall Walk Healthcare Centre were also surveyed to ascertain the reasons they had chosen to register at the practice, the services they used most often, and their priorities for the future, in terms of their GP practice.

Both of these surveys, setting out the questions being asked, can be accessed via www.portsmouthccg.nhs.uk/guildhall-walk-back-ground.htm.

This next phase of activity was undertaken in the knowledge that some form of public consultation was likely to be required in the future, to accompany proposals regarding potential changes to the way urgent care services operated in the city. The CCG had accepted that, at this stage, at least some reform of the current system of urgent care was likely to be both necessary, and indeed desirable, although the details of the preferred way ahead had not yet been fully developed.

People registered at Guildhall Walk Healthcare Centre were written to directly and then sent text reminders to encourage participation. The walk-in survey was promoted via digital, social and traditional media across Portsmouth and the wider South East Hampshire area.

During this phase, there were also further discussions with city GPs and the wider clinical community, to gauge opinion regarding the possibility of simply ending the Guildhall Walk GP practice and walk-in services, the state of primary care capacity in the city, and preferences for the way ahead.

In addition, to inform future thinking about the specific provision of services for vulnerable people registered at Guildhall Walk – most notably people who are homeless, and those who abuse alcohol and other substances – feedback was sought from both the Salvation Army (to hear from their homeless clients), and the PUSH network (to hear from members with substance abuse problems). This feedback will be used as a starting point for further engagement, and for discussions with the Public Health team at Portsmouth City Council, in terms of developing a new model of care for such vulnerable groups in the city.

This phase also included discussions with the key stakeholders, and specific engagement with the University of Portsmouth, and with the members of the Health Overview and Scrutiny Panel (HOSP). The CCG also approached Healthwatch Portsmouth and commissioned that organisation to conduct some independent engagement regarding the emerging thinking around urgent care services.

3.4 Pre-consultation: what we heard

There were 345 responses to the survey targeted directly at people who are registered as patients of Guildhall Walk Healthcare Centre. The full results can be accessed via www.portsmouthccg.nhs.uk/guildhall-walk-background.htm.

The responses clearly showed that most people chose the practice either because it was convenient for them, and close to where they lived, or because of the particular access arrangements which the practice provides – namely the long opening hours, and the ability to walk in and wait rather than having to rely on pre-booked appointments to see a GP.

This finding was reinforced when people were asked about their greatest concerns, should the practice no longer operate – the loss of long opening hours, and the ability to just turn up to see a doctor, were cited more frequently than any other option. Similarly, when patients were asked to consider the relative importance of a range of factors relating to their GP practice, flexible access again came out as the most important consideration.

There were 493 responses to the survey aimed at walk-in service users. Again, the full results can be viewed at www.portsmouthccg.nhs.uk/guildhall-walk-background.htm

The responses to this survey were less clear cut than the very consistent messages received from the Guildhall Walk Healthcare Centre registered patient list, but some themes were nonetheless apparent. When asked what was the most important thing to consider in terms of a possible decision to move the walk-in service to St Mary's, respondents tended to highlight the need for a city centre location, the need to keep travel times low, and the need to keep service quality high. When asked to outline their concerns about such a move, the most popular answer was to question whether the St Mary's site would have the capacity to cope. The second most popular response was to question whether service quality would be affected, followed by concerns over the distance that some respondents would have to travel.

The particular needs of students, foreign visitors to the city, and those with low incomes living near to the city centre, were all referred to by respondents.

Healthwatch Portsmouth produced its report based upon the views of 314 local people, collected during August 2015. The full report is available on the CCG website, at www.portsmouthccg.nhs.uk/guildhallwalk.

The work of Healthwatch Portsmouth highlighted several key themes for consideration, including awareness of the way the CCG's thinking was developing at that time, access and parking issues, and service capacity.

HealthWatch Portsmouth members were also keen to stress the importance of hearing from a range of different groups, the need for strong communications to promote awareness of the issue, and said that they felt that any decisions should be reviewed within 12-18 months of implementation

In terms of the discussions with local GPs, there were mixed views regarding the future of walk-in facilities, and also regarding primary care capacity. Some GPs in the south of the city said that there was sufficient capacity locally to take on the 6,000+ patients currently registered at Guildhall Walk – and so felt that simply ending the contract for that practice was viable. However, others felt capacity to be more restricted, and there were concerns that arranging for the re-registration of such a large number of people would be difficult to manage well and unsettling for many people. Regarding the issue of walk-in facilities, there was support for a consolidation of the city's GP-led, and the nurse-led, services in terms of the positive impact such a move could have on service quality.

HOSP members expressed concern about access to the St Mary's site, and the potential impact on patients should the GP practice be closed without being replaced. Also they expressed concern about any potential impact on demand for emergency care, and potential arrangements for defined groups such as students and foreign visitors should services be changed.

4. The Formal Public Consultation

4.1 Consultation: the approach

Given the feedback from registered patients, walk-in service users and clinicians, and weighing that up against important other factors such as strategic direction, national policy, and available resources, the CCG agreed a 'preferred option' for both the GP practice, and the walk-in service. Most significantly, the earlier option of allowing the contract for the GP practice to end, without being replaced by another practice, was dropped in the light of the feedback received.

The Governing Board, having agreed the firm proposals, at its meeting in September 2015 then sought to initiate a period of formal public consultation to gather a wide selection of views from anyone in the wider Portsmouth area who wished to contribute to the process. The formal consultation process ran from 16 November, 2015 to 19 February, 2016 - approximately 14 weeks.

The purpose of the formal consultation was to elicit views on the impact of our proposals and to enable participants to provide detailed feedback for the CCG to consider.

The CCG sought to gather views in a way which avoided, where possible, providing people with a list of pre-selected responses. Questions were purposefully left as open as possible, to allow people to articulate – without prompts or 'steers' - what they considered to be the advantages and disadvantages of the proposals before them, and what they considered to be most important factors when considering the future of both urgent care and primary care locally.

4.2 Consultation: the document

The basis for all activities conducted during the formal period of public consultation was the consultation document "NHS services at Guildhall Walk Healthcare Centre". This is presented as Appendix A

The document was drawn up by the CCG, to set out the background to the consultation, explain the feedback already received during the previous 18 months of engagement, the earlier options appraisal process, (considered at the September 2015 Governing Board meeting) the reasoning behind the development of the preferred option for the future, and to show people how they could register their views as part of the process.

The document also included some of the evidential basis for developing the proposals, including information regarding the current usage, by postcode, of both the Guildhall Walk Healthcare Centre and St Mary's Treatment Centre, and data on the most common health conditions which were recorded for unregistered patients attending the Guildhall Walk walk-in facility.

A draft version of the document was shared with members of the Portsmouth City Council Health Overview and Scrutiny Panel (HOSP), and with HealthWatch Portsmouth. Both organisations were asked for comments and suggestions regarding not only the document itself, but also the way in which the CCG was asking people to submit their views.

Both HOSP and HealthWatch Portsmouth formally expressed the view that they considered that the document set out the situation clearly, and fairly, and that the questions being asked were both reasonable, and asked in a reasonable way. An 'Easy Read' version was produced in conjunction with local Learning Disability staff and patients.

The document was effectively addressing two issues – the proposal to commission a new GP practice away from Guildhall Walk, but in a nearby location and the proposal to relocate the walk-in service (for unregistered patients) from Guildhall Walk to St Mary's.

4.3 Consultation: the activity

Activities during the consultation period were designed to give as many people as possible the chance to register their views about the proposals – not to simply conduct a referendum, but instead to try to elicit the detailed opinions of local residents (both those who saw merit in the plans, and those who didn't) and more importantly the reasons which lie behind those opinions.

During the consultation period the CCG:

- Held 24 drop-in sessions, at locations ranging from Queen Alexandra Hospital to the new Fratton Tesco, the Cascades Shopping Centre, the University Library, and the Central Library. During these sessions there were a total of 427 individual 'contacts'. These sessions were also used as an opportunity to promote the local Urgent Care Guide, which gives people details about the wide range of choices available to them when they need NHS help urgently.
- Promoted the consultation process via the CCG's website – giving it a prominent position on the homepage throughout the three month period. The consultation was also given a prominent position on the websites of the neighbouring CCGs, for Fareham and Gosport, and South Eastern Hampshire.
- Promoted the consultation via Flagship, the Portsmouth City Council magazine which is delivered to every home in the city.
- Issued three proactive media releases to encourage participation in the consultation process. The CCG also responded reactively to media enquiries regarding the process, both to local and regional media.
- Visited the Portsmouth Disability Forum, and the Portsmouth Racial Equality Network Organisation (PRENO). Pompey Pensioners were also approached directly, and the CCG made information and materials available at one of this group's events..
- Specifically targeted communications at both staff and students at the University of Portsmouth, including articles for the student internet site, and receiving support from the local Students Union to utilise its social media channels.

- Formally and directly contacted key stakeholders (private, public, and voluntary/third sector) to ask for them to respond to the consultation on behalf of their organisations.
- Formally notified the Portsmouth City Council Health Overview and Scrutiny Panel (HOSP) regarding the consultation process, and invited the panel to formally respond.
- Formally notified the Hampshire County Council Health and Adult Services Select Committee (HASC) regarding the consultation process, and offered to provide more details if required.
- Sought support from Portsmouth Hospitals NHS Trust and Solent NHS Trust to include articles about the consultation to be disseminated to their respective memberships.
- Requested support from other major organisations across the city – including the university, city council, NHS trusts, and the police service – in promoting the consultation process internally, to their staff. This included, for example, the consultation being promoted as a prominent banner on the home page of the Portsmouth City Council staff intranet site for the last two weeks of the consultation.
- Contacted GP practices in the city to promote the consultation process, and to invite participation. This was subsequently followed up by repeated reinforcement of the message within regular CCG communications to primary care within the city.
- Delivered promotional materials – posters, documents – to all GP practices across the city (including Guildhall Walk Healthcare Centre), and St Mary's Treatment Centre, to be made available within patient areas.
- Placed articles in the Voluntary and Community Sector Update, a regular bulletin which is disseminated to more than 700 organisations across the city.
- Contacted voluntary/community groups to promote the process, and encourage participation.
- Contacted both children's and adult services within Portsmouth City Council, to encourage promotion of the consultation process to the service's clients and contacts.
- Arranged for article about the consultation to be included in the Portsmouth City Council Birth-to-Five newsletter.
- Used social media extensively, including two paid-for 'boosts' of Facebook posts which reached 37,000+ and 27,000+ people respectively, numerous tweets to promote both the consultation generally, or drop-in sessions specifically, and using other channels (for example the Love Southsea, and Love Baffins Facebook pages) to extend the reach of the message as widely as possible.
- Installed a consultation display, including full and summary documents, in the Central Library which was in place in the foyer throughout the three month period.
- Installed a display, including full and summary documents, at the Frank Sorrell Centre for several weeks during the consultation period.
- Promoted the consultation process to the members of the South Eastern Hampshire CCG Community Engagement Committee.
- Promoted the consultation process to members of the NHS Portsmouth CCG 'Healthy Discussion' group – a virtual engagement group of approximately 50 people who are contacted on occasion for their views on issues regarding the local NHS.

The activities outlined above were designed to promote awareness of, and participation in, the consultation process generally. However, it was also important that the CCG sought the views of the registered list more specifically, to ascertain their views regarding the proposals which related purely to the future of their GP practice.

To this end, the CCG arranged for all patients registered at Guildhall Walk Healthcare Centre to be written to again (in a mail-out funded by the CCG), to explain the process and encourage participation. The letter included a hard copy of the survey for registered patients, and links to more information on the CCG website.

4.4 Consultation: what we heard

The primary means of collecting feedback from people during the consultation period was via the surveys which had been set up – one set of ‘public’ questions relating to walk-in services, which were open for anyone to answer, and one set of questions designed specifically to be answered by people who are currently registered as patients at Guildhall Walk Healthcare Centre.

In total the CCG received 451 responses to the ‘walk-in’ consultation, 405 responses to the ‘registered patients’ consultation, and made 427 individual contacts during the drop-in sessions held around the city.

The full, independent analysis of the responses to the CCG surveys is available as Appendix B. A brief summary of the responses is set out below.

4.4.1 Feedback - GP registered list

The independent analysis of these responses divides them into two – those responding to the formal letter posted directly to all registered patients, and those responding to the publicly-available link to the survey. The CCG took the precaution of collecting information in this way, to try to ensure that the views of the practice patients were not obscured or distorted by the views of people who are not registered at the practice.

Location:

In terms of the first question, asking for people’s preferred location should their practice be moved, there was a clear preference for Somerstown Central (the ‘Hub’), over the John Pounds Centre. The margin was slightly above 2:1, with 192 people choosing Somers Town compared to 108 choosing John Pounds. However, it should be noted that a sizeable minority (108 respondents) chose “Don’t know / don’t mind”, and that some of those respondents did so because they wanted to express their view that they simply didn’t want the practice to move.

Appointments:

Perhaps unsurprisingly, given what the CCG had already heard from registered patients in previous rounds of engagement, there was a very strong, clear message in terms of the importance of being able to ‘walk in and wait’ for appointments rather than relying on making bookings in the traditional way. Almost 80% of those expressing a view said they ‘strongly agree’, or ‘agree’ that a new practice should offer such a service.

Opening hours:

In terms of the opening times of a new practice, registered patients were asked to choose a maximum of two extended hours options from five – this was done not to necessarily suggest that opening hours would be dramatically reduced in future, but to seek to encourage respondents to highlight the opening hours which would be of most use, and which were most important.

The findings show that the respondents would most value extended access to the practice during the working week – early morning and late night opening on Mondays-Fridays were the most popular responses, with evening opening being considered particularly important.

Weekend opening was prioritised by fewer people, with Saturday morning opening hours being more popular than either Saturday afternoons, or Sunday mornings.

Other factors:

Finally, registered patients were asked to raise any other issues which they felt should be considered by the CCG.

There was little in the way of new themes being raised at this point by the sample, or even any discernible trends, except people taking the opportunity to express their support for the practice. In total 51 people praised the standards of care at the practice, or expressed the view that it should stay where it is.

There were some other references to the need for accessibility (including parking) to be prioritised at any new practice (15 people), and the importance of retaining a wide range of appointment / walk-in times (9), but no other themes were raised by a statistically significant number of people.

4.4.2 Feedback - walk-in centres

Advantages:

Respondents were asked to set out the advantages, as they saw them, of the CCG's preferred option of moving the walk-in facility from Guildhall Walk to St Mary's Treatment Centre, to create a single, enhanced walk-in centre for the city.

Most people (210) did not express any specific benefit – either leaving the question blank, stating specifically that they felt there were no benefits, or making comments which did not set out a perceived advantage.

However, of those offering an alternative response the most frequently-cited reasons were that the plan would save money / be more efficient for the local NHS (69), and that it would create a better, 'one stop shop' service with good access to other facilities and teams (69). Of those raising the potential advantages of the combined service, their reasons included the ability for doctors and nurses to work together – and the clinical benefits that was expected to bring – and the simplification of the choices available.

Disadvantages:

Respondents were then asked to set out what they saw as the disadvantages of the proposal. The most common objection (referenced 198 times) related to various concerns regarding location and access – people felt that St Mary's was not as well positioned as Guildhall Walk, and that it was difficult to get to, or less close to the city's centre of population. There were also 103 comments making the related point that they felt that the current location at Guildhall Walk was good / easy to get to. The other key practical concern raised by a number of people was the perception that car parking at St Mary's was difficult and/or expensive (78), whilst the most popular response in terms of the actual service being proposed related to the suspicion that waiting times for treatment may rise, and/or pressure on A&E would increase (78).

Most important factors:

When asked to describe the most important factors to be considered in the decision-making process, many respondents again raised the issue of location, and the associated issue of access. This overall theme – both made in general terms, or in relation to specific groups such as students, or foreign visitors – was significantly more likely to be raised than any other.

Among the other, less frequently-cited, themes people highlighted the importance of: taking into account the needs of / impact on patients (48 references); the impact on waiting times (42); financial viability (26), and praise for / references to the location of Guildhall Walk (42).

Other factors:

When asked to highlight other factors - not already addressed in the documentation – which the CCG must take account of, there were few themes which emerged strongly, and more frequently than others.

The most popular single answer to this question was that Guildhall Walk Healthcare Centre was of proven value (sometimes expressed in terms of “don’t try to fix what isn’t broken”), referenced 28 times. Other themes included concerns over increased traffic at St Mary’s (24), the need to listen to, and take account of, people’s views (24), and a related point that decisions should not be based on considerations of politics or finance, but be guided by the best interests of patients (15).

4.4.3 Consultation: what we heard (drop-in sessions)

During the 24 drop-in sessions there were 427 individual ‘contacts’ – these ranged from relatively brief encounters, to 30-minute conversations.

Each contact was given an overall assessment as positive, neutral, or negative - clearly, this is a somewhat subjective approach, and should be viewed merely as a guide. In general, if a conversation involved the individual highlighting both areas where they thought the preferred option was beneficial, but also potential problems, that exchange would be classified as neutral.

Interestingly, the majority of people expressing a view were not characterised as being negative to the plans – an overall balance which does not match the survey findings. This could reflect the fact that the drop in sessions reached a different cross-section of the population as well as the likelihood of an extended conversation reflecting a wider range of issues and views.

Taking into account these caveats, approximately 50% of contacts were perceived as ‘neutral’, about 30% were considered ‘positive’, and the remaining 20% were considered ‘negative’.

Themes:

Many of the themes raised at the 24 sessions are similar to those raised by survey respondents, but there were also a few differences.

Access, and the related issue of transport, regarding St Mary’s was again the dominant single issue, and was the primary source of concern to those who were opposed to, or unconvinced by, the CCG’s proposal. Such issues were raised in general terms, but also in relation to specific groups, such as students, people on low incomes, or people from other countries.

Others also expressed a more positive assessment of the current Guildhall Walk location, referring to the city centre site, or simply questioning why the service should move.

There were concerns expressed regarding the capacity of the St Mary’s site, and parking there, but these references were relatively rare – barely a dozen, in total.

Of those supporting the plans – either in totality, or in part – the main strength was felt to be the potential benefits offered by bringing together GPs and nurses at a new, enhanced St Mary’s walk-in facility. There were also people who were in favour of moving the walk-in service to St Mary’s because it would mean more services being located near to their homes, or just being more convenient for them.

4.4.4 Consultation: what we heard (Facebook)

The two 'boosted' Facebook posts, inviting people to find out more about the consultation and to participate, had a cumulative 'reach' of 63,424, generating 234 'likes' and 113 'shares'.

Although the CCG did not invite comments via this channel, a number of people did nonetheless express their opinions.

Almost all people commenting under the Facebook post were supportive of the Guildhall Walk Healthcare Centre, and opposed to any proposed changes.

The most common themes were people either speaking up in favour of the quality of the service or staff, or expressing the view that the city needed it / the CCG should keep it / people depend on it.

There were also people expressing a similar view (in terms of the perceived need for the facility) but relating that need to pressure on other services – either that it was essential to ease pressure on A&E or other GPs, or that it's 'closure' would increase the demands on those other services.

4.4.5 Consultation: what we heard (other sources)

In addition to the public channels for the submission of feedback, the CCG also approached some key local stakeholders directly, to ask them to submit their views on the preferred options. The list of stakeholders contacted directly included:

- Flick Drummond MP
- Penny Mordaunt MP
- Portsmouth Hospitals NHS Trust
- Portsmouth City Council
- The University of Portsmouth
- NHS Fareham and Gosport Clinical Commissioning Group
- NHS South Eastern Hampshire Clinical Commissioning Group
- Lalys Pharmacy
- Care UK Ltd
- Portsmouth Health Limited (PHL)
- Solent NHS Trust
- SCAS
- Southern Health
- Portsmouth HealthWatch
- NHS England – South (Wessex) – Dominic Hardy and Jacqueline Cotgrove
- Dr Janet Maxwell – Public Health
- Cllrs from the City Council – Cllrs Jones, Stubbs, Young, Vernon-Jackson, Ferrett (Chair of HOSP)
- Dr Cekanaviciene, GP and Kim Dennis, Practice Manager of Guildhall Walk Healthcare Centre

Responses from stakeholders highlighted a number of key themes in support of the CCG proposals, notably: the potential for simplifying a complex system of urgent care and thus making it easier for local people to choose the right NHS services for them; the benefits of a single, enhanced walk-in service in terms of service quality and reducing the prospect of patients being referred on to other services; the potential for building upon the strong existing links between St Mary's Treatment Centre and Queen Alexandra Hospital.

Of those raising concerns or formally opposing the CCG's preferred options, some of the notable themes raised include: the possibility of services moving away from a city centre site near to a large resident population; concerns regarding access to St Mary's; questions regarding primary care capacity in the city, and the needs of vulnerable groups of patients, such as people who are homeless.

The full responses from key stakeholders can be found at: www.portsmouthccg.nhs.uk/guildhallwalk.

The CCG also received a number of petitions during the consultation period.

A petition from the Portsmouth Labour Party was signed by 1,084 people, relating to the statement: "Due to unfair cuts to the local NHS the Guildhall Walk Healthcare Centre in the city centre of Portsmouth faces closure by the local clinical commissioning group. We're campaigning to keep this vital local service open... Please support this campaign so that we can put pressure on the decision-makers to stop this proposal." This petition was received in February 2016.

An online petition from 38 Degrees was formally received by the CCG Board in November 2015. At that time the petition had been signed by 1,595 people, regarding the statement: "Please do not close the Guildhall Walk Walk-In Centre and move it to St Mary's as it is providing a great service and is perfectly placed. The people of Portsmouth need this as their own GP is often too busy and St Mary's is already overstretched."

In February 2016 the CCG received a petition from Lalys pharmacy, containing more than 3,000 signatures, relating to the statement: "The Guildhall Walk walk-in surgery is probably the most successful, accessible and easy-to-use walk-in surgery in Portsmouth. I want the Guildhall Walk walk-in surgery to remain open." There was also a hand-written reference on this petition to "1,806 signatures on our 38 Degrees petition" (see above for details of the previously-submitted petition from that organisation).

5. Response to main concerns raised about our proposals

5.1 Access to Primary Care Services in the City

A key theme from the feedback is around the problems that people are experiencing accessing primary care services in the city, particularly same day access. As a CCG we need to ensure that we continue to improve this access in the city and that these improvements in access need to be equitable so that all patients across the city can benefit.

Given the current methods of contracting which result in us paying practices for their registered lists and a second payment for use of a WIC, we want to maximise use of our limited primary care workforce to provide patients registered at their practices with timely and accessible services. Every pound we spend on providing separate walk-in facilities is a pound that is not available to support all practices providing timely services for their patients

The Governing Board has previously committed to keeping GPs in the city and the feedback from the consultation has confirmed this and the recommendation remains that a practice should remain in the city centre

5.2 Access to St Mary's Campus

We know that St Mary's campus is visited regularly by 100s of people for diagnostic and treatment services. In addition in 2014/15, there were around 31,000 attendances at the Nurse led St Mary's Treatment centre for either minor injuries or minor ailments by patients registered with GP practices within Portsmouth. This indicates that a significant number of people find this location accessible.

Access to and cost of parking at St Mary's campus was a key concern raised during the consultation. The costs of parking at St Mary's compares favourably with that at Guildhall Walk. Both costs are given below:

St Mary's hospital Car Park		Guildhall Walk, Alec Rose Lane	
1 hour	£1.20	1 hour	£1.60
2 hours	£2.00	2 hours	£2.60
3 hours	£2.80	3 hours	£3.50
4 hours	£3.60	4 hours	£4.50

In terms of accessibility of parking, Solent NHS Trust who owns the St Mary's site has confirmed that 60 spaces are being leased at the former HMP Kingston site, which is being utilised by staff. The lease term is two years with a one month notice period. The lease commenced on 26 June 2015.

A Multi-storey car park located on the St Mary's site is one of the projects identified within the Portsmouth Community Care Phase 2 Business Case. The design is currently being developed and it is proposed that this will provide an additional 135 parking bays. There will be two decks on top of car parking on the ground. It is anticipated that work will commence in December and be completed by the end of July 2017.

A Travel Consultancy Company has been engaged in auditing the number of spaces required on site following the proposed future changes. They continue to support the Trust in developing the Multi-storey car park project within the Portsmouth Community Care Phase 2 Business Case. Solent has completed a full traffic assessment and travel plan for the site and are in the process of undertaking an associated air quality assessment. The Phase 2 scope of works has allowance for potential section 106 improvements to the intersection with St Mary's Hospital as required by Portsmouth City Council.

In terms of public transport, details of routes and timetables are shown in Appendix C. In summary the site is served by 5 regular bus services, with stops on Milton Road immediately outside the site and also on St Mary's Road, all within a five minute walk from the Campus. Between all 5 routes the site is served with a total of 16 buses per hour in each direction (northbound/southbound) during the weekday daytime with a slightly more limited service at weekends.

University of Portsmouth students also have access to a bus service that operates between the city centre and the Langstone campus which runs along Goldsmith Avenue.

Executives from the CCG met with representatives from First Group buses and Stage Coach in February to discuss access to the St Mary's site and to clarify the provision of bus services and routes. These two companies are the main providers of public bus services in the city. Both bus companies indicated that as additional services transfer to the site of St Mary's, they would be keen to work with Solent NHS Trust to understand the additional requirement for buses, particularly for staff.

5.3 Capacity at St Mary's Treatment Centre

As part of the earlier engagement work concerns were raised about whether the St Mary's walk in centre would have the capacity to cope with the extra people attending if the GP led walk-in service was relocated to this site as well. Care UK Ltd, the provider of the St Mary's walk in centre have confirmed as the owners of the building that they have the ability to expand the available space for this service including increasing the number of treatment

cubicles. The current waiting area is of sufficient space to be able to meet the increased demand of attendances that would result.

Concern was also expressed about waiting times. The current waiting time target for the nurse-led WIC at SMTC is in line with the national NHS Standard Contract, i.e. for 95% of patients to be seen within 4 hours. This is currently consistently achieved and exceeded. This is in contrast to waiting times at the Accident and Emergency Department where more than 20% of patients have to wait more than 4 hours.

6. Revised proposal taking account of public and professional feedback

The CCG has received considerable feedback from a range of stakeholders as part of the early engagement and formal consultation and the CCG needs to take this into account in considering the future of services.

The following revised proposal has 3 parts and is recommended on the basis that it keeps the city centre practice currently at Guildhall Walk open whilst enabling the CCG to continue with its strategic plans to redesign urgent care.

6.1 Retain the GP practice located in the city centre

Patients and the public, who have responded to the consultation, clearly want to keep the practice currently operating from the Guildhall Walk Healthcare Centre open and strong views about the need to retain GP services in the city centre have been expressed. The point has been made that this is where many of the student population are resident as well as many of the more vulnerable and socially disadvantaged populations. We know that student numbers are due to increase in the area with the building of additional student accommodation. Concerns have been expressed about the ability of this growing population to access GP services.

In terms of the model of care, there has been strong support expressed for a GP practice that offers patients the ability to walk in and wait to be seen as opposed to having to pre-book an appointment. For clarity this will be referred to a “walk in and wait” service. This is particularly valuable to those whose lifestyles are less ordered. In addition a need for access to services on Saturdays mornings and weekday evenings has also been expressed.

The current contract for the practice is coming to an end and there is evidence that market conditions are highly competitive for primary care services; therefore the CCG will need to run a procurement for the GP practice which is currently located at Guildhall Walk. However, by procuring a practice in this way, patients will not have to re-register and staff involved in the delivery of the current service will have TUPE rights should a new provider win the contract.

When procuring this GP practice the CCG will require the provider to deliver a “walk in and wait” model of service for registered patients and we will also use the opportunity to test out different ways of providing services 7 days per week. This could either be as a practice in their own right or by working with other practices in the vicinity to collaborate on the provision of this extended access but as part of the funding they receive per head of population. As a minimum the practice will be required to provide access on Saturdays and some evening surgeries. This way more patients in the city will have extended access to primary care

There will be no cap on the list size for this practice; patients living anywhere in the city will be able to register here. This aspect of the proposal addresses the concern of those people who are worried about the potential impact of the loss of a GP practice in the city where they can be seen without an appointment. Not only will they be able to access the service for their urgent care needs, they will also be able to access it for routine care and long term condition management, if they select this as their practice and choose to register here

The medical services and management of vulnerable patients, such as people who are homeless, or alcohol and substance misusers, currently delivered at GWHC are clearly an essential component of care that needs to continue to be delivered within the city. This has been highlighted in the Equality Impact Assessment (EIA) carried out by the CCG. As part of the procurement exercise, the CCG is committed to re-commissioning specific service provision for these cohorts of patients deemed as vulnerable or hard to reach. This will involve working with public health colleagues and may include the commissioning of a specific outreach service for the homeless population which will be an enhancement of the service currently provided at

General feedback from the public both locally and nationally is that they want better access to comprehensive GP services. As part of this proposal the current service at Guildhall Walk service will remain open, but we want to use the opportunity to move to a model of primary care that we can extend across the City, moving away from single walk-in centres towards widespread access to GP surgeries.

A recent survey of our GP practices confirmed that the majority are now operating some form of telephone triage of requests for urgent appointments in an attempt to free up capacity and are finding that many issues can be dealt with over the phone or patients who do need to be seen can be booked into a same day duty clinic.

Taking this one step further there is also a pilot underway covering approximately 55,000 patients being delivered collaboratively across a number of practices. The pilot involves an enhanced Triage Centre acting as a hub which will give patients more choice at their first point of contact and directs them to the service most appropriate to manage their clinical needs. Following triage, patients will receive verbal or written advice regarding self-care whilst any patients who require a face to face consultation will be offered an appointment to see a clinician who is able to meet their needs whether this is a GP, physiotherapist, nurse or other member of the multidisciplinary team. Where possible the appointment will be at a time and location most convenient to the patient whether at their own surgery or at another surgery within the pilot. This is an example of practices working together to improve access across the city as opposed to concentrating all of the resources on a relatively small population. We will be looking to encourage and develop models such as these across the whole of the city.

We will use this opportunity of the procurement of a practice in the city centre to test out how we can offer improved access to primary care that best meets the needs expressed by the patients at the current practice as well as the wider population.

6.2 Enhance the current walk-in service at St Mary's Treatment Centre

Currently the walk in centre at St Mary's Treatment centre is a nurse-led service and is open from 07:30-22:00 Monday-Friday, and 08:00-22:00 at weekends and bank holidays. The proposal is to enhance this service by providing access to a GP between the hours of 8am and 8pm. This will mean a wider range of conditions will be able to be managed than currently. All adults and children, regardless of age, will be able to be seen and managed as walk in patients and ensuring access to a GP at this site will make better use of the diagnostic facilities and the opportunity for greater integrations between the urgent care services delivered in the hospital and the community.

As outlined in the Portsmouth Blueprint, the CCG wishes to develop extended access to primary care services through the establishment of 'community hubs', with urgent access to GPs and other healthcare professionals as a part of this integrated model. The creation of a multidisciplinary urgent care centre is an important step in the journey of creating a hub where practices can access same day urgent care. St Mary's is strategic site for this development.

By enhancing the services at this site it will provide a more focused and appropriate response to the needs of patients who are currently attending the accident and emergency department at Queen Alexandra Hospital with both minor illnesses as well as injuries when they do not require intensive or specialised care.

The feedback received from a number of consultation and engagement exercises with the general public is that the urgent care system at present is too complex and as such many patients are opting to visit Accident and Emergency department. As part of the formal consultation views were also expressed that including GPs at the St Mary's walk in centre would create a better, 'one stop shop' service with good access to other facilities and services. By commissioning GPs as part of the existing multi-disciplinary walk in service it effectively becomes an extension to the emergency department and patients would no longer be able to make the wrong choice in terms of which walk in service to access.

6.3 Develop the role of Community Pharmacy's to support delivery of the Urgent Care Agenda

We have received strong feedback regarding the need to secure access to support for minor ailments in the city centre, given the number of visitors and also students some of whom chose not to register at a practice during term time. Pharmacists can be consulted without an appointment about a range of minor conditions. Minor ailments services have been highlighted by NHS England as one of the ways in which community pharmacies can support the urgent care agenda.

The Department of Health's vision for community pharmacy is for it to be integrated with the wider health and social care system to relieve pressure on GPs and Accident and Emergency Departments.

There is a well-established network of community pharmacies in the city which are shown on the map overleaf. A number of these pharmacies are providing services for 100 hours a week. Many of our pharmacies are accredited as Healthy Living Pharmacies and are already contributing to the health and wellbeing of the population of Portsmouth.

As a CCG we already commission a pharmacy based minor ailments service (PHARMACY FIRST) with 36 of our 41 pharmacies in the city accredited. 27 of these pharmacies have delivered the service within the last 3 months and have undertaken 883 consultations. Many of the patients were registered with practices in areas of high deprivation namely Hanway Rd, Lake Rd and John Pounds. Over 50% of patients accessing the service would have sought help from some other part of the NHS if the service had not been in place. Currently the service is provided free of charge to patients who are exempt from prescription charges which will include many on low income but not automatically university students. However access to the scheme could be extended to students in full time education

Analysis of the presenting complaints at the GWHC (see below) indicates that a significant proportion of consultations are for conditions which could be managed via the current 'PHARMACY FIRST' scheme and it is proposed that the scheme is expanded in terms of the conditions which can be managed within the pharmacy.

Presenting Condition (OPCS-4)	Count	Percentage
Upper respiratory tract infection	1,187	9%
Acute Tonsillitis	713	5%
Skin/subcutaneous infections	695	5%
Lower respiratory tract infection	655	5%
Urinary tract infection	584	4%
Requests for Medication	425	3%
Otitis media	383	3%
Sore throat	364	3%
Viral infection	318	2%
Cough	307	2%
Otitis externa	298	2%
Abdominal pain	236	2%
Acute Conjunctivitis	219	2%
Cystitis	195	1%
Earache symptoms	188	1%
Advice about treatment given	172	1%
Rash/nonspecific skin eruption	165	1%
Disorders of eye and adnexa	161	1%
Backache, unspecified	158	1%
Oral/salivary/jaw diseases	156	1%

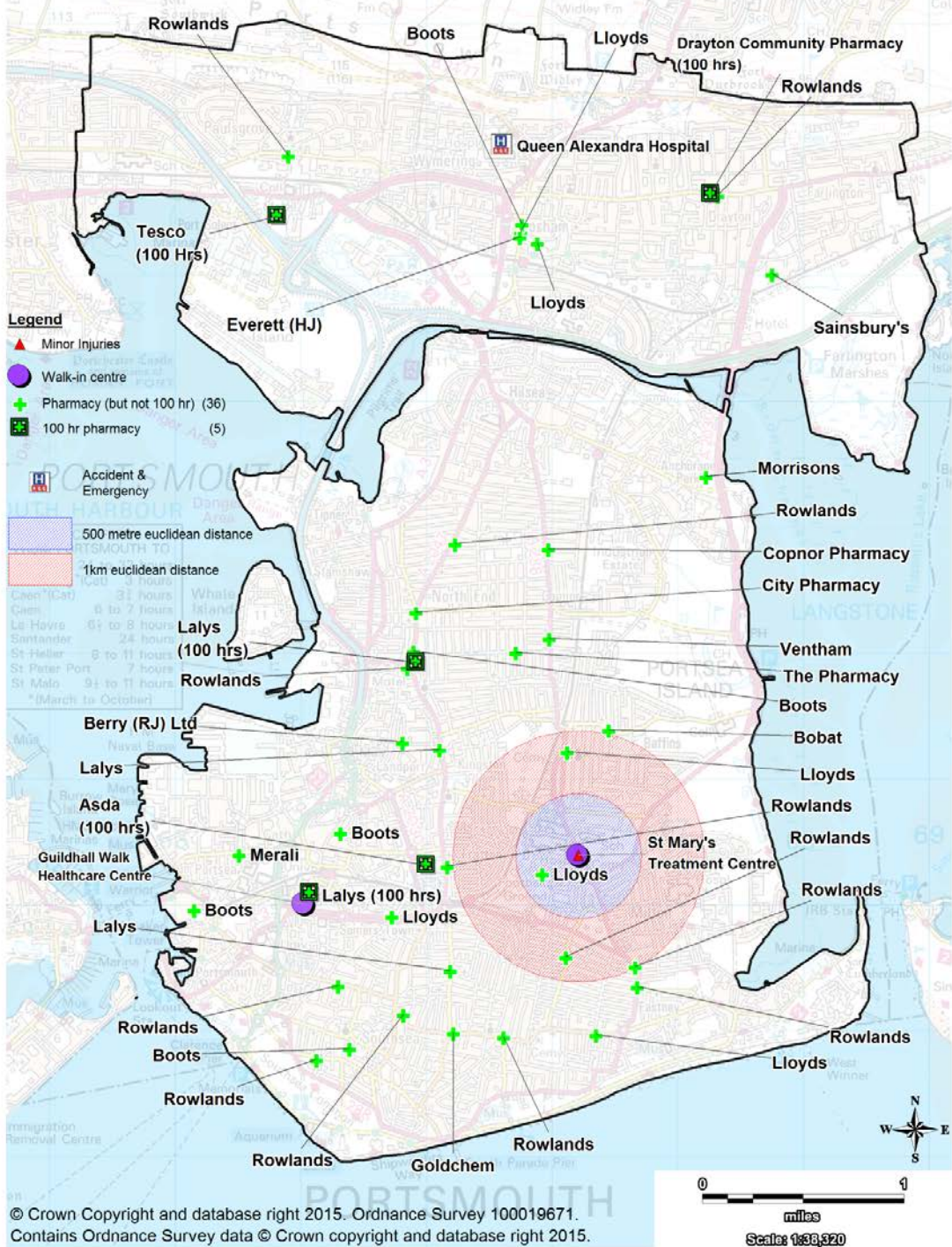
Top 20 presenting conditions throughout 2014/15 classified according to the Office of Population Censuses and Surveys (OPCS) Classification of Surgical Operations and Procedures (4th version).

One of the advantages of a pharmacy based minor ailment service and moving away from a nurse or doctor led model is the opportunity it provides to encourage people to take more responsibility for their own health and to support and enable people to self-care

Another area where community pharmacies can contribute to the urgent care agenda is the supply of urgent repeat medicines. Nationally, up to 30% of all calls to NHS 111 services on a Saturday are for urgent requests for repeat medication. This can block GP out of hours appointments. A small number of patients also attend A&E to obtain urgently needed medicines. In addition a significant proportion of visits to the walk in service at Guildhall walk are request for medication and a number of these will be for repeat medicines.

Plans are being developed to jointly commission with NHS England a Pharmacy Urgent Repeat Medicine Services (PURM) which aims to facilitate appropriate access to repeat medication outside of core GP hours by sending patients directly to community pharmacies, relieving pressure on urgent and emergency care services, saving money and shortening the patient pathway. This service is included within the Commissioning Standards for Integrated Urgent Care.

Pharmacies in Portsmouth - 100 hour or not; Walk-in centres; minor injuries and A&E department, as at September 2015. And a 500 metre and 1km "as the crow flies" buffer around St Mary's Treatment Centre.



7. Recommendations

In summary, the CCG has developed a set of proposals which aim to take into account the feedback we have received during all stages of the engagement and formal consultation over the previous 18 months, balancing this against the CCG's and national strategy for health & care and our requirement to commission sustainable services for the city.

Therefore, it is recommended that the CCG:

- Retain the practice in the city centre for registered patients who will be able to access GPs and or nurse without the need to make an appointment with services being available in the evenings and at weekends.
- Enhance the walk in service at St Mary's by increasing capacity and providing access to GPs as well as nurses at this location
- Responding specifically to concerns regarding access in the city centre, expands the eligibility criteria and scope of the PHARMACY FIRST minor ailments service to ensure there is an enhanced service offered with the location of the city centre/ Guildhall walk and
- Supports the commissioning of a Pharmacy Urgent Repeat Medicines Service

These proposals keep GPs in the city centre. The practice will have the capacity to expand and grow to allow for the anticipated increase in student numbers. The practice will also be able to see registered patients who chose to 'walk in and wait' for an appointment. We will ensure the practice provides access for the registered population at weekends. The practice staff have developed expertise in caring for some very vulnerable patients and this will continue as part of these plans. We will also work with public health colleagues to review and enhance services currently being provided for homeless people in the city.

These proposals also provide the opportunity to enhance the role that community pharmacists can play in the urgent care agenda.

By enhancing services at the St Mary's walk-in centre by the addition of GPs we will simplify the arrangements for urgent care. Nurses and GPs will be available in one location to see both minor ailments and injuries with the support of diagnostics on site and direct links with the Emergency department at Queen Alexandra Hospital. Enhancing the service in this way means that patients will no longer be able to make the wrong choice or be turned away when they want or need an alternative to their own GP for urgent or same day access.

8. Next Steps

Whilst the CCG implements the recommendations set out in this paper we must ensure that current services transition smoothly to the new arrangements in a way that is safe and consistent for people who use them and which gives adequate time to fully explain and promote the changes.

To achieve this following is proposed:

- Extend the current contract with the existing provider at GWHC until June 30th 2016.
During this time the hours of the service will remain unchanged. Both registered and unregistered patients will continue to access services at Guildhall Walk as before.
- Agree an interim contract from July 1st 2016 until March 31st 2017 with the current provider PHL, for the provision of general medical services for registered patents only.

From July 1st anyone wishing to access the 'walk in and wait' model of service at Guildhall Walk will need to register with the practice. The practice will continue to provide extended hours in the evenings and on Saturdays. To maintain continuity of service the intention is for services to registered patients to remain in the current building in Guildhall Walk until the new contract is in place (subject to the landlords agreement).

From July 1st should patients wish to remain registered with an alternative practice, then they will be able to access same day medical services either from their own GP practice or if they prefer from the enhanced walk in service at St Mary's which will include GPs within their workforce from July. In addition patients will be able to access the expanded pharmacy based minor ailments service in the city.

- From April 2017 the CCG will put a new contract in place for a city centre practice for those patients currently registered at GWHC.

This process will take approximately 12 months to deliver from inception to a new service roll out. This time-scale includes a Market Engagement Process as well as a full procurement process - including a Pre-Qualification Questionnaire and Invitation to Tender stages.

The service specification for this contract will indicate the need for the incoming provider to offer a "walk in and wait" model as well as pre-booked appointments and extended hours on weekday evenings and at weekends. The exact hours will be determined after analysis of current consulting patterns.

In terms of location of the practice from April 2017, the feedback from the consultation indicated a preference for Somerstown Hub over the John Pounds centre, although a number of people indicated they would prefer the practice to stay in its current location. The full options appraisal clearly outlined the financial and strategic benefits of utilising public sector property if possible. On this basis the use of the Somerstown Hub should be pursued as the location for this practice from April 2017 onwards.

It is important to stress that patients will not have to re-register should the location move from Guildhall Walk from April 2017.

Katie Hovenden

Director of Primary Care
March 8th 2016

List of Appendices included with this paper

- Appendix A NHS services at Guildhall Walk Health care Centre. Public Consultation Document
- Appendix B Independent Analysis of Consultation Feedback
- Appendix C Routes and times of buses serving St Mary's campus

Public Consultation Document



NHS services at Guildhall Walk Healthcare Centre

Health service locations



1



2



3



4



5



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- 1 QA Hospital
- 2 St Mary's Treatment Centre
- 3 Guildhall Walk Healthcare Centre
- 4 John Pounds Centre
- 5 Somerstown Central

Services you can use when you need NHS help in a hurry

This document puts forward some proposals that might affect the way we provide walk-in centres for minor injury or minor illness in future. The service will still be available but might, in future, be provided in a different way.

There are, however, a wide range of services you can use when you need help from the NHS in a hurry, and which may be a better option for you than going to the Emergency Department at Queen Alexandra Hospital.

There are more choices than ever before for people needing urgent – but not emergency – NHS care.

- **NHS 111** – call if you need advice, or if you are unsure what to do regarding a health problem. Open 24 hours a day, every day.
- **GPs** – local GPs offer same-day ‘urgent’ appointments, and run clinics outside normal office hours. Ask for details at your surgery.
- **Pharmacies** – expert advice and medicines, in convenient locations. Most pharmacies now have private consultation areas and many are now running a Pharmacy FIRST scheme that allows people who receive free prescriptions to go straight to their pharmacist to receive treatment, for selected minor ailments, without needing to visit their GP to get a prescription.
- **Out-of-hours GP services** – just because it is the evening or the weekend, doesn’t mean you can’t get a doctor. Call the NHS 111 number.

If you haven’t seen it, our popular handy guide to all the local urgent care options is available on our website www.portsmouthccg.nhs.uk and can be downloaded or printed off.



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This consultation runs until **Friday February 19th 2016** – please ensure we have your comments by then. You can respond either by sending the completed pull-out survey form (see centre pages) to: **Freepost NHS PORTSMOUTH** (you do not need to add any other address details on your envelope as these are not required) or by going online to **www.portsmouthccg.nhs.uk/guildhallwalk** and completing the survey there. Thank you for taking part in this consultation.

We will be running a series of drop-in sessions at locations across the city over the consultation period. You can find details on our website: **www.portsmouthccg.nhs.uk**



Urgent Care: the vision for the future

In the last decade, urgent care services have changed beyond all recognition.

In a relatively short period of time, people needing urgent health care – effectively, the times when you need help or advice quickly, but it is not a medical emergency – have seen walk-in centres spring up, GPs start to offer different types of ‘same-day’ clinics or consultations, the introduction of the NHS 111 phone service, and pharmacies extending the support and treatments they offer.

And what is the result of this big expansion in the options available? People still say they can’t see a GP as quickly as they would like, and some still wait longer for emergency care in A&E than they should.

Clearly, the NHS needs to take stock and develop urgent care services which give local people a better service, which is easier to access.

We want to deliver:

> Joined up care

So people get the care they need – all of it, not just some – without being ‘bounced’ to other services, or referred elsewhere, unless absolutely necessary.

> Simple choices

To make it easy for people to get the health care they need without having to worry about whether they are in the ‘right’ place or not, and to cut down the times that patients are handed over from one service to another.

> High quality care

Expert staff, backed up by modern equipment and technology, in the best possible premises.

> Specialist expertise

Strengthening A&E and ambulance services so that they have the skills and capacity to give people high-quality, life-saving care when they are in crisis.

That is what we want to see, and what local people have a right to expect from their NHS. This document will describe in more detail how the local health service believes it can begin to move towards that vision of better urgent care, and how you can contribute to that process.



Section 1

The case for change

Introduction

Up and down the country, the last decade has seen a revolution in the way that the NHS cares for people who need speedy treatment or advice, but who do not need emergency care.

Portsmouth is no exception – in 2005 the St Mary's Treatment Centre was opened, then in 2009 Guildhall Walk Healthcare Centre was opened, and in 2013 the Urgent Care Centre was set up at Queen Alexandra (QA) Hospital. Add in the start of NHS Direct, which then became the NHS 111 phone service, changes to the way GPs provide out-of-hours care, and the hours their surgeries open for, and the development of community pharmacies – it is clear that investment has piled in, and choice has been hugely expanded.

The only problem is... none of this seems to have quite worked as it was intended to. Pressure on A&E and GPs is still intense, and growing. People have grown increasingly confused as to which service they should use, and when. Patients end up being shuffled from one place to another, because services have become disjointed.

So, what now?

In 2016 the local NHS has a chance to look again at how to give local people the best possible urgent care services. During 2016 the contracts for the services currently run from the Guildhall Walk Healthcare Centre – the 'walk-in' service for all local people, and the GP practice which serves its 7,000 registered patients – will expire. The contracts cannot simply be left in place after that point – legally, they must be opened up to competition – and so the local NHS needs to consider how services can be improved.

NHS Portsmouth Clinical Commissioning Group (CCG), the organisation in charge of deciding how to spend more than £290m of NHS funding in the city each year, has already spent many months discussing the future of these services, both with clinicians and local people. As a result of those discussions, a preferred option has been developed:

To move the GP-led 'walk-in' service from its current location at Guildhall Walk, and relocate it so that it sits alongside the existing walk-in service at St Mary's Treatment Centre. This will create a single, enhanced walk-in service at St Mary's that includes both GPs and nurses, which treats both minor injuries and minor illnesses, which is backed up by modern facilities and diagnostic equipment, and which has well-established links with specialist hospital teams and ambulance crews.

In turn, this proposal has implications for those people who are registered as patients at Guildhall Walk – there is a section specifically for this group of people towards the end of the document (on page 27).

This would create a combined facility which would be better than either of the two options currently available – GPs and nurses would work alongside each other, they would have instant access to diagnostics such as x-rays, and instant links with emergency specialists at A&E, in a building which is modern and designed specifically for healthcare.

At the moment, some local people get some of those benefits, some of the time. This proposal is intended to give an improved urgent care service, for everyone, all of the time.

Better standards of care

The preferred option of creating a combined, enhanced walk-in centre at St Mary's Community Health Campus would secure many improvements.

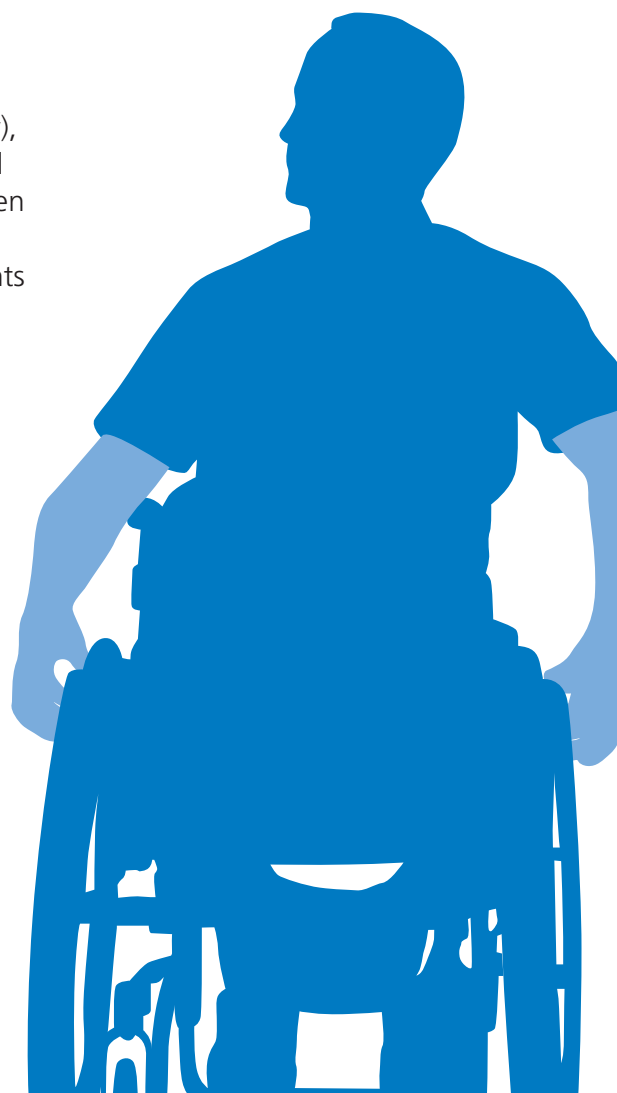
Patient care would be better

Today on Portsea Island there are two walk-in centres for urgent care. Both are good services with real strengths, but both also have limitations.

Guildhall Walk Healthcare Centre is led by GPs, is popular, and is centrally located. But... it has no diagnostic facilities, it is not a centre for minor injuries, the premises are dated and cramped, and ambulance crews do not take patients there as an alternative to A&E at QA.

St Mary's Treatment Centre does have diagnostic facilities (such as X-ray), modern premises, direct links with A&E, staff can treat both injuries and illness, and they can receive patients directly from ambulance crews when appropriate. But... the centre is nurse-led, with no GPs, and so cannot always treat the people who go there, and may even have to turn patients away if their health problem has previously been discussed with a GP.

Bringing the two services together at St Mary's Treatment Centre would give patients all of the benefits offered by the two services, but without the limitations.



With a combined, enhanced service at St Mary's:

- Everyone could be seen by either a GP or nurse, whichever was right for them
- Patients needing X-rays or other diagnostic tests would get the service they needed, on the same site – with no need to be sent elsewhere
- There would be a dedicated service, in a separate area, for children
- When diagnostic checks were needed, the IT systems would allow results to be shared with specialists at QA, instantly
- Nobody would be 'bounced' back to their GP, or another service, because they were in the wrong place – they would get right treatment or advice, then and there
- All walk-in urgent care would be delivered in modern, custom-built premises.

Choices would be simpler

At the moment, people who are worried about their health (or the health of someone they care for) have a wider range of choices than ever before. But this also means that people have to make more complicated decisions about their own care than ever before.

People are effectively being asked to make their own diagnosis, before they can choose which service they need. Today, someone in Portsmouth with a health concern needs to decide whether they need to go to A&E, wait for a GP appointment, contact the out-of-hours GP service, call NHS 111 for advice, visit a pharmacy, treat themselves at home, or head to a walk-in centre.

And if the choice is to go to a walk-in centre, there are further decisions to make. The person must decide whether their problem is 'only' an injury, for example, or whether it could instead be linked to an underlying illness. If it is thought to be simply an injury, that would rule out Guildhall Walk, but if the problem might be linked to an illness or condition then yet another choice is required between the GP-led service at Guildhall Walk, or the nurse-led service at St Mary's.

Nationally, NHS leaders are saying that the system has become too complicated, and locally the ending of the contracts for health services at Guildhall Walk offers the chance to start the process of simplifying the choices that people face.

Making the system simpler isn't just a nice ambition to have – it is fundamentally important. If people find it hard to decide which service to use, the risk is that they simply head to A&E as the default option. It is essential that the NHS does everything it can to relieve pressure on A&E staff so that they can focus on giving their expert care to people in the greatest need, and that means simplifying urgent care services so it is easier for people to make the right choice.

Resources would be used more effectively

With more of us living into our eighties, nineties and beyond, the NHS needs to use every penny it has wisely, to make sure that people have the care and support they need. Creating a combined, enhanced walk-in service on Portsea Island would allow the local NHS to use the limited resources it has more wisely.

Currently the NHS pays for Guildhall Walk Healthcare Centre to operate from a private, rented building – while at the same time there is plenty of empty space available in city buildings which are owned by the health service. The NHS must consider whether it is right to pay scarce public money to private landlords, when it has modern premises which are not being fully used – moving the walk-in service to St Mary's, and the GP practice to another building, would allow resources to be invested in developing services, instead of paying rent.

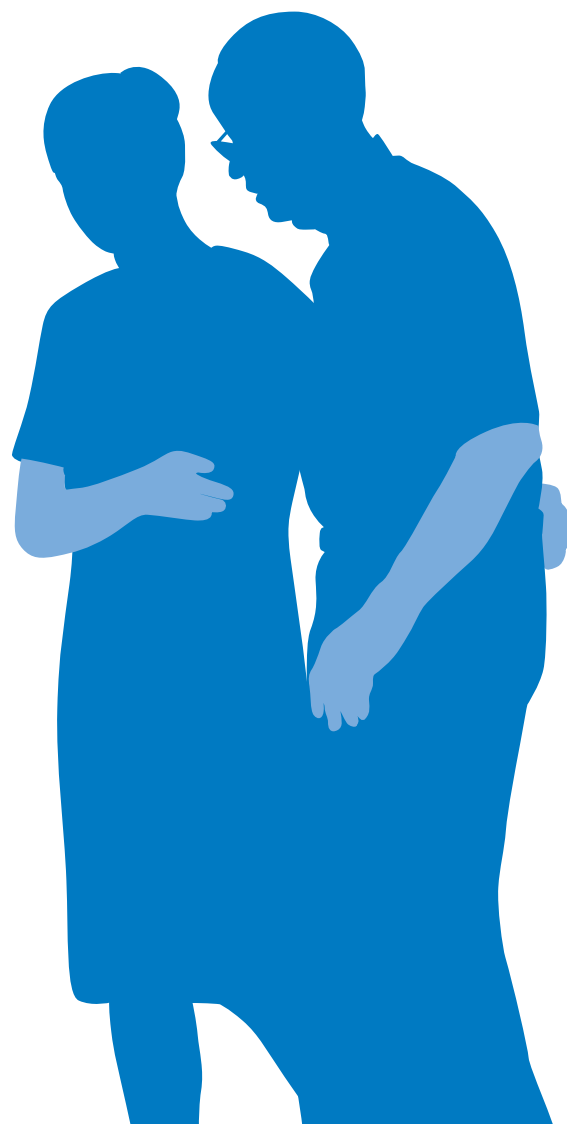
Creating a single, enhanced walk-in service would also allow the local health service to use the scarce supply of doctors and nurses more effectively, and make better use of the modern facilities – such as X-rays – which exist at St Mary's. As the NHS considers how to move towards seven-day services, it is essential to use all available resources as efficiently as possible.

Keeping NHS services on Portsea Island for the long term

Creating a combined, enhanced urgent care facility at St Mary's would reinforce the role of the site as a key, strategic site for the NHS, being a centre for healthcare within the city for years into the future.

In the early 2000s when most hospital services were moved to the new QA 'superhospital' many people – both inside the health service, and outside – fought hard to keep St Mary's as a centre for NHS services and that ambition remains. Hundreds of people already use services at St Mary's each week, and the range of services available there is still being expanded.

In the future, there will be far more NHS services set up in community-based centres - bringing together GPs, home visiting teams, mental health services, diagnostics, therapists and nurses, so that the vast majority of NHS care is available close to people's homes, instead of in major hospitals. These centres would offer patients a far more complete service if they included urgent care services too – whether a walk-in centre, 'rapid response' teams, or GPs offering same-day booked appointments – and St Mary's is a natural choice to be one of these community centres in the future.



The wider impact of change

Moving the GP-led walk-in service from Guildhall Walk to St Mary's appears, on the face of it, to be a relatively simple matter of moving the service about two miles down the road. However, the proposal is not quite that simple.

As well as the walk-in service, there is also a GP practice at Guildhall Walk Healthcare Centre, and the contract for this practice also runs out in 2016. Moving the walk-in service has clear implications for the GP practice, and so the NHS must also make decisions about the service that patients need, and where those services should be.

The CCG will be consulting separately with the 7,000 people, many of them young adults and students, who are registered at Guildhall Walk. That discussion will involve asking about where a new practice should be, the hours it should be open, and the way it should operate – for example, whether patients should have the chance to simply turn up and wait to see a doctor or nurse, or whether they should have to book appointments in the traditional way.

In this process, the CCG must try to strike a balance between securing a good service for the 7,000 people registered at the practice, and being fair to the other 200,000+ people registered with a GP in the city. At the moment, access to GPs and practice nurses is not evenly spread across the city.

GP practices like the Guildhall Walk Healthcare Centre were set up through a national policy, not through local decisions. The way that the government set up the centres means that the local NHS has to pay a premium rate to the practice so it can afford to offer seven-day, 12-hour access to its patients. The other 30 surgeries in the city, however, are funded less generously and so can only offer more traditional opening hours.

In short, the local NHS is paying extra to one practice to provide its 7,000 patients with much better and more convenient access to their GP than can be enjoyed by more than 200,000 residents who are registered at other city practices. The NHS must address that basic unfairness. Ideally, of course, every practice would be able to open seven days a week but that would need dozens of GPs, and millions of pounds – resources which simply do not exist at the current time. The local NHS is talking to city GPs and working to improve access for everyone, not just a small group, in line with the national drive towards seven-day services.

Section 2

Improving urgent care: what we have learned

Over the last 18 months the CCG has sought the views of as many people as possible – both members of the public, and clinicians – to learn more about what people think of the current set-up, how and why they make decisions when they need urgent care, and what changes they think could improve services.

These views have led the NHS to the position it holds today, that its preferred option to improve urgent care is to combine the city's two walk-in services at the St Mary's site.

Urgent care – overall messages

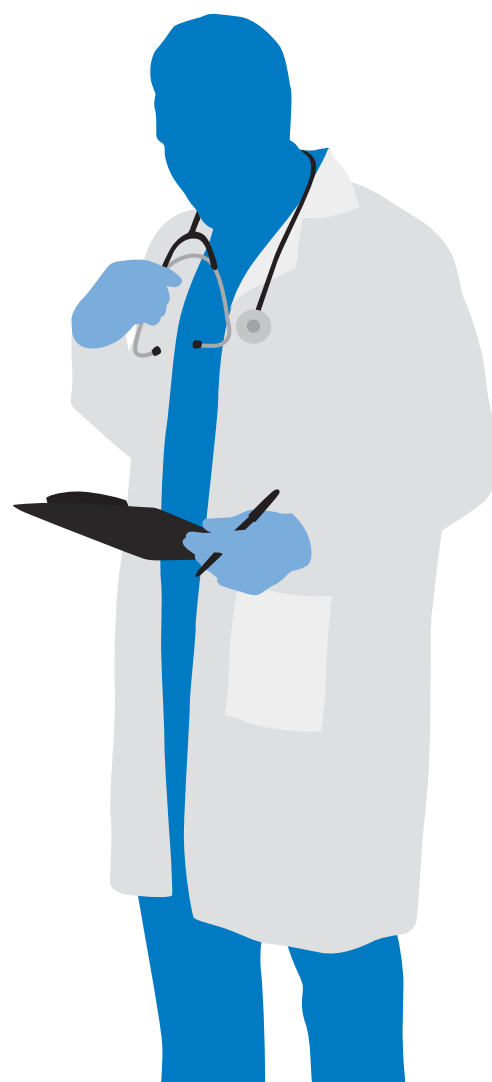
The CCG has carried out three significant surveys focussing on urgent care services, engaging with residents in Portsmouth, Fareham, Gosport, and South Eastern Hampshire. Each survey was different but the intention was to learn more about the decisions people make when they think they need urgent care, why they make those decisions, and how services could be improved.

In terms of urgent care generally, there were several clear themes:

- People are confused. For example, only 25% of city respondents said that they knew the differences between St Mary's Treatment Centre and Guildhall Walk walk-in services – and in reality even fewer still could actually explain the differences correctly
- People are finding it hard to remain well-informed. For example, almost one-third of people don't know that GPs offer same-day appointments
- Being offered simple choices – even if that might mean fewer choices – is felt by many to be a good way of improving the urgent care system
- GPs are the preferred, trusted option for minor illnesses, but for minor injuries people look to walk in facilities
- Location is important, although almost 60% of city survey respondents think travelling up to 3–4 miles between home and a walk-in centre is reasonable.

There was also engagement with GP practices. GPs endorsed the idea of keeping the minor injury walk-in service at St Mary's, but were less convinced that a nurse-led minor illness service on that site is the best solution – a GP-led service at St Mary's, however, was felt to have more value for patients, and to be more effective.

GPs said that they wanted the capacity to care for their own patients in normal working hours, but some had concerns whether current primary care services (by which we mean services delivered by GPs and practice



nurses, in community settings such as local surgeries) were keeping pace with demand. Given that, practices recognised that it was valuable to retain a GP-led walk-in service in the city, because that would help them to meet patient needs until a wider review of primary care found new ways to ensure that patients can access GPs seven days a week in the future.

Urgent care – specific feedback

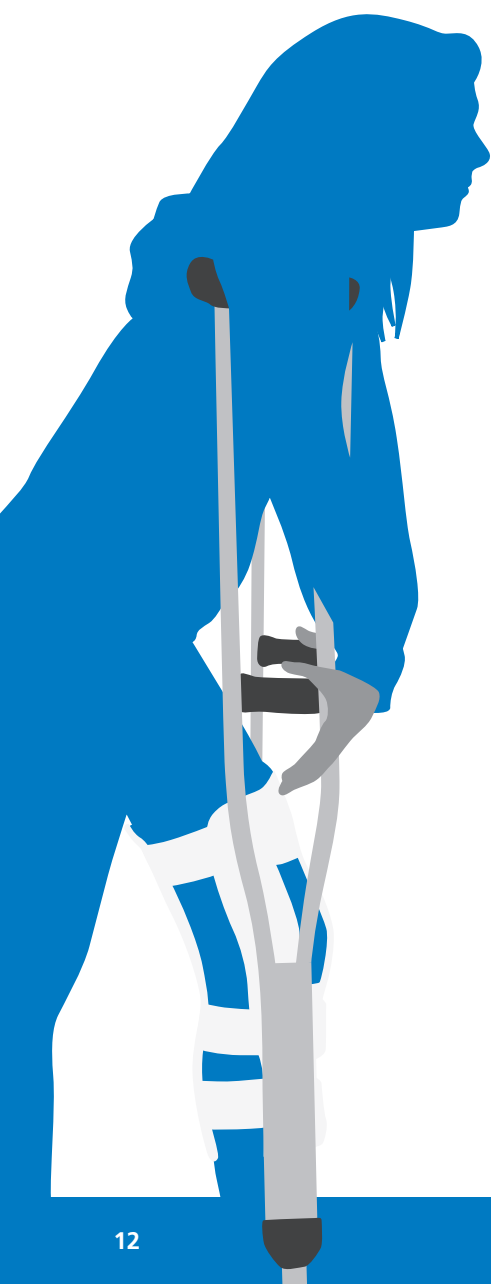
As well as asking for general feedback about urgent care, the CCG has also been asking people what they think about the specific proposal to move the walk-in service from Guildhall Walk to St Mary's. Again, this engagement work produced some clear themes in terms of the feedback received:

- Asked about the most important factors for the NHS to consider when deciding whether to relocate the walk-in service from Guildhall Walk to St Mary's approximately two-thirds of respondents cited the quality of care as the biggest concern, with access also being important to people – 65% highlighted travelling distance, and 58% highlighted the importance of having a service near the city centre. Approximately a third of respondents stated the most important factor was ensuring best possible value for public money, or bringing GPs, nurses and diagnostics together in one place
- When asked for the single most important factor to be considered, access was key – a quarter chose a city centre location as the prime consideration, and a further 22% chose travelling distance
- When asked to raise concerns about the possible move, more than half (55%) expressed doubts that St Mary's had the capacity to cope with the extra activity, 40% feared a reduction in quality, and 39% said they would have further to travel

The CCG also approached the independent Healthwatch Portsmouth to ask whether the organisation could carry out some additional engagement. The conclusions of Healthwatch following its engagement work included:

- There were concerns about access from the western side of the city to St Mary's, and further concerns over the adequacy and affordability of car parking facilities at St Mary's
- Some respondents questioned whether a single facility would have the capacity to respond to current and future demand, and whether that could lead to increased waiting times at St Mary's
- Concerns exist about the quality and range of services that would need to be provided in a combined walk-in facility, including crisis and mental health services.

This initial engagement has allowed the CCG to identify the main questions which people have raised up until this point, in relation to a proposal to create a combined, enhanced walk-in service at St Mary's.



The questions are:

“Would there be enough capacity at St Mary’s to cope with a larger service?”

The CCG has sought assurance from the current provider of the service that St Mary’s has the capacity to cope with a larger service – both in terms of physical space, and in terms of staffing levels. On both counts we have received reassurance - confirmation that the building can easily be adapted to provide the additional space required to add more treatment cubicles, and that staffing will be managed flexibly to match the demand.

“What about public transport to St Mary’s?”

St Mary’s Community Health Campus is a strategic health site on Portsea Island. It houses a number of important health services, not just the Treatment Centre, and hundreds of people already use the site every week for health care. It is accessible, with regular bus services right next to the site throughout the day and at weekends, and people already access the minor injuries service from across the whole city, including the western side. However, the CCG acknowledges there are fewer public transport links than the city centre, and so is seeking advice from Portsmouth City Council regarding the possibility of changes to existing bus services serving the Milton/St Mary’s area, and would seek discussions with transport providers to explore possible options for bus services.

“Would there be enough car parking at St Mary’s?”

Pay and display car parking facilities are available on site (258 spaces) although clearly the perception is that the car park is regularly very busy, making it difficult for people to park. A proposal has been drawn up by Solent NHS Trust to put a multi-storey car park facility on the site, which would be subject to planning consent, as part of wider plans for the NHS to bring more services together at St Mary’s.

Solent NHS Trust has a Parking Policy that prioritises the parking needs of patients, visitors and staff who need to use a vehicle to perform their duties. Staff working at St Mary’s are currently encouraged to use an additional 60 leased spaces which have recently been made available at the Kingston Prison site, and this is expected to have a positive impact for patients.

Whilst car parking is an important issue it should be noted that the demand for GP-led walk-in services is likely to be greatest on Saturdays, Sundays, and the hours after GPs surgeries are closed. At these times there is significantly less demand for parking spaces at the St Mary’s site.

“Why propose to take facilities away from the city centre?”

Taking both the GP practice and the walk-in service away from the city centre at the same time would be a major change. Therefore, the preferred option is to keep the GP practice near to the city centre, but located in existing empty NHS space nearby, rather than a privately rented building. There are also other GP practices available in the city centre too, some of which have signalled their ability to register new patients and the area is well served by pharmacies which can offer expert advice on and treatment for a range of minor illnesses. We will further promote the greater use of pharmacies generally, in line with our Pharmacy First scheme.

“Won’t waiting times increase if all walk-in services are combined at St Mary’s?”

Currently the two walk-in services work to different waiting times targets – at Guildhall Walk patients must be seen within two hours, at St Mary’s the target is four hours, although in reality more than two-thirds of patients are actually seen within two hours at St Mary’s, and few wait for four hours.

It is the case that a combined service at St Mary’s would be monitored against the four-hour target, but the capacity for treating people would be no less than it is today, across two sites. Indeed, integrating the two services should allow more flexible use of the workforce, which may reduce waiting times for patients.

“What will students do if the services move?”

Students will be extended every opportunity to take part in the formal consultation process, as will the University of Portsmouth, which the CCG is aware has plans to expand its centrally-located student accommodation. Plans have been discussed with University representatives – their preference would be to retain a walk-in service in the city centre but they are willing to work with the NHS to ensure students, as a fundamental first step, register with a local GP of their own, and are informed regarding the many options available to them for urgent care.

“Why change at all?” (*“If it ‘ain’t broke, why fix it?”*)

As explained earlier in this document, the number of urgent care services in Portsmouth has expanded considerably in the last 10 years or so, but without necessarily delivering the results we would all want to see – particularly in terms of reducing pressure on GPs, and A&E. The local NHS now has the opportunity, when the contract for NHS services at Guildhall Walk expires in 2016, to rethink how these walk-in services work as well as aiming to give all patients across the city higher quality, more accessible primary care more generally. In an ideal world everyone would already be able to see a GP seven days a week, but neither the doctors or the funding for that exist at the moment. Instead, the NHS needs to use all the resources it has to begin to work towards that goal. Any proposals for changes are not a reflection on the service, or the staff, at Guildhall Walk – it is widely recognised as a good and popular service, albeit one that would be subject to periodic contract review.

“What about the impact on the vulnerable patients?”

It is recognised that Guildhall Walk Healthcare centre caters for vulnerable patient groups, and the CCG fully accepts that specific arrangements must be made to continue – and in fact improve – the care available. The CCG has already been generously supported by the Salvation Army, and PUSH (helping those with substance misuse problems) to begin to understand the needs of some of these vulnerable groups better, and more detailed engagement work will continue regardless of the outcome of this public consultation. Maintaining a service specifically tailored for these groups is a non-negotiable commitment made by the CCG.

Section 3

Improving urgent care: other key factors

The national context

There is a national consensus that the systems of urgent care which have grown up across the country need revisiting, and that the focus on promoting an ever-widening range of available choices may have gone too far.

The 2014 Urgent and Emergency Care Review set out the need for “co-location of community-based urgent care services in co-ordinated Urgent Care Centres”, as the NHS in Portsmouth is now proposing with the preferred option of a combined walk-in service at St Mary’s Hospital.

The 2014 Review also recommended the development of combined Urgent Care Centres to provide “access to walk-in minor illness and minor injury services” – again, just as is now proposed in Portsmouth. The review also advocated placing these urgent care centres next to hospital facilities, as would be the case at St Mary’s.

These conclusions followed on from the 2013 findings of the NHS medical director Professor Sir Bruce Keogh, in his Phase 1 report into Transforming Urgent and Emergency Care Services in England. His verdict was:

“Previously we have tried to deal with increasing demand by developing new facilities. Although well-conceived and well-intentioned, these have created additional complexity and confusion, not just for patients but also for those working in the NHS.

“Starting from scratch, nobody would design the current array of alternatives and their configuration. A short history of the last 30 years reveals that we have opened ‘walk-in centres’, ‘minor injury units’, ‘urgent care centres’ and a vast range of similarly named facilities that all offer slightly different services, at slightly different times, in different places.

“A telephone service, NHS Direct, was introduced in 1998, and last year was replaced by NHS 111. Even the simple task of ringing a GP practice to request an appointment can result in a frustrating assault course on a telephone keypad.

“All the public want to know is that if an urgent care problem ever arises, they can access a service that will ensure they get the right care when they need it. They do not want to decide whether they should go to a Minor Injuries Unit, a Walk-In Centre or A&E, or whether they should ring their GP, 111 or 999. We shouldn’t expect people to make informed, rational decisions at a crisis point in their lives: the system should be intuitive, and should help people to make the right decision. We have created a complicated system which in itself has contributed to increasing demand by sending people around various services, confused about who to call and where to go.”



More recently, at the 2015 Annual NHS Conference, NHS England Chief Executive Simon Stevens stated:

“We need to redesign the way our urgent care system works. The current system is confusing the public. We have to do a better job of joining it up. We need to simplify the urgent care ‘spaghetti’ so we can manage the demands being placed on us.”

The CCG would fully endorse the direction of travel nationally, and has developed its preferred option – to bring the city’s two walk-in services together at St Mary’s Treatment Centre – with the national policy direction in mind.

The Portsmouth ‘Blueprint’

The one certainty which always faces the NHS is that change is never far away. With people living longer and longer lives, new treatments being developed, patient expectations rising all the time, and demand growing faster than funding, it is simply not realistic to expect the NHS to continue operating in much the same way as before, and still be able to cope.

In addition to those pressures, there are also real challenges in terms of the workforce. Nationally, and locally, there are shortages of many key staff, including GPs, A&E specialists, and experienced nursing staff.

The answer cannot be ‘more of the same’, and so locally health and social care leaders are developing the Portsmouth Blueprint. This new approach will set out a future which moves away from the traditional model of small-scale, individual GP practices working independently, separate from community and mental health services, and local social care.

Instead, the Blueprint makes the case that primary care must be delivered at a larger scale and that the traditional barriers between primary care, community and mental health care, and social care, must be broken down. In practical terms this will mean the development of primary care ‘hubs’, which physically bring together a far greater range of services, including same-day access to primary care, home-visiting, diagnostics, community beds, and health promotion / wellbeing services. St Mary’s, as a key strategic site for the NHS in Portsmouth, offers an ideal opportunity to be the home of one of these hubs in the future and so an enhanced walk-in service there fits the bigger picture of how care will be delivered closer to people’s homes in the years ahead.

The options appraisal

The NHS only settled on its preferred option of creating a combined walk-in service at St Mary's after spending approximately 18 months talking to local clinicians, and engaging with local patients, to ensure that any proposed solution was the best possible option for city residents. Clearly, whenever any decision is reached there will be some people who feel disadvantaged by the change and others who feel that they benefit, but the NHS has tried to keep in mind the overriding objective of delivering the best possible service for Portsmouth patients.

In broad terms, the choice came down to the following four options:

> Option 1

No change - Leave both the walk-in service, and the GP practice, at Guildhall Walk

> Option 2

Move the walk-in service to St Mary's, retaining the GP surgery at Guildhall Walk

> Option 3

Move the walk-in service to St Mary's, move the GP surgery to alternative NHS space in city centre

> Option 4

Move the walk-in service to St Mary's and close the GP surgery

The NHS conducted a formal 'options appraisal' of each of these four alternatives, to see which one should be chosen as the preferred approach, before a period of public consultation was carried out. This process set out the benefits, and the challenges, of each option and you can see a summary of this on pages 18–21.

Option 1

No change

GP-led walk-in activity and GP practice to be delivered from its current location (Guildhall Walk Healthcare Centre)

Issues

- Crucially the CCG is required, by law, to open up the contract for the GP service to a competitive procurement process, and so is not able to simply allow the contract to roll on
- Urgent care system remains as complex as now
- Confusion as to the difference between the Guildhall Walk and St Mary's would remain
- Guildhall Walk still has no access to diagnostics, limiting improvements to the quality of patient care
- Could make the situation more complicated. In the last year the CCG has conducted a separate procurement exercise for services across Portsmouth and south east Hampshire – including both planned operations and a nurse-led walk-in service at St Mary's. This contract also included agreeing to fund a GP-led walk-in service in the city, but did not stipulate where that service should go, in advance of public consultation. If that service was located at Guildhall Walk, it would raise the possibility of a GP-led walk-in service run and staffed by one organisation sharing a building with a GP practice run and staffed by an entirely separate group. Alternatively, if the walk-in service was elsewhere in Portsmouth (except St Mary's) then the fragmentation of services would remain.
- Empty space in NHS buildings elsewhere remains unused
- Least financially beneficial, reducing scope to invest in improved access to primary care for all areas of the city, to reduce current unfairness
- More difficult to develop new models of care for urgent and primary care.

Benefits

- The majority of patients registered at Guildhall Walk live within a one mile radius of the premises. This option would ensure those patients can still access services within close proximity to their residence
- Patients registered at Guildhall Walk will not have to register at another practice within the city
- Students would continue to have direct access to both services and would therefore have a better NHS service than many other residents in Portsmouth
- Access to a walk-in service in a city centre location would be retained.

Annual cost

- Anticipated cost: £1.42m per year
- Anticipated saving (compared to current costs): £0.15m

Public consultation: NHS services at Guildhall Walk

You can also respond to the consultation online –
please visit www.portsmouthccg.nhs.uk/guildhallwalk

Some details about you

All responses are entirely anonymous, but we would like to ask for a few details about you, so we can find out a little more about the people we are hearing from.

1. Gender: Are you...

- Female Male Prefer not to say

2. Age: Are you...

- 24 or under 25–34 35–44
 45–54 55–64 65–74
 75 or older

3. Where do you live? (postcode areas)

- PO1 PO2 PO3
 PO4 PO5 PO6
 PO7–PO11 PO12–PO16
 Other (please specify)

4. Do you have dependent children, or provide care for someone?

- Yes, I have dependent children
 Yes, I am responsible for caring for a partner / friend / relative
 Yes, I have dependent children and I am responsible for caring for a partner / friend / relative
 No

5. Do you consider yourself to have a disability?

- Yes No Prefer not to say

6. If 'yes', please tell us what your disability is. (You may select as many options as applicable)

- Learning disability / difficulty
 Long-standing illness
 Mental health condition

- Physical impairment
 Sensory impairment
 Prefer not to say
 Other (please specify)

7. Would you describe your sexuality as:

- Heterosexual Bisexual
 Gay man Lesbian / gay woman
 Prefer not to say

8. Would you describe your ethnic origin as:

- White, British Any other black background
 White, Irish Chinese
 Any other white background Mixed: white and black Caribbean
 Indian Mixed: white and black African
 Pakistani Mixed: white and Asian
 Bangladeshi Any other mixed background
 Any other Asian background
 Caribbean Prefer not to say
 African

9. Would you describe your religious beliefs as:

- Buddhism Christianity Hinduism
 Islam Judaism Sikhism
 None / Atheism
 Prefer not to say
 Other religious belief (please specify)

Questions 10 to 13 are for walk-in patients, but if you are a registered patient at Guildhall Walk, you may answer these questions too.

Your opinions on the preferred option for NHS walk-in services in Portsmouth.

The first two questions (10,11) seek to understand what you believe to be the advantages and disadvantages of the preferred option for NHS urgent care walk-in services. The next two (12,13) look at what you think will be the most important things that the NHS must consider when making a decision. The more specific the answer is, the more useful it will be.

- 10. The CCG’s preferred option is to relocate the ‘walk-in’ service from Guildhall Walk to create a combined, enhanced walk-in centre at St Mary’s Hospital. What do you think are the potential *benefits* of such a proposal?**

- 11. The CCG’s preferred option is to relocate the ‘walk-in’ service from Guildhall Walk to create a combined, enhanced walk-in centre at St Mary’s Hospital. What do you think are the potential *disadvantages* of such a proposal?**

- 12. What do you think are the most important factors for the CCG to consider when deciding whether to create a single, combined walk-in service at St Mary’s Treatment Centre?**

-
13. Are there any *other* factors, not addressed in the consultation document, which you think must be considered by the CCG before any decision is made?

Continuation space if required



Questions 14–17 should only be answered by people who are registered as patients at Guildhall Walk Healthcare Centre

Your views on the proposed new GP surgery in central Portsmouth.

These questions are intended to get your views on where a new surgery might be located, and how it might be run.

14. The preferred option for the future of the GP practice at Guildhall Walk is to open a new practice in another location, near to the city centre, in a building already paid for by the NHS. The most likely options are Somerstown Central, or the John Pounds Centre. Would your preference be:

- Somerstown Central
- John Pounds Centre
- Don't know / don't mind

15. To what extent do you agree that a new GP practice should offer its patients a 'walk in and wait' service, rather than relying on booked appointments?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree
- Don't know

16. In terms of the opening hours of a new practice, which two of the following options would be most useful to you personally.

- Early mornings (Monday–Friday)
- Evenings (Monday–Friday)
- Saturday mornings
- Saturday afternoons
- Sundays

Other factors to be considered

This section is intended for you to raise any other issues which you feel are important.

17. Is there anything else, not covered by the previous questions, that the NHS should consider regarding the preferred option of moving the GP practice away from Guildhall Walk, and into another central location in Portsmouth?

Please send your completed survey, by Friday 19th February 2016, to us at:

Freepost NHS PORTSMOUTH

(You do not need to add any other address details (road, town, postcode) as these are not required.)

Option 2

Move walk-in to St Mary's, retain GP surgery at Guildhall Walk

GP-led walk-in activity provided at St Mary's Treatment Centre, and GP practice delivered from its current location (Guildhall Walk Healthcare Centre)

Issues

- Seeking to retain the GP practice at Guildhall Walk would not allow the better use of the empty NHS space within the city and therefore would miss an opportunity to optimise the use of estates already for paid for by the NHS
- Could actually worsen the cost of paying for empty space as the delivery of primary medical care services in isolation, without the provision of a walk-in centre, would create additional empty space within Guildhall Walk, representing poorer value for money
- Patients living on the west side of the city would feel that access to St Mary's is more difficult than to the city centre.

Benefits

- Simpler urgent care system for patients to navigate and no confusion over which walk-in service to use
- This option would give all walk-in services access to a wider array of diagnostics and tests at St Mary's, improving the quality of patient care
- Patients would no longer be re-directed to the other walk-in centre (or back to their GP) in the city as they had attended the 'wrong' facility
- The majority of patients registered at the Guildhall Walk GP practice live within a one mile radius of the premises. This option would ensure those patients continue to have access to services within close proximity to their residence
- Patients will not have to register at another practice.

Annual cost

- Anticipated cost: £1.31m
- Anticipated saving: £0.27m



Option 3

Move walk-in to St Mary's and move GP surgery to alternative NHS space in city centre

GP-led walk-in activity provided at St Mary's Treatment Centre, and GP practice delivered from void NHS space within the city (eg Somerstown Central)

Issues

- Patients currently registered at Guildhall Walk GP surgery would need to travel to another location within the city centre to receive primary care services
- This may or may not be further for patients to travel (Somerstown Central is between $\frac{1}{4}$ - $\frac{1}{2}$ mile from Guildhall Walk)
- Patients living on the west side of the city may find access to St Mary's is more difficult than to the city centre.

Benefits

- Simpler urgent care system for patients to navigate and no confusion over which walk-in service to use
- This option would give all walk-in services access to diagnostics at St Mary's, improving the quality of patient care
- Patients would no longer be re-directed to the other walk-in centre (or back to their GP) in the city as they had attended the 'wrong' centre
- The majority of patients registered at Guildhall Walk GP practice live within a one mile radius of the premises. This option would ensure those patients continue to have access to services within close proximity to their residence, albeit not at Guildhall Walk
- Patients will not have to register at another practice.

Annual cost

- Anticipated cost: £1.18m
- Anticipated saving: £0.39m

Option 4

Move walk-in to St Mary's and close GP surgery

GP-led walk-in activity provided at St Mary's Treatment Centre, and GP practice delivered from existing practices in the city (decommission Guildhall Walk Healthcare Centre Practice)

Issues

- This option would limit the choice available for patients when choosing to register with a GP practice in Portsmouth
- This option may be unwelcome for vulnerable groups of patients who would need to register at another practice within the city, especially if they experience issues around anxiety or general distrust of healthcare providers
- This option may cause concern that patients may not easily be able to register with another practice
- Patients living on the west side of the city may find access to St Mary's is more difficult than to the city centre.

Benefits

- Simpler urgent care system for patients to navigate and no confusion over which walk-in service to use
- This option would give all walk-in services access to diagnostics at St Mary's, improving the quality of patient care
- Patients would no longer be re-directed to the other walk-in centre (or back to their GP) in the city as they had attended the 'wrong' centre
- This is in line with the CCG's vision to support the development of larger, more sustainable practices.

Annual cost

- Anticipated cost: £1.22m
- Anticipated saving: £0.35m



Section 4

Supporting information

How the two walk-in centres compare

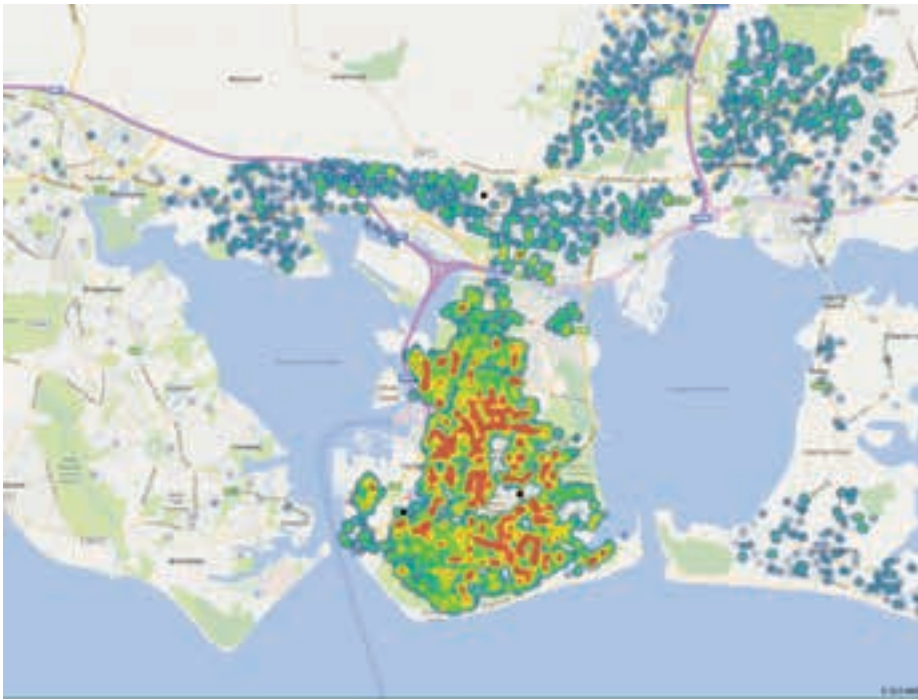
St Mary's Treatment Centre

Based on 2014/15 data St Mary's sees around 44,500 walk-in attendances a year (minor injuries and minor illnesses); around 31,000 related to patients registered with Portsmouth GP practices, the rest registered with GP practices outside the city. Most (two thirds) attendances are for minor injuries.

The first map opposite indicates the 2014/15 activity for minor injuries linked to patients' home post codes. It demonstrates that the activity is fairly evenly distributed throughout Portsea Island, but considerably fewer visits from patients who live closer to Queen Alexandra Hospital in the north of the city. It also shows that significant numbers of patients living on the western side of the island are currently accessing St Mary's Treatment Centre to receive care for minor injuries.

The second map opposite provides the same information but for minor illness. This shows that fewer people to the west (albeit still notable numbers) access St Mary's for this service, than for minor injuries.



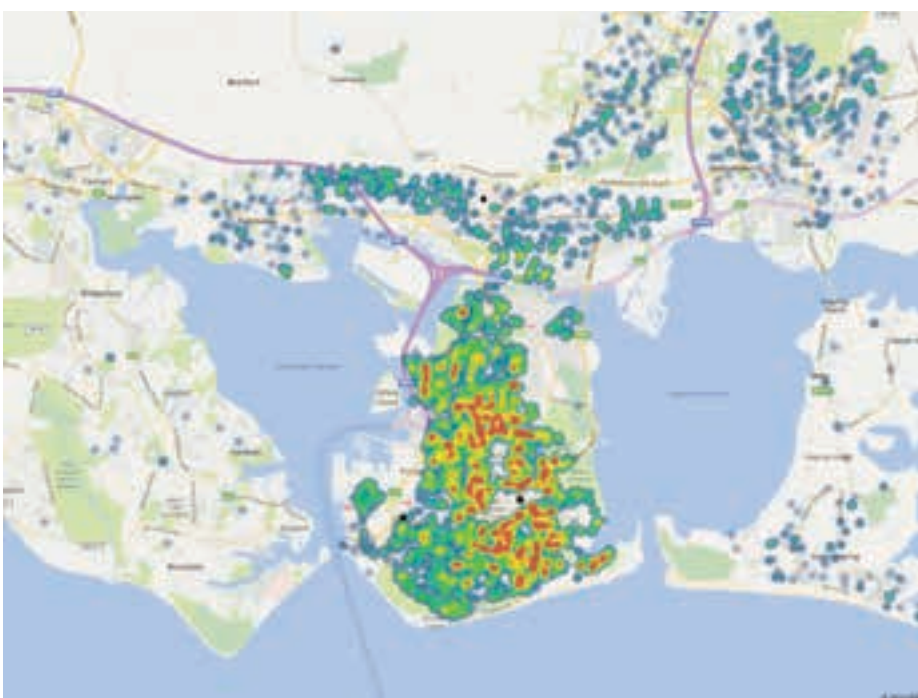


Activity for minor injuries linked to patients' home post codes

Activity (Sum)



SCW CSU BI & Analytics Report 1878
 Data Source: SUS PbR
 EM / Directly from Care UK
 ©2015 HERE



Activity for minor illness linked to patients' home post codes

Activity (Sum)



SCW CSU BI & Analytics Report 1878
 Data Source: SUS PbR
 EM / Directly from Care UK
 ©2015 HERE

Guildhall Walk Healthcare Centre

Walk in activity

Based on data from 2014/15 (and excluding patients who are registered at Guildhall Walk), there are around 22,500 attendances at the walk-in centre each year. Around 12,500 of these attendances are for patients registered with another GP practice within Portsmouth, while around 10,000 attendances are for patients registered with GP practices outside the city. All attendances are for minor illnesses, with approximately 40% occurring during core GP hours (08:00–18:30, Monday-Friday).

The map below shows the 2014/15 activity for Guildhall Walk, linked to patients' home post codes. It shows that most patients attending the walk-in service live within a mile of the facility.

The table on the next page shows the top 20 conditions reported by patients attending the walk-in centre. Many would be suitable for a nurse-led consultation, or could be managed by pharmacists, rather by a GP (with the associated extra cost for the NHS, and the use of such an expert, and relatively scarce, staff resource).

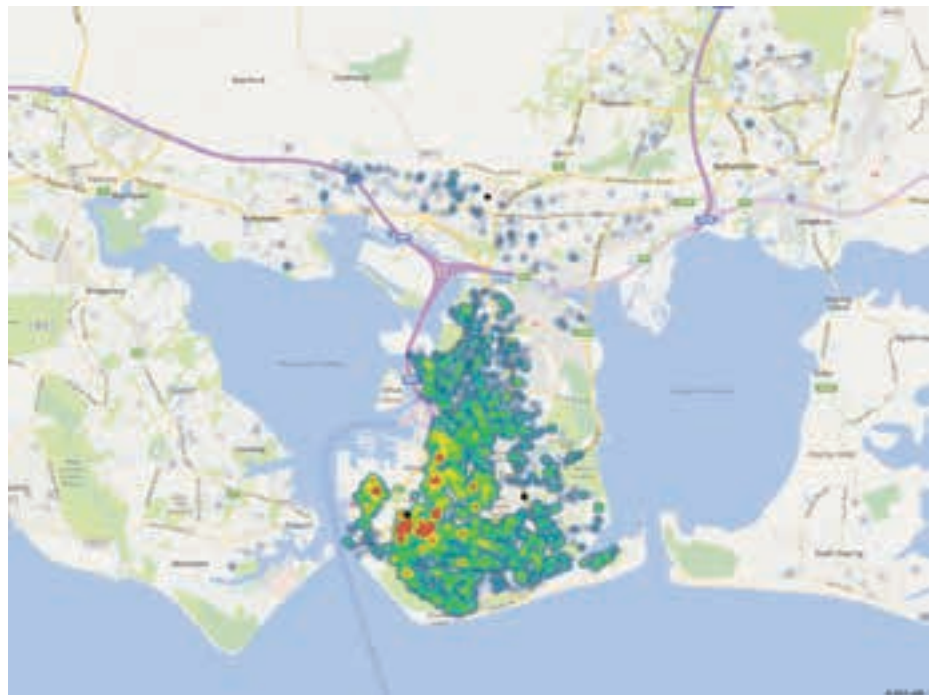
Activity for Guildhall Walk, linked to patients' home post codes

Activity (Sum)



Low

High



SCW CSU BI & Analytics Report 1878
Data Source: SUS PbR
EM / Directly from Care UK
©2015 HERE

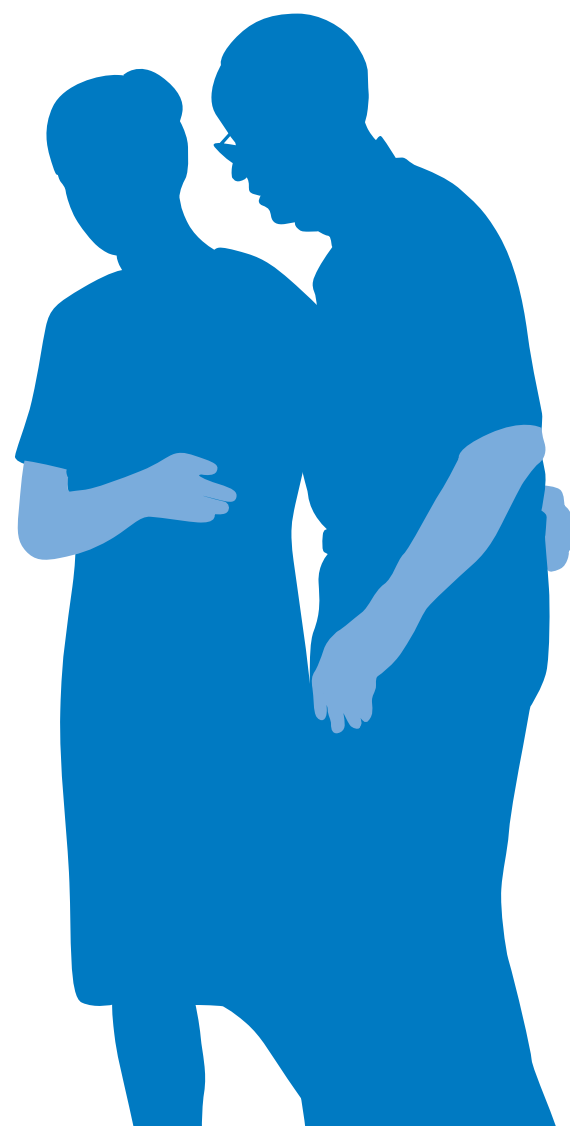
Condition	Count	Percentage
Upper respiratory tract infection	1,187	9%
Acute tonsillitis	713	5%
Skin/subcutaneous infections	695	5%
Lower respiratory tract infection	655	5%
Urinary tract infection	584	4%
Requests for medication	425	3%
Otitis media (middle ear infection)	383	3%
Sore throat	364	3%
Viral infection	318	2%
Cough	307	2%
Otitis externa (outer ear inflammation)	298	2%
Abdominal pain	236	2%
Acute conjunctivitis	219	2%
Cystitis	195	1%
Earache symptoms	188	1%
Advice about treatment given	172	1%
Rash/non-specific skin eruption	165	1%
Disorders of eye and adnexa	161	1%
Backache, unspecified	158	1%
Oral/salivary/jaw diseases	156	1%

Top 20 conditions reported by patients attending the walk-in centre

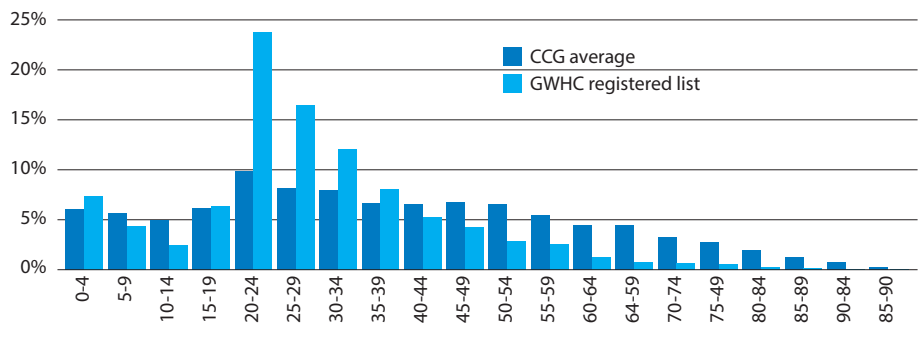
Registered patients

In addition to the walk-in service, Guildhall Walk also provides primary medical care services to a registered list of circa 7,000 patients. It is the only surgery in Portsmouth which is contracted and funded to provide services between 08:00–20:00, 365 days of the year – those extended hours are possible because the centre is funded to run the walk-in service between those same hours each day. This is very convenient for registered patients but that does present an issue with regards to fairness, compared to the services available to the remaining 200,000 registered patients in Portsmouth.

The registered list contains a large proportion of young adults (many of them university students), especially between the ages of 20–34, and relatively few patients aged over 50. The chart overleaf shows how significantly the age characteristics of the list differs from the city as a whole.

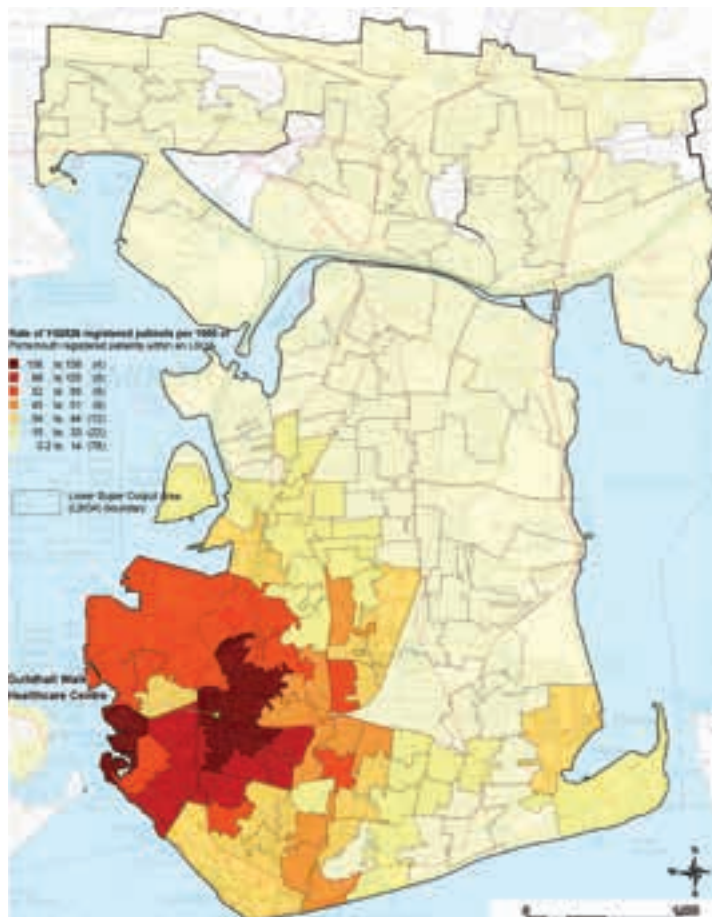


**Age distribution comparison:
GWHC and CCG average**



The map below shows where patients registered at Guildhall Walk live. As would be expected the majority of patients live within a mile of the premises, although the vast majority of patients living near the healthcare centre are registered with other practices within the city – most patients living in Charles Dickens and St Thomas wards (where the practice is located) are registered with other practices.

**Population density, Guildhall Walk
Healthcare registered patients
as at April 2015**



Crude rate of practice registrations per 1,000 of Portsmouth registered patients within an LSOA.
Source: Numbers of patients registered at a GP practice, Health & Social Care Information Centre
© Crown Copyright and database right 2015. Ordnance Survey 100019971.
Contains National Statistics data

Section 5

The future of the GP practice

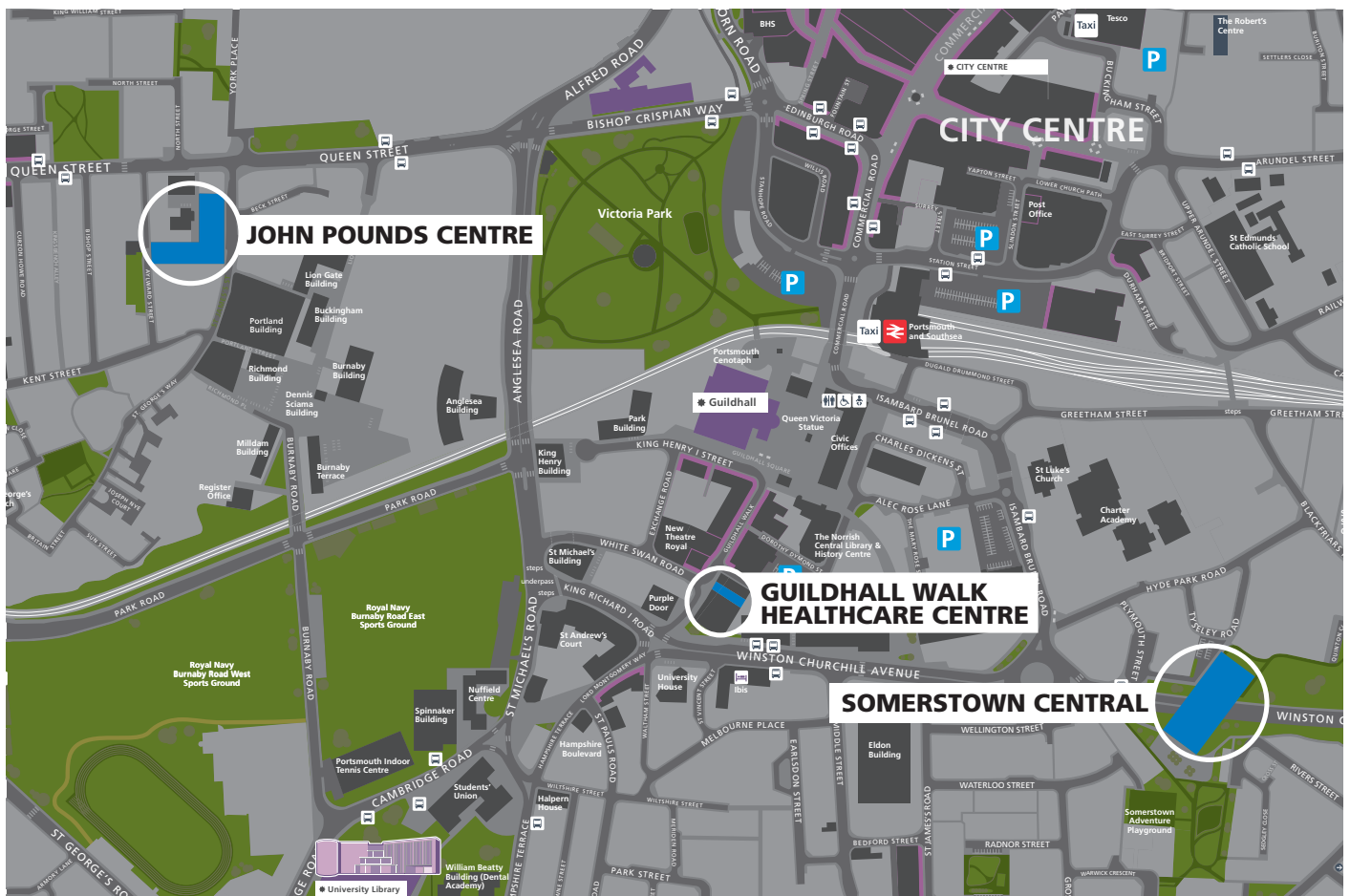
This section (5) is only relevant to those people who are registered as patients at Guildhall Walk Healthcare Centre

Introduction

NHS Portsmouth Clinical Commissioning Group (CCG) is reviewing the future of NHS services currently provided at Guildhall Walk Healthcare Centre. That review includes not only the 'walk-in' minor illness service for people not registered as patients there, but also the future of the GP practice itself.

The contract for both of these services ends in 2016. The CCG does not have the option of simply letting those contracts continue – it is legally obliged to begin an open competition (called a procurement process) to allow other potential providers to bid to take the services over, and a failure to do that would be against the law.

Therefore, decisions must be made about the future of the GP practice where you, and approximately 7,000 other people, are registered.



Background

In 2009 Guildhall Walk Healthcare Centre was opened. It was a 'Darzi centre' – part of a national drive to open up 'walk-in' centres for people who were not registered with a GP practice of their own.

In Portsmouth, this walk-in centre was also combined with a GP practice, which was given extra freedoms to be able to register patients from across the local region – not just the immediate surrounding area. The company running the practice was also contracted to offer 'open access', so that registered patients did not always have to book appointments in advance, but could simply turn up and wait to see a GP if that suited them better.

Given all of these differences, the funding for the healthcare centre has always been different from other GP practices in the city. Essentially the local NHS gives the company which runs the practice more money, per patient, than it gives to any of the other city surgeries to reflect the different services it has to provide – most notably that it must provide a walk-in service from 8am-8pm every day.

The result is that the 7,000 patients at the Guildhall Walk GP practice enjoy far better access to GPs and nurses than can be provided by all other practices for the other 200,000+ city residents. That means that the registered patients at Guildhall Walk get a very convenient service, but this comes at a cost to the wider local NHS, which funds the enhanced service.

The healthcare centre is also specifically funded by the local NHS to provide a dedicated service for some vulnerable groups of patients, such as people who are homeless, or who have problems with drugs or alcohol.

Reasons for change

As explained on page 27, the CCG cannot simply leave the contracts for health services at Guildhall Walk in place – that is not legally possible.

So, the end of those contracts gives the local NHS an opportunity to see whether improvements can be made to services, and whether resources can be used more effectively. When making decisions about the future of the GP practice at Guildhall Walk, the NHS must consider the following:

Seven-day access for all: there is a national drive to move primary care services (although not necessarily every individual GP surgery) towards a seven-day service. That will take a great deal of resources – both in terms of money, and skilled workforce – and the CCG will need to make the resources available in the city go far further than is the case now if this ambition is to be achieved.

Fairness: the CCG acts on behalf of everyone in the city, and must give everyone equal opportunity to access the NHS services that we all pay for. The NHS, with its limited resources, cannot justify a situation where it is using its overstretched budgets to fund one group of people to get better access to treatment than others.

Effective use of public money: The NHS, like all parts of the public sector, has a duty to use its resources as effectively as possible, for the benefit of all local residents. Currently, the NHS is paying rent to the private sector owners of the Guildhall Walk site – at a time when there are significant amounts of empty space in centrally-located buildings which are already being paid for by the local health service. The starting assumption must be that such a situation should only carry on if there are overriding reasons to do so.

Strategic direction: It is widely accepted both locally and nationally that primary care services in the future must be delivered at a larger scale than has traditionally been the case in the past. The shortage of new doctors choosing General Practice as a career, the shift of services out of big hospitals and into the community, the need to join together primary care with community teams, the expectation of seven-day opening – all of these factors combine to suggest that practices will need to work together to provide a larger-scale service to their patients.

Preferred option

The CCG has already been asking for views about the future of the GP practice at Guildhall Walk. A series of conversations has been held with local clinicians, and also with key organisations such as the University of Portsmouth, Portsmouth City Council, and the Salvation Army.

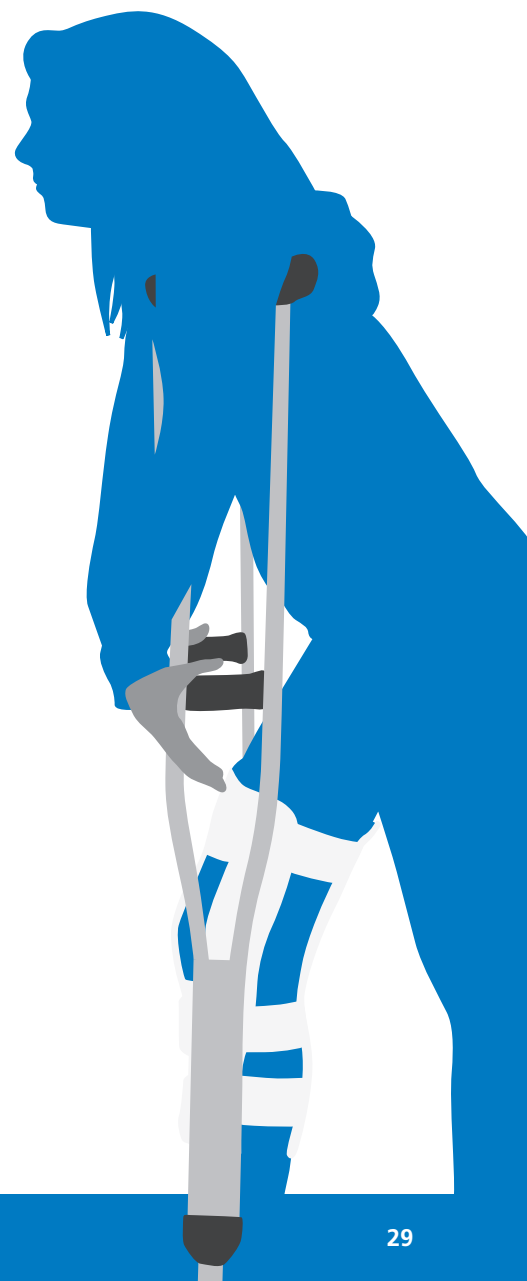
Over the summer a questionnaire was also sent to people registered at the practice to get an initial sense of what was most important to them about their GP service, and what they would want from any future service.

The feedback from these sources, regarding the future of the GP practice, highlighted several distinct themes:

- A concern for the future of services for vulnerable groups
- Questions regarding the impact on students, especially those living in the city centre
- A real appreciation of the longer opening hours, and the ‘open’ access which allows registered patients to walk in and wait, rather than having to book an appointment in advance
- Concerns over whether a practice in an alternative location would be accessible to people living near the city centre.

The feedback from local GPs suggested that there may be sufficient capacity to simply end the contract for the GP practice at Guildhall Walk, and allow the 7,000 patients to register elsewhere – some practices suggested they could take on significant numbers of new patients, others said that they could not register any more. However, there were also widespread concerns amongst the profession regarding the capacity of GP services, both now and especially in the future.

That feedback was then considered alongside the CCG’s four considerations outlined above (seven-day access, fairness, use of public money, and strategic direction).



As a result of all of these factors the CCG produced a preferred option, and this document is asking for your feedback before any final decision is made.

The preferred option is:

Registered patients would still all have their own, dedicated practice but it would no longer be at Guildhall Walk – instead patients would be registered at a new practice, in a building already funded by the NHS and near the city centre. The most likely options are the new Somerstown Central, or the John Pounds Centre. All patients, of course, would still retain the right to register at another practice if they wished to do so.

It is important to note that the option of simply letting the contract for the GP practice end, without a replacement, is no longer being considered. This is in response to the feedback received – partly because of concerns over the amount of primary care capacity there is in the city (and, indeed, the city centre), and partly because of concerns that such a decision could cause real upheaval as 7,000 people all sought to find a new practice at the same time.

Patients should also note, however, that the preferred approach does not propose a practice which would have the same 8am–8pm opening hours as Guildhall Walk does at present, for some of the reasons outlined earlier in this document – notably, the need to give all residents across the city an equal service, the need to use scarce funding carefully, and the need to devote all possible resources to extending GP access to everyone in the city, not just a small number. The CCG would, however, seek to agree a new contract which offered some extended opening hours to registered patients, recognising that one of the reasons that people chose to be patients at Guildhall Walk in the first place was the availability of evening and weekend appointments.

The CCG is now keen to hear the views of registered patients about the service that a new practice should offer – in terms of the way that appointments are made available, the opening hours, and where it should be located. We would also like to give people another chance to raise any issues they feel are important, to ensure that every issue has been considered, before decisions are taken.

Section 6

Summary, and how you get involved

Summary

This document has set out how, in the last 10 years, the system of urgent care in Portsmouth has become significantly more complicated as the number of available choices has expanded rapidly – but how this expansion of choice has not succeeded in reducing pressure on A&E, or on GPs, and how services have become increasingly fragmented and hard to understand.

It has also explained how the contracts for both the walk-in service, and the GP practice, at Guildhall Walk run out in 2016, and that these contracts cannot just be allowed to keep running past that date. The NHS, in other words, is obliged to look again at how urgent care services work in the city, and to look for ways of securing better care for city residents.

The local NHS has already been involved in extensive discussions with local clinicians, and has been gathering the views of local people over an 18-month period. The feedback received during that period, allied to the 'big picture' priorities of the local NHS to create much stronger centres for community-based care in the future, has led to the identification of a preferred option for the way ahead: the relocation of the walk-in service from Guildhall Walk to St Mary's, creating a combined, enhanced walk-in centre giving residents a better, simpler, more efficient service.

Getting involved

NHS Portsmouth CCG wants to hear from anyone who feels they would like to contribute to this process. To that end, the CCG is now conducting a formal public consultation process, and inviting people to submit their views on the preferred option for improving walk-in services in the city. You can find a pull-out response form in the centre pages of this document.

(As stated earlier in the document, there is a separate set of questions specifically aimed at the people who are registered patients at the Guildhall Walk Healthcare Centre, regarding their views about a proposal to set up a new GP practice for them in nearby NHS premises. Similarly, there is another, separate process regarding the vulnerable groups – especially those who are homeless, or who misuse drugs or alcohol – who are registered at Guildhall Walk).

The CCG would particularly like to know if there are any issues, which have not yet been considered, which you feel should have an influence on the decision which must ultimately be made regarding walk-in services.

The CCG would also like to know which aspects of the preferred option for walk-in services, as set out in this document, you believe will help to improve services in the city, and which aspects you believe will have a negative impact. This feedback will help to ensure that any and all important factors are considered before a decision is made.

We are asking you to respond to the four questions below and these are included in the pull-out response form in the centre pages of this document.

> Question 1:

The CCG's preferred option for urgent care is to move the walk-in service from Guildhall Walk to create a combined, enhanced walk-in centre at St Mary's. What do you think are the potential *benefits* of such a decision?

> Question 2:

The CCG's preferred option for urgent care is to move the walk-in service from Guildhall Walk to create a combined, enhanced walk-in centre at St Mary's. What do you think are the potential *disadvantages* of such a decision?

> Question 3:

What do you think are the most important factors for the CCG to consider when deciding whether to create a single, combined walk-in service at St Mary's Treatment Centre?

> Question 4:

Are there any *other* factors, not considered in the consultation document, which you think must be considered by the CCG before any decision is made?

In addition we are asking patients currently registered with the GP practice at Guildhall Walk a series of questions. These can also be found in the pull-out section in the centre pages of this document.

If you would like to comment on the proposals in this document please do so:

- Online at www.portsmouthccg.nhs.uk/guildhallwalk
- By completing the form in the centre pages of this document and sending it to us at: **Freepost NHS PORTSMOUTH** (You do not need to add any other address details (road, town, postcode) as these are not required.)

Either way, please ensure we have your completed responses by Friday 19th February 2016.



Glossary

A&E

Accident and Emergency Department, often referred to now as the Emergency Department or ED

A&E Four Hour Target

A nationally set target requiring 95% patients attending an A&E department to be seen, treated, admitted or discharged in under four hours.

CCG

Clinical Commissioning Group or CCG – the NHS organisation led by GPs which is responsible for identifying and securing most of the health services for a particular area. Locally, NHS Portsmouth CCG is responsible for deciding what services their local residents need, including those relating to urgent care, from the NHS and plans and buys these services with public money from the most appropriate providers.

Clinician

General term used to describe someone who is qualified to provide healthcare and treatment to patients, such as a doctor, nurse, therapist or psychiatrist.

Commissioning

Identifying the health needs of local people and planning and purchasing health services which respond to these needs

Community services/community-based care

Health services delivered in the community in people's homes or care homes

Darzi Centre

Term used to describe walk-in centres such as Guildhall Walk which were set up as a result of plans put forward by Lord Darzi in his Next Stage Review of the NHS (2008).

Diagnostics

Tests including scans and X rays that are used by clinicians to help understand an illness or the extent of an injury.

ED

Emergency Department (see A&E above)

Governing Board/Governing Body

All CCGs are required to have a Governing Body and locally we refer to ours as a Governing Board. This is the executive team that is responsible for making decisions about commissioning plans – the NHS Portsmouth CCG Governing Board meets regularly in public.

GP

General Practitioner – a family doctor working from a surgery.

We understand that not everybody will be familiar with all the terms used in this document and hope that this glossary might help explain some of them. If anything is still unclear please let us know at enquiries@portsmouthccg.nhs.uk

Health and Wellbeing Board

A forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

Healthwatch Portsmouth

An organisation that provides information to service users, carers and the public about local health and care services and how to find their way around the system. It represents the views and experiences of service users, carers and the public on health and wellbeing boards (see above).

NHS 111

NHS 111 is a non-emergency phone number that people can use when they urgently need medical help or advice but it's not a life-threatening situation.

NHS Five Year Forward View

The NHS Five Year Forward View, published in October 2014, sets out a vision for the future of the NHS. It articulates why change is needed, and how we can achieve it, defining the actions required at local and national level to support delivery.

Pharmacy First

A new scheme in Portsmouth that allows people who receive free prescriptions to go straight to their pharmacist to receive treatment, for selected minor ailments, without needing to visit their GP to get a prescription.

Primary care

Services which are the main or first point of contact with the NHS for a patient, usually GPs and pharmacies.

QA/Queen Alexandra Hospital

Portsmouth's main hospital which runs the Emergency Department (A&E, sometimes referred to as ED).

Urgent care

Urgent care is the phrase we use to describe NHS services that can assist people when they need help in a hurry but do not need the Emergency Department (A&E). Urgent care services include NHS 111, the walk-in services at Guildhall Walk and St Mary's and same day GP appointments.

Urgent care centre

A service operating alongside A&E that assesses patients who present with an illness or injury and directs them to the most appropriate source of help for their condition.

Walk in centre/walk in service

NHS services that can be used by members of the public without the need for an appointment.

NHS Portsmouth CCG
CCG Headquarters
St James' Hospital
Locksway Road
Portsmouth
PO4 8LD

Tel: 023 9268 4513

Email: enquiries@portsmouthccg.nhs.uk

Website: www.portsmouthccg.nhs.uk



You can get this NHS information
in large print, Braille, audio or in
another language by calling
023 9268 4513.

**INDEPENDENT ANALYSIS
NHS SERVICES AT GUILDHALL WALK
HEALTHCARE CENTRE:
PUBLIC CONSULTATION &
REGISTERED PATIENT SURVEY**

**NHS PORTSMOUTH CLINICAL
COMMISSIONING GROUP**

Contents:

1. Introduction
2. Methodology
3. Initial findings and overall additional information
4. Results including graphs
5. Summary

1. Introduction

This report was commissioned to provide an independent analysis of the results of the Public and GP surveys out of the Public Consultation Document entitled NHS Services at Guildhall Walk Healthcare Centre. It was published by NHS Portsmouth Clinical Commissioning Group (CCG) in November 2015. The consultation period ended on February 19th 2016.

The consultation document put forward some proposals that could affect the way walk-in centres might be provided in the future.

Various options were set out as follows:

- Option 1. No change – GP led walk-in activity and GP practice to be delivered from its current location of Guildhall Walk Healthcare Centre
- Option 2. To move the walk-in to St. Mary's and retain the GP surgery at Guildhall Walk
- Option 3. To move the walk-in to St. Mary's and move the GP surgery to alternative NHS space in the city centre
- Option 4. To move the walk-in to St Mary's and close GP surgery

Each of the options had an annual anticipated cost and saving attached to it.

Having formally assessed the four options, the CCG were then consulting on their preferred option - Option 3.

2. Methodology

Results of three surveys were received of which there were 446 responses from the Public Consultation. The GP survey, which was split into two had 235 responses from those registered patients who received a formal letter and 170 responses from those who used the more publicly promoted link.

Public Consultation - The first four questions were open-ended responses which required data cleansing to enable the responses to firstly be manually analysed and then manually transposed into Excel spreadsheets to allow them to be categorised into the demographic headings required. As well as providing a comparison of the numbers of male and female to every one of the benefits, disadvantages, important factors and other issues raised, the analysis of each question has a supplementary box highlighting any particular high level of response from any of the demographic groupings.

GP List – Questions 1, 2, 3, and 4 were again analysed and the responses from both the formal list and the public link are shown in graphs alongside each other, together with a combined total to enable suitable comparisons. Question 4 which is again open ended has with agreement been analysed into purely the main headings. However there are no real issues highlighted that have not been covered elsewhere in this report.

Public Consultation and GP List Question 5-13 – As these questions are the same in each of the surveys, it was decided to provide analysis of all the responses to each of the demographic questions alongside each other to provide an easily identifiable comparison, from each of the three surveys.

A full breakdown of all the demographic information has been recorded but only the most significant data is shown in this report.

3. Initial findings and overall additional information

The figures for responses to each question do not necessarily correspond to the total number of responses received as:

- Two of the responses to the public consultation were totally blank
- A number of respondents gave more than one benefit, disadvantage, important factor or other issue and each of these were analysed by the corresponding demographic data supplied
- Some respondents supplied no answer to the demographic questions, leaving the question blank and not even using the option of 'Prefer not to say'

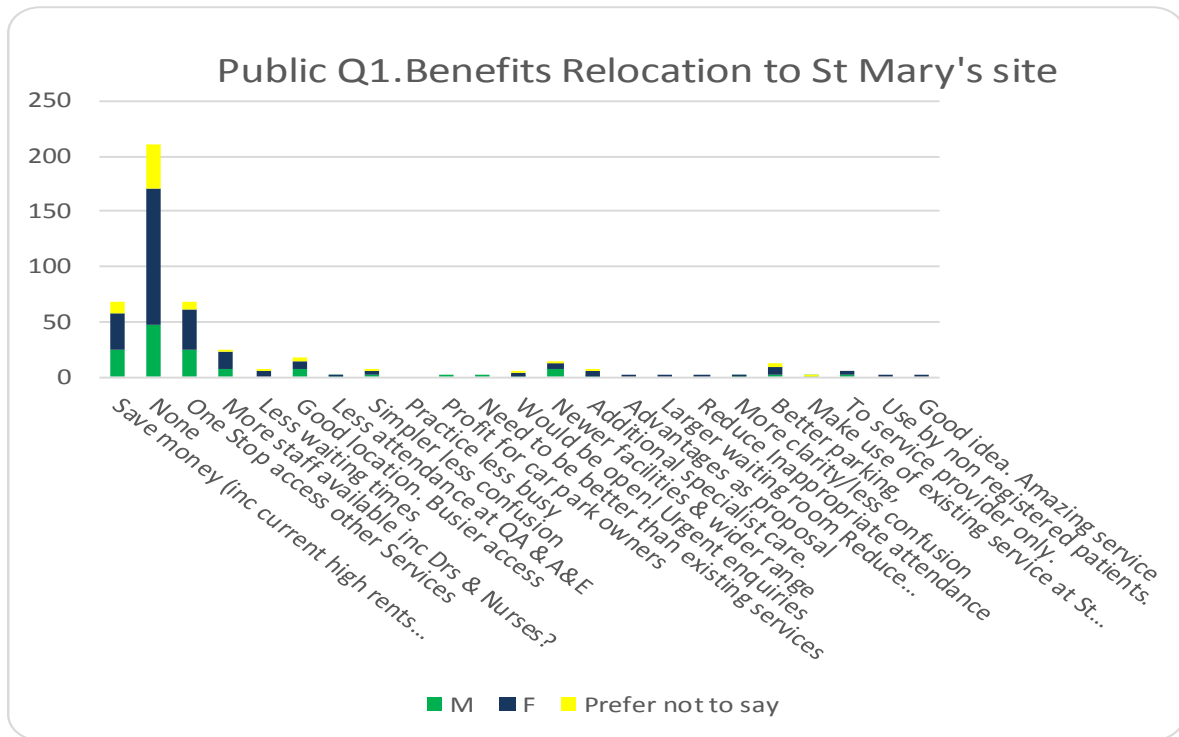
A number of responses highlighted the needs, issues and concerns of those in Social Housing, the homeless, young people, those with substance misuse issues, refugees and asylum seekers, the retired /elderly as well as the high density of others using the Guildhall Walk Healthcare Centre such as city centre workers, students, shoppers and visitors. In the case of city centre workers, consideration was raised of the cost of time and unavailability for work to employers as well as employees if additional journeys have to be made rather than utilising the Healthcare centre in Guildhall Walk.

Two individual interesting comments that were included in the Public Consultation, Question 2, potential *disadvantages* and which are thought to be worth highlighting separately are that St Mary's is not on the university bus route and that there is the additional difficulty of accessing St. Mary's on Saturdays when Portsmouth Football Club were playing at home.

One hard to quantify factor was the creation of stress and anxiety on a financial, physical and emotional basis both of change and additional journeys and time depending on the final decision.

4. Results including Graphs
Public Consultation Q.1

The CCGs preferred option is to relocate the walk in service from Guildhall Walk to create a combined, enhance walk-in centre at St Mary’s Hospital. What do you think are the potential *benefits* of such a proposal?



Public Consultation Q1.

Out of the 446 responses received, 210 people did not set out any benefits they perceived, either responding with ‘None’ or leaving that response blank
 70% of those were female and 23% were male
 93% were under 65

This answer also recorded the highest number of those who said they had a disability

The second two highest number of benefits recorded were:

69 people stated that the preferred option would save money including the level of rent
 69 people stated that the preferred option would provide a one stop shop with access to other services

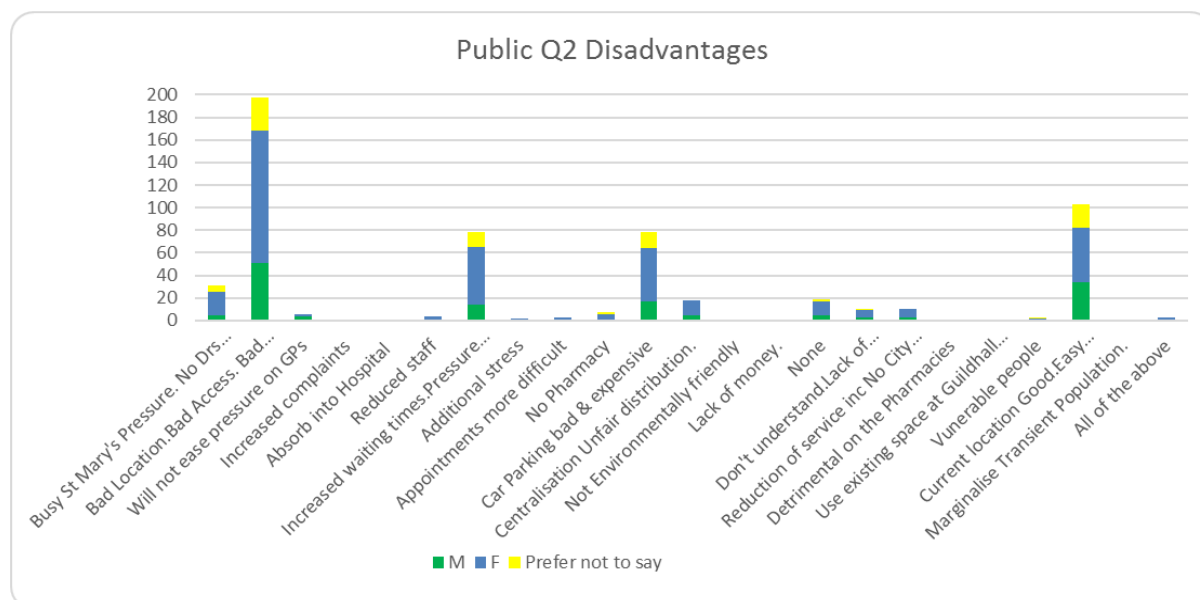
Of the total responses to this question 300 stated they did not consider themselves to have a disability and 66 said that they did.

The highest level of responses were from:

- PO5 - 102
- PO4 - 87
- PO1 - 61
- PO2 – 42
- PO3 – 34
- PO7-11 - 26

Public Consultation Q.2

The CCGs preferred option is to relocate the walk in service from Guildhall walk to create a combined, enhance walk-in centre at St Mary's Hospital. What do you think are the potential *disadvantages* of such a proposal?



Public Consultation Q2.

The highest level of responses received stated that the main disadvantages were:
 198 said St. Mary's was a bad location with poor travel and poor access
 103 said that the current location was good, with easy access, available pharmacy, in walking distance, closer to Portsmouth City Council services, was central, had a good reputation and staff that understood users
 78 said this would lead to increased waiting times, additional pressure on QA Hospital and the 999 ambulance service
 78 said that car parking was bad and expensive at St. Mary's

494 responses gave an age, of which 423 (86%) were under 65 and 71 (14%) were over 65

PO4 – 121
 PO5 – 109
 PO1 – 74
 PO2 – 61
 PO3 – 55
 PO7-11 - 33

500 responses stated whether or not they considered they had a disability, of which 395 (79%) said they did not consider they had and 89 (18%) stated that they considered they did have a disability

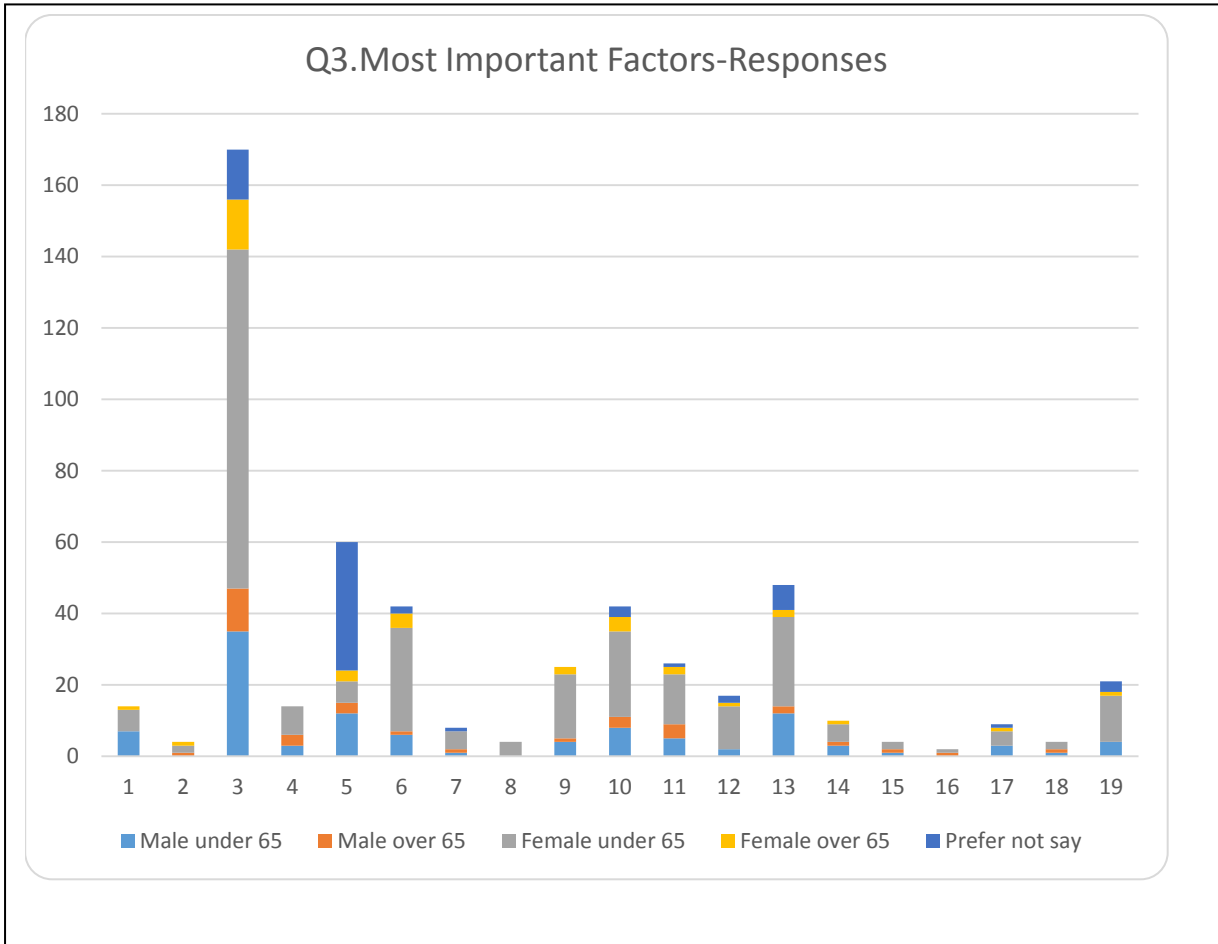
Public Consultation Q3.

What do you think are the most important factors for the CCG to consider when deciding whether to create a single, combined walk-in service at St Mary's Treatment Centre?

Important Factors to consider are:

	Responses	Male under 65	Male over 65	Female under 65	Female over 65	Prefer Not to say
1	Demand for both Guildhall Walk & St Marys	7	0	6	1	0
2	Relieve QA & A&E	0	1	2	1	0
3	St Marys' not central, ease of access	35	12	95	14	14
4	Opening hours	3	3	8	0	0
5	None	12	3	6	3	36
6	Waiting Times	6	1	29	4	2
7	Travel time/Time to attend	1	1	5	0	1
8	Access to Chemist	0	0	4	0	0
9	No of professional/Qualified staff	4	1	18	2	0
10	Location & excellence of Guildhall Walk	8	3	24	4	3
11	Financially viable /costs	5	4	14	2	1
12	St Mary's already busy/overcrowded	2	0	12	1	2
13	Overall wants/needs/impact /benefits of and to patients	12	2	25	2	7
14	Easier access if bringing services together	3	1	5	1	0
15	CCGs to take all views into account	1	1	2	0	0
16	Positive promotion to use service rather than 999	0	1	1	0	0
17	Population density	3	0	4	1	1
18	Clinical efficiency-no duplication	1	1	2	0	0
19	Quality-no overall loss of service	4	0	13	1	3

See Graph below



Public Consultation Q3.

580 responses were received stating the most important factors for the CCG to consider. The highest numbers recorded were for:

170 - St. Mary's is not central; is not easy to access for vulnerable people including the elderly, asylum seekers, young people and those who work in the city centre, those from Gosport and visitors; has a poor bus service; poor parking and would lead to an increased volume of traffic

60 - No other important factors

48 – The CCG must consider the needs, wants, benefits and issues for all users, patients, vulnerable people, PCC staff, local people and the general public

42 –Location and excellence of Guildhall Walk Healthcare centre - No reason to change

42 – Increased waiting times

468 of the responses answered the disability question – 356 (76%) -No; 80 (17%) – Yes

PO4 – 108

PO5 – 107

PO1 – 90

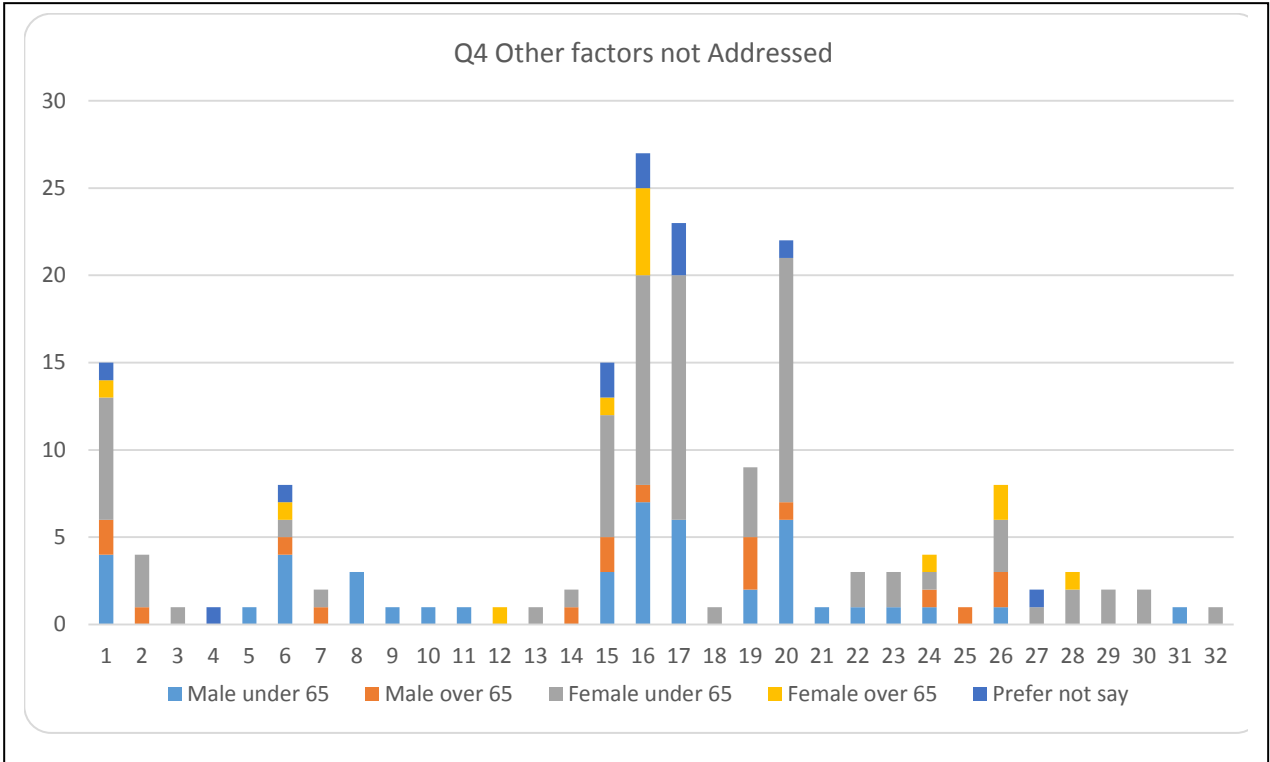
PO2 – 60

PO3 - 42

Public Consultation Q4.

Are there any other factors, not addressed in the consultation document which you think must be considered by the CCG before any decision is made?

	Responses	Male under 65	Male over 65	Female under 65	Female over 65	Prefer not say
1	Not Politics/Finance but Patients interests	4	2	7	1	1
2	Restructure the GP provision	0	1	3	0	0
3	Provision of a Quarantine facility	0	0	1	0	0
4	Difficult to access in bad weather	0	0	0	0	1
5	A great idea	1	0	0	0	0
6	Provision for increased numbers/students/city centre workers	4	1	1	1	1
7	Late night safety factor at GHW	0	1	1	0	0
8	Ability to make phone appointments	3	0	0	0	0
9	Failed to address the social situation	1	0	0	0	0
10	Consideration of the original contract	1	0	0	0	0
11	ID checks for patients	1	0	0	0	0
12	Weekend provision	0	0	0	1	0
13	Review numbers of other managerial staff within CCGs	0	0	1	0	0
14	The effect on Milton Cross School	0	1	1	0	0
15	Cost of services for all vulnerable groups	3	2	7	1	2
16	The proven value of GHW	7	1	12	5	2
17	Listen to the patient & public view address these adequately	6	0	14	0	3
18	Staff to have command of English	0	0	1	0	0
19	Reduce parking charges at St Mary's	2	3	4	0	0
20	Increased traffic at St Mary's	6	1	14	0	1
21	Used rent saved for additional centres - City Northern Quarter & Gosport	1	0	0	0	0
22	24/7 service	1	0	2	0	0
23	Quantative/Qualitative analysis of users and their views	1	0	2	0	0
24	Doctors on site at St Mary's	1	1	1	1	0
25	Use or link to premises at the Civic offices	0	1	0	0	0
26	If not better do not change	1	2	3	2	0
27	Move St Mary's to city centre and combine	0	0	1	0	1
28	Balance of services across the city	0	0	2	1	0
29	Publicity for consultation document sufficient?	0	0	2	0	0
30	Cost & time saving	0	0	2	0	0
31	What is set up for any interim service?	1	0	0	0	0
32	Triage Service	0	0	1	0	0



Public Consultation Q4.

170 responses received:

28 - Guildhall Walk is of proven value

24 – Increased traffic at St. Mary’s

24 – Listen to the public and patient views and address them adequately

15 – Not about politics or finance but patients interests

13 – Services and their costs must be in the best interests of all those who need to use them

169 - Responses to the disability question; 126 (92%) said No; 34 (20%) said Yes

PO4 – 43

PO5 – 40

PO1 – 24

PO3 – 17

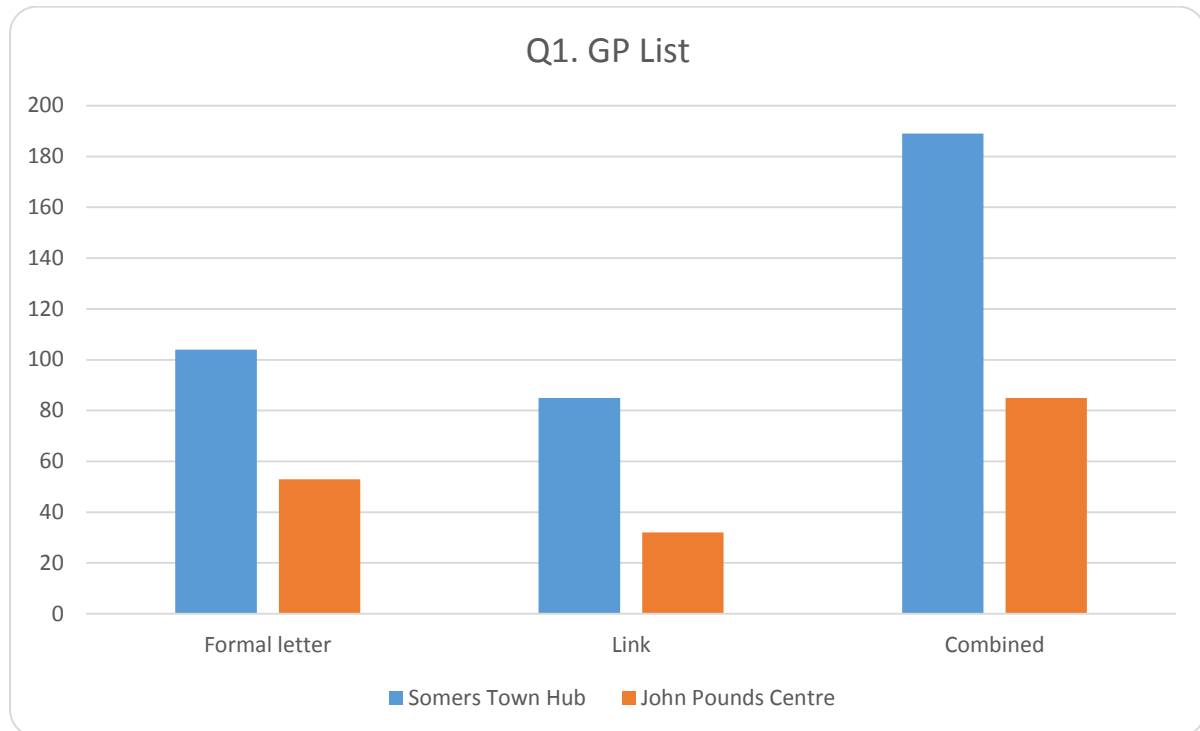
PO2 - 15

GP Lists Combined Formal Letter and Link Survey Questions 1-4

GP List Q1

The preferred option for the future of the GP practice at Guildhall Walk is to open a new practice in another location, near to the city centre, in a building already paid for by the NHS

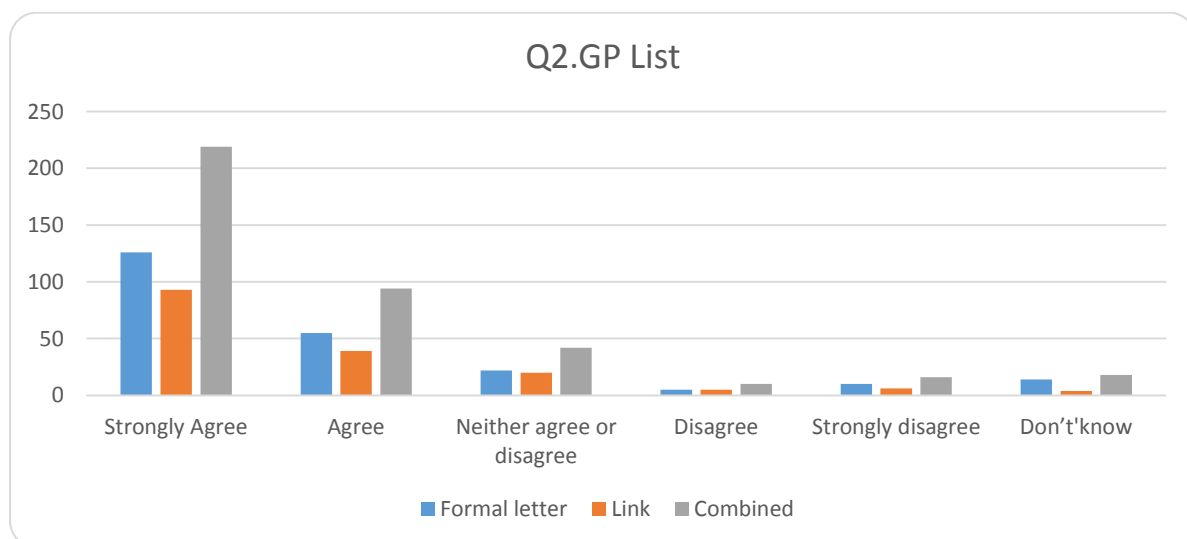
Do you think the new GP practice should be located at Somers Town Hub or John Pounds Centre?



Q2.

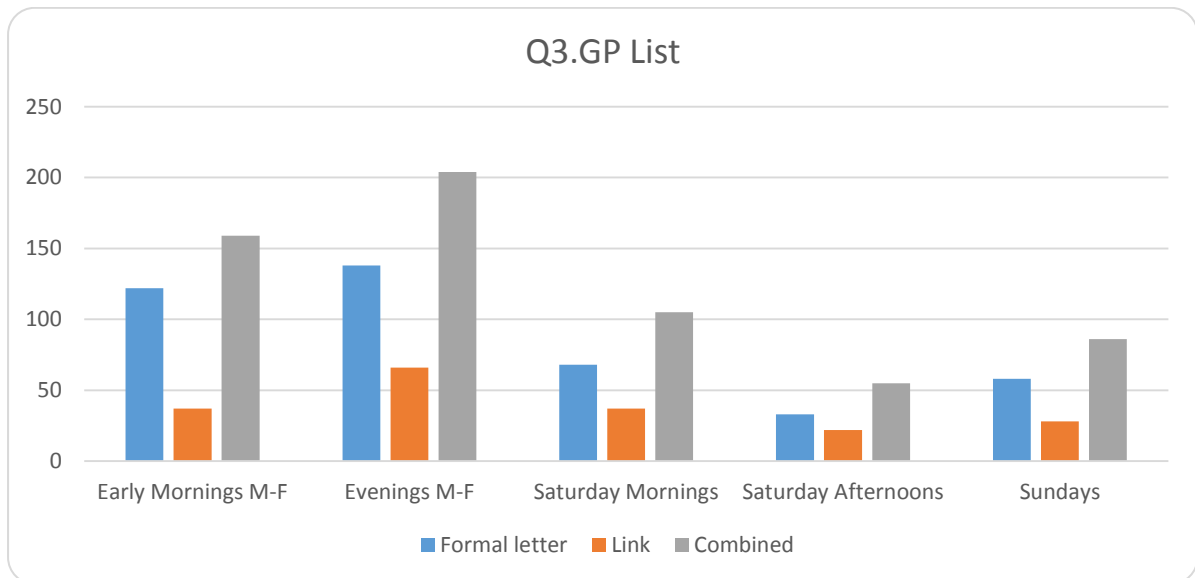
GP List

To what extent do you agree that a new GP Practice should offer its patients 'walk in and wait' service rather than relying on booked appointments.



GP List

Q3. In terms of the opening hours of a new practice, which two of the following options would be most useful to you personally?



GP List

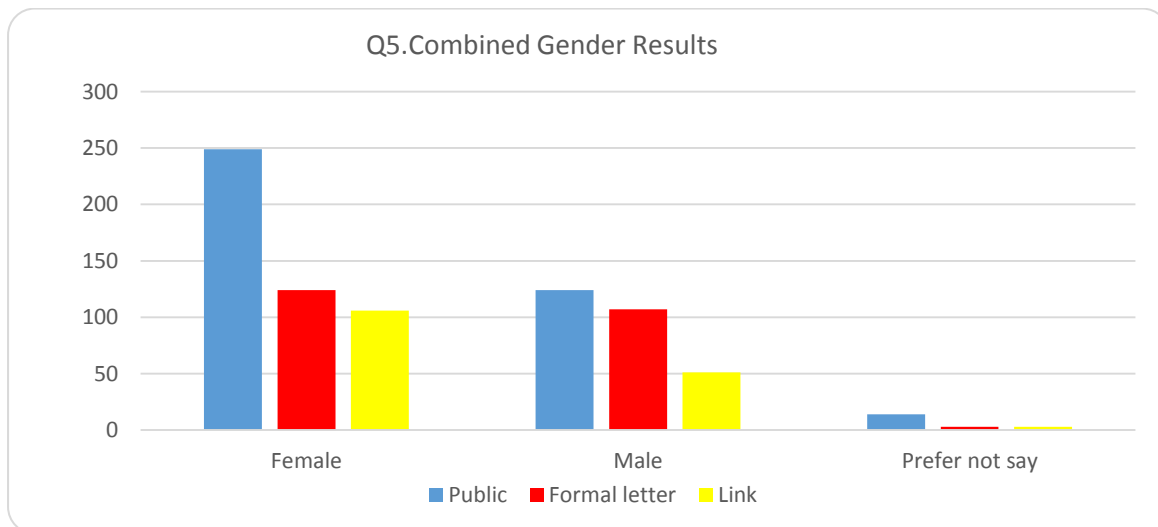
Q4.

Is there anything else, not covered by the previous questions, that the NHS should consider regarding the preferred option of moving the GP Practice away from Guildhall Walk and into another central location in Portsmouth.

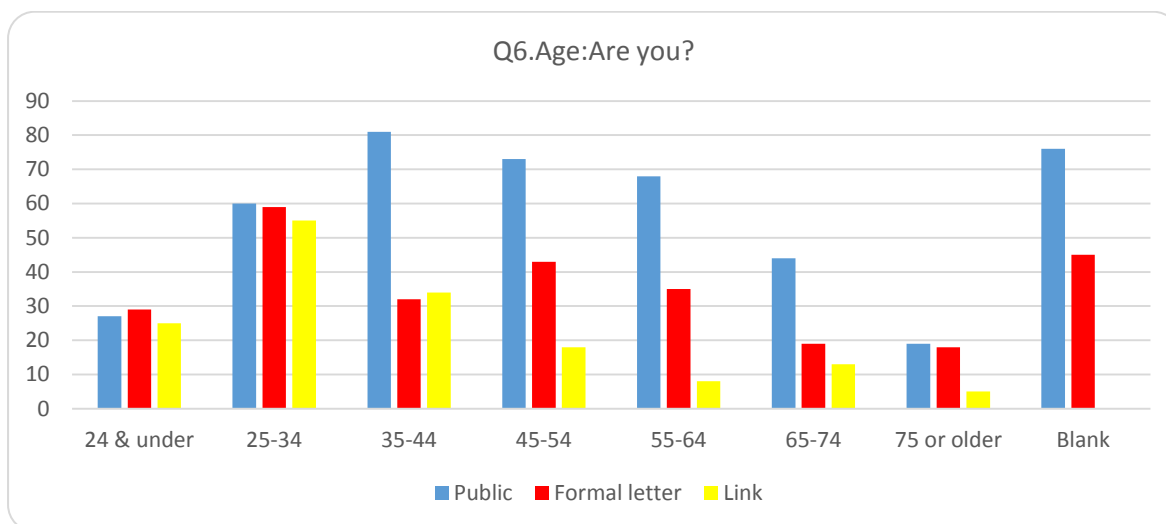
	Formal letter	Link	Combined Totals
Somers Town not ideal	7	1	8
Waiting/ Parking times at Guildhall	1	0	1
Walk in & wait Service required wherever	2	2	4
Excellent Medical care at Guildhall Walk & leave where it is	32	19	51
Pay for Doctors appointment	1	0	1
Increased use of pharmacy	1	0	1
Will current GPs relocate with surgery	5	0	5
Keep practice central good for students & working people	4	2	6
Can John Pounds accommodate additional staff & patients	2	0	2
Transgender agenda	1	1	2
Need range of walk in/appointment times inc. evenings & Saturdays	5	4	9
Politics	1	0	1
Pharmacy nearby any surgery important	1	0	1
Accessible & parking preferably free wherever surgery situated	7	8	15
Concern for residents & care homes, vulnerable adults & children	1	1	2
Reduction of time to get appointments	1	0	1
Extended length of appointments	1	0	1
Register with another GP	2	1	3
John Pounds is the best option	0	1	1
It's a done deal	2	1	3
Guildhall Walk takes the pressure off St Mary's & QA & A&E	1	1	2
Provide the same care patients need doctors & nurses	1	2	3
Regularly need to see the same doctor	1	0	1
Prescriptions available online	0	1	1
Restructure Portsmouth GP services	0	1	1
Provide variety and all services under one roof	0	1	1
Use by visitors to the city	0	1	1
Population increase	0	1	1
GP Practice to be located in Commercial Rd	0	1	1
Totals	80	50	130

Questions 5-13 Combined responses for all three consultations

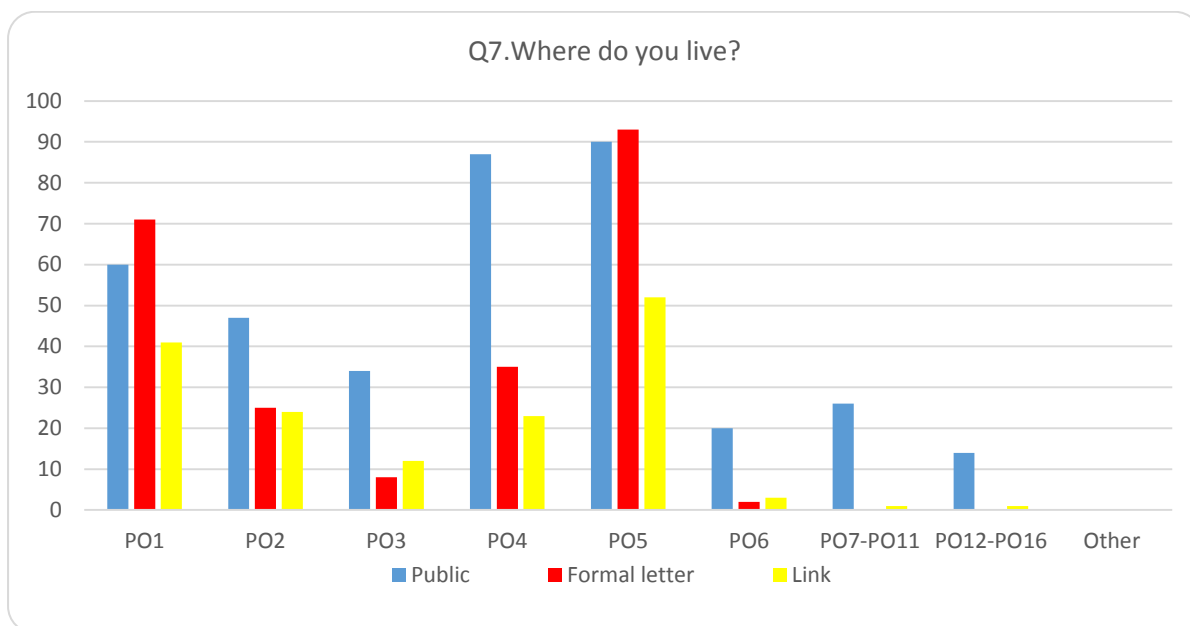
Public and GP lists, formal letter and link Q5



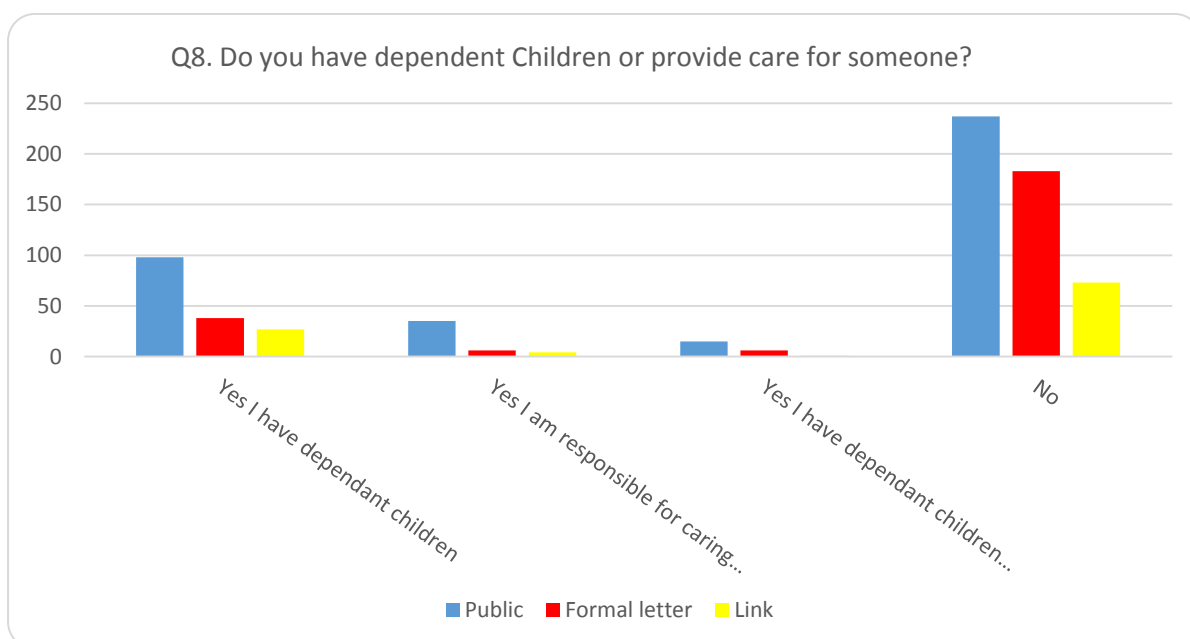
Public and GP lists, formal letter and link Q6.



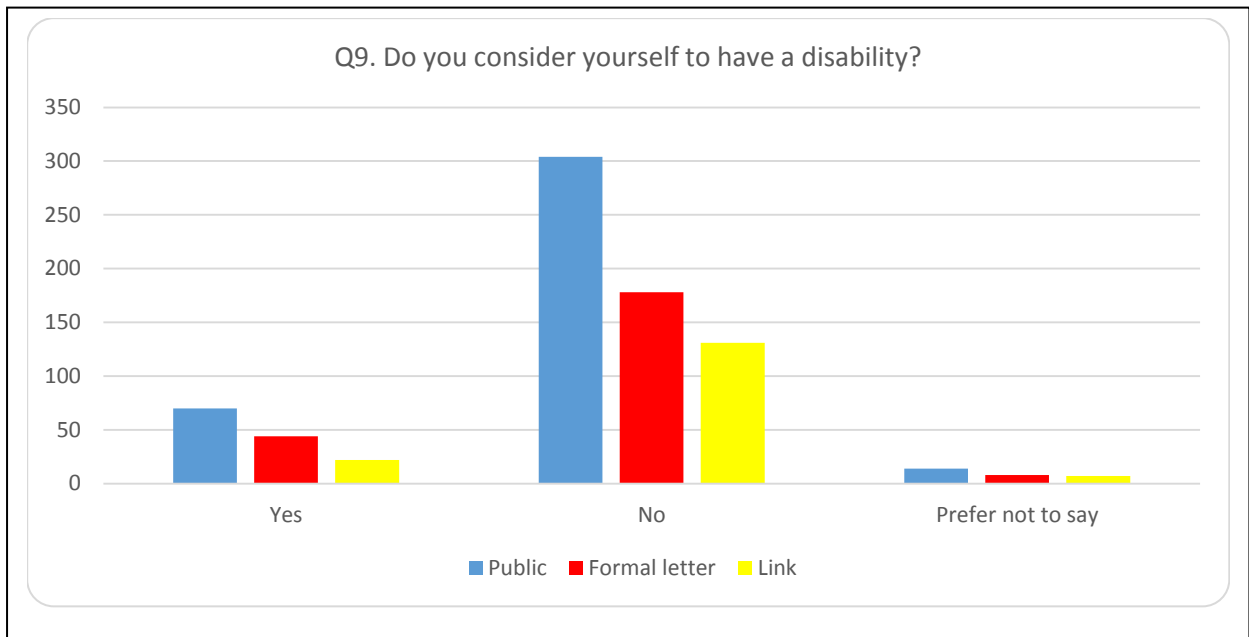
Public and GP lists, formal letter and link Q7



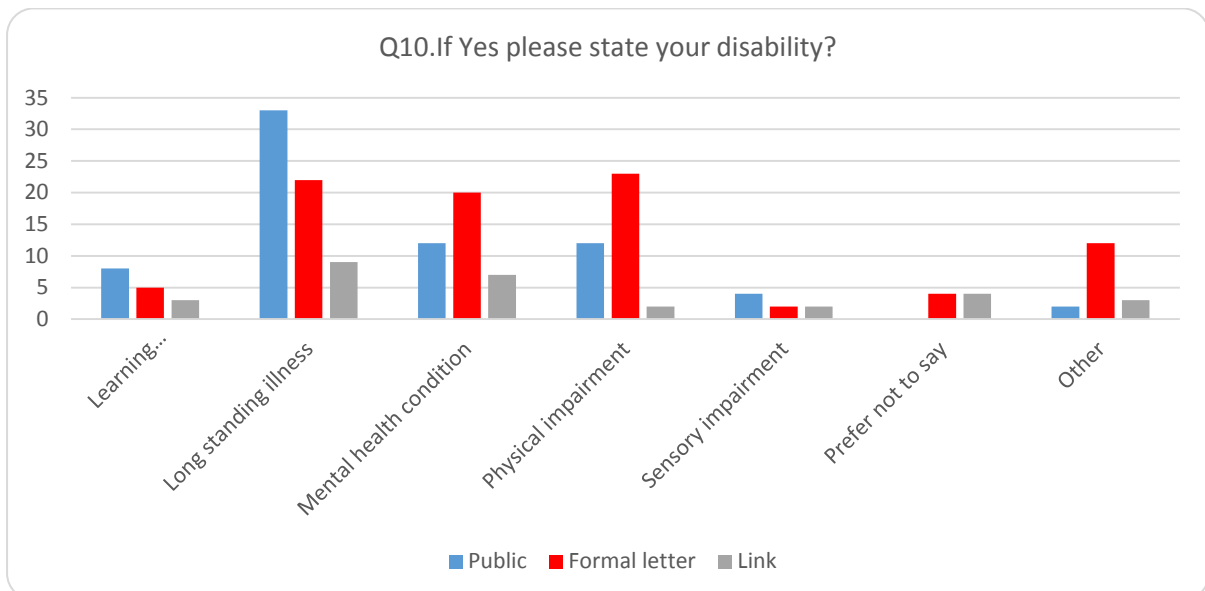
Public and GP lists, formal letter and link Q8.



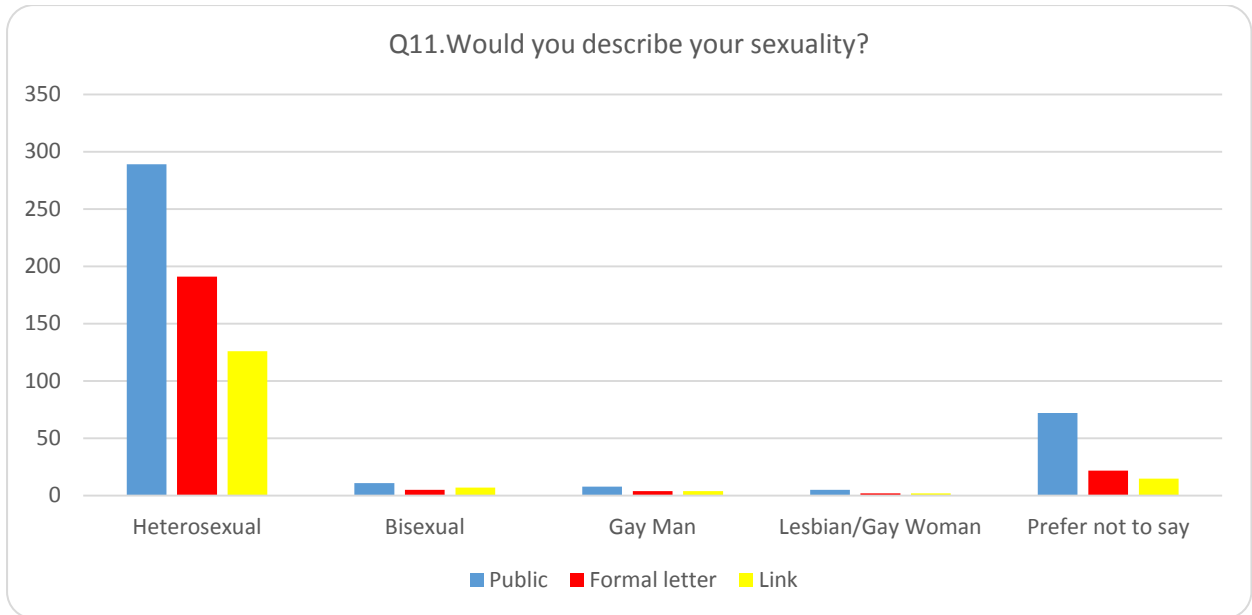
Public and GP lists, formal letter and link Q9.



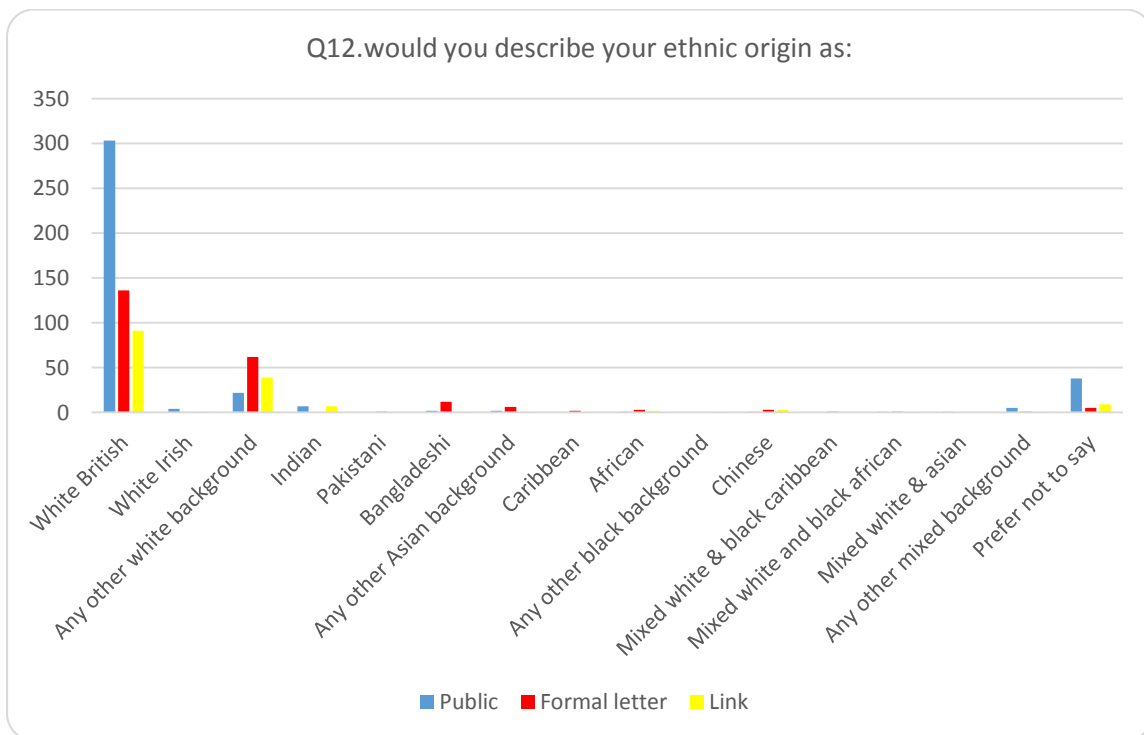
Public and GP lists, formal letter and link Q10.



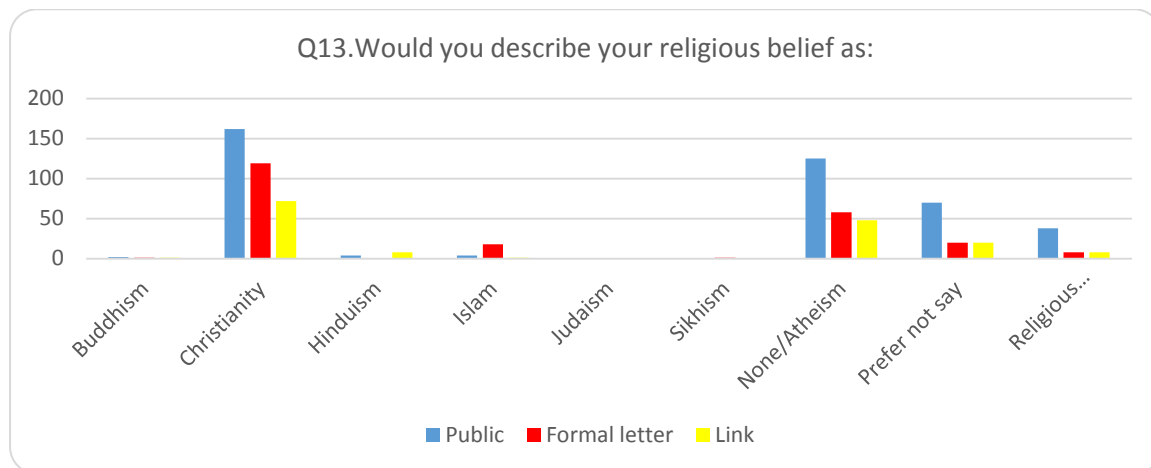
Public and GP lists, formal letter and link Q11.



Public and GP lists, formal letter and link Q12.



Public and GP lists, formal letter and link Q13.



	Buddhism	Christianity	Hinduism	Islam	Judaism	Sikhism	None-Atheism	Prefer not to say
Public	2	162	4	4	0	0	125	70
Formal letter	1	119	0	18	0	1	58	20
Link	1	72	8	1	0	0	48	20

5. Summary

Public Consultation

The main responses to what are the benefits of relocation from Guildhall Walk were:

- There are none
- A saving of money
- The provision of a 'one-stop shop' able to access other services.

The main disadvantages of the preferred proposal were:

- St. Mary's is a bad location with bad access and travel - 198 out of 580 responses (36%) cited this
- The current location was good 103 (17%)
- Increased waiting times
- Additional pressure on QA and the 999 ambulance service

The most important factor the CCG should consider was the ease of access and that St. Mary's is not central. Amongst this group of responses were:

- Location and accessibility for vulnerable people and a number of other client groups
- Need for an improved bus service
- Parking on site in terms of cost and availability
- Increased volume of traffic
- Parking in surrounding private areas

GP List Surveys

Over double the number of respondents thought that Somers Town would be a better option than John Pounds Centre.

The overwhelming majority of respondents either agreed or strongly agreed that any new practice should offer a 'walk-in and wait' service rather than booked appointments.

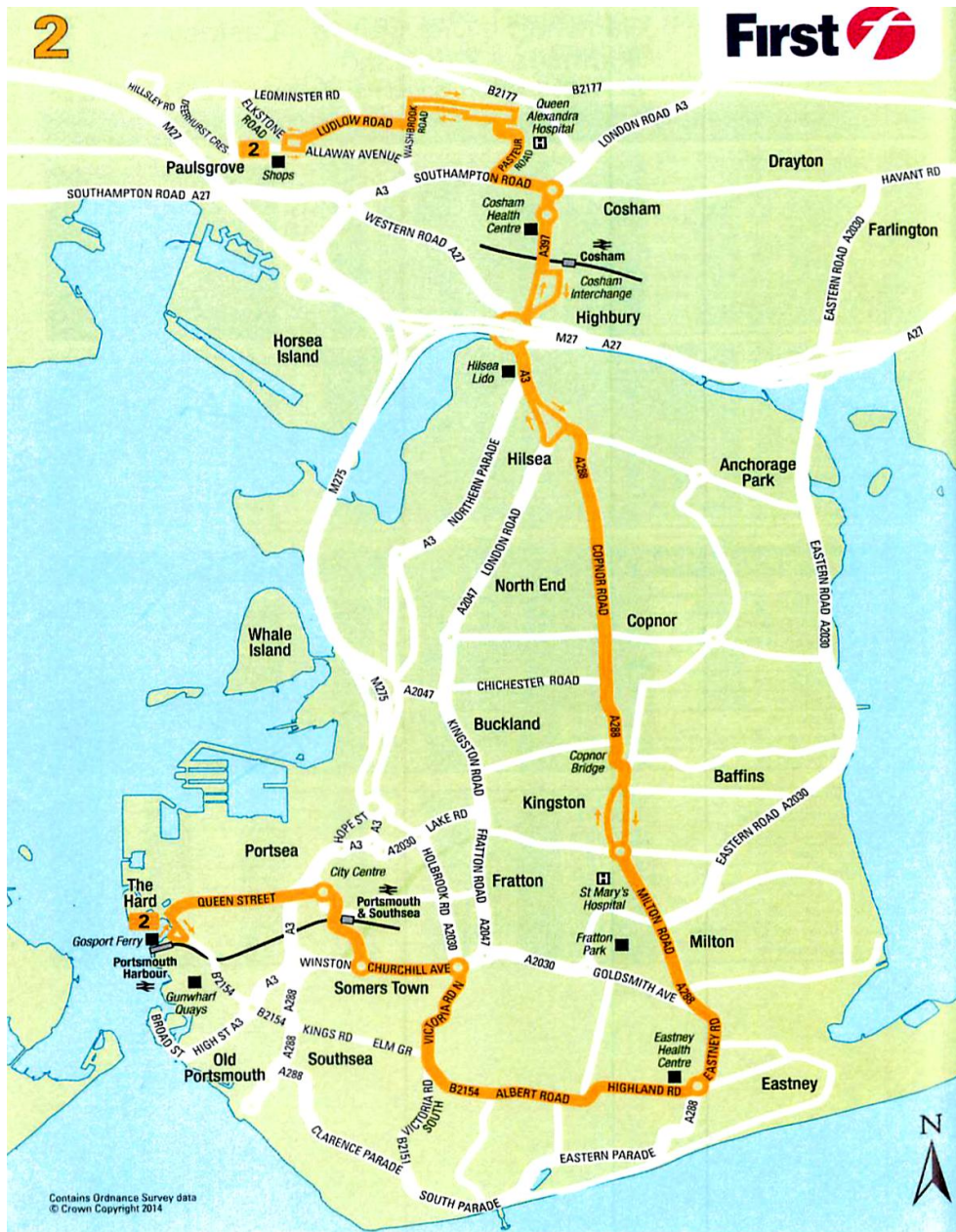
Early mornings and evenings, Monday to Friday were the two most popular options for a GP practice opening times.

Appendix C

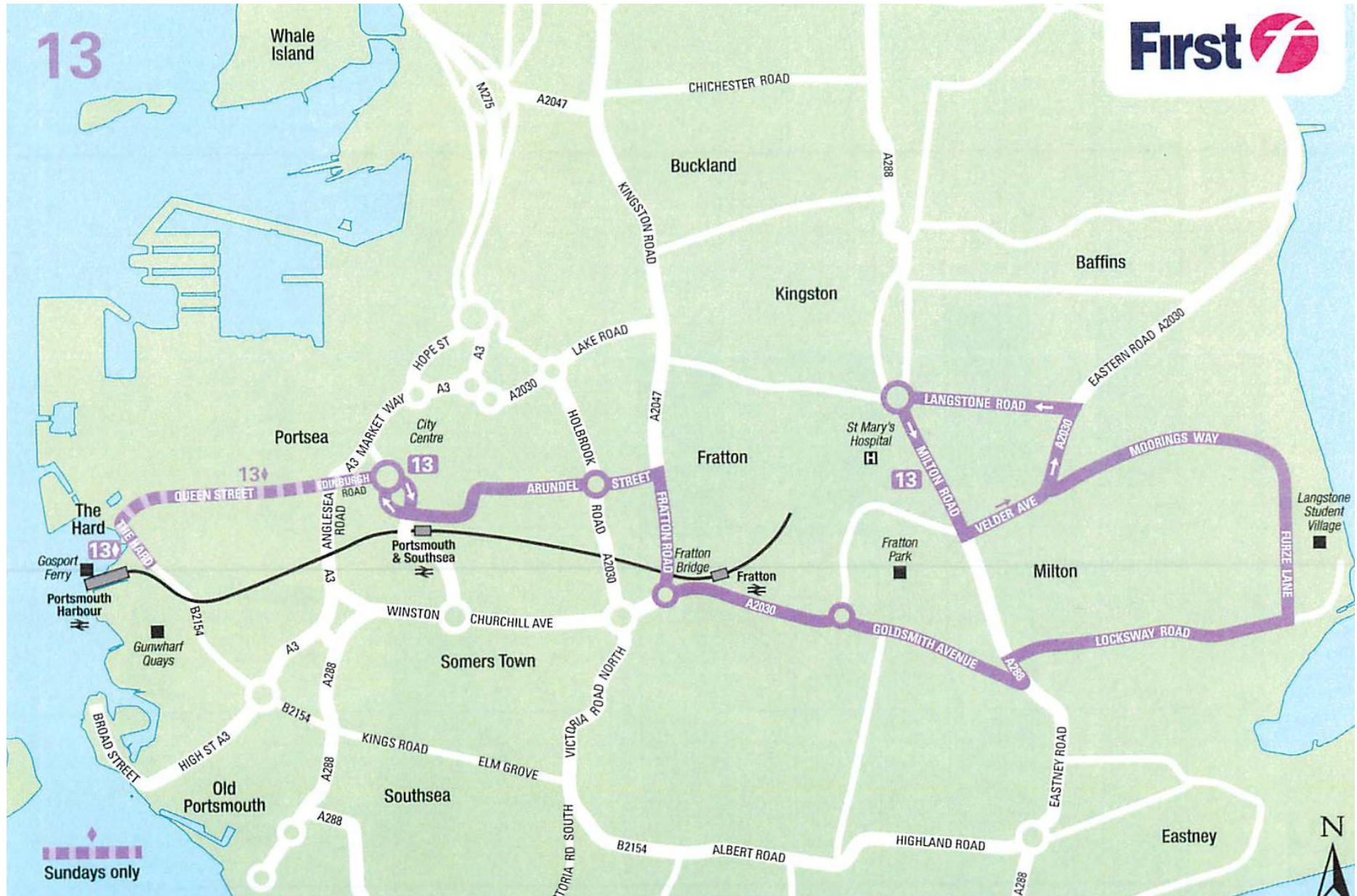
Summary of bus routes servings St Marys Hospital Campus

Service	Nearest Stop	Route	Weekday Daytime Frequency	Weekend services
2	St Mary's Hospital	Gunwharf - Portsmouth City Centre - Eastney - Copnor - Cosham - Paulsgrove	Every 10 minutes until 19.40 then every 30 minutes until 23.40	<p>Saturdays Every 10 minutes until 17.25 when every 15 minutes until 19.10 when every 30 minutes</p> <p>Sundays Every 20 minutes until 18.10 when every 30 minutes until 21.10</p>
13	St Mary's Hospital	Portsmouth City Centre – Fratton Station – St Mary's Hospital	Every 30 minutes until 19.50	<p>Saturdays every 30 minutes until 19.50</p> <p>Sunday every hour until 17.50</p>
17	St Mary's Hospital	South Parade Pier - St Mary's Hospital - Copnor Bridge - Chichester Road	Approximately every 30 minutes from 06.26 until 19.20 then approximately every hour until 22.47	<p>Saturdays every approximately every 30 minutes from 07.48 until 19.20 then every hour until 20.22</p> <p>Sunday approximately every hour until 18.41</p>
19	St Mary's Hospital	Portsmouth City Centre - Fratton - North End - Southsea	Every 2 hours from 08.00 to 16.10	<p>Saturdays Every 2 hours from 08.00 to 16.10</p> <p>Sundays no service</p>
21	Milton Road Prison	The Hard – City Centre – Fratton – Copnor – Farlington – Bedhampton, Leigh Park, West Leigh – Havant.-	Every 15 minutes from 06.15 until 08.30 then every 10 minutes until 17.40 then every 15 minutes until 19.00 then every approx. every 30 minutes until 21.45	<p>Saturdays Every 20 hours from 07.25 to 09.20 then every 10 minutes 17.40 then every 15 minutes until 18.40 then approximately every 30 minutes until 21.45</p> <p>Sundays Approximately every 20 minutes from 09.05 until 18.35 then every hour until 21.45</p>

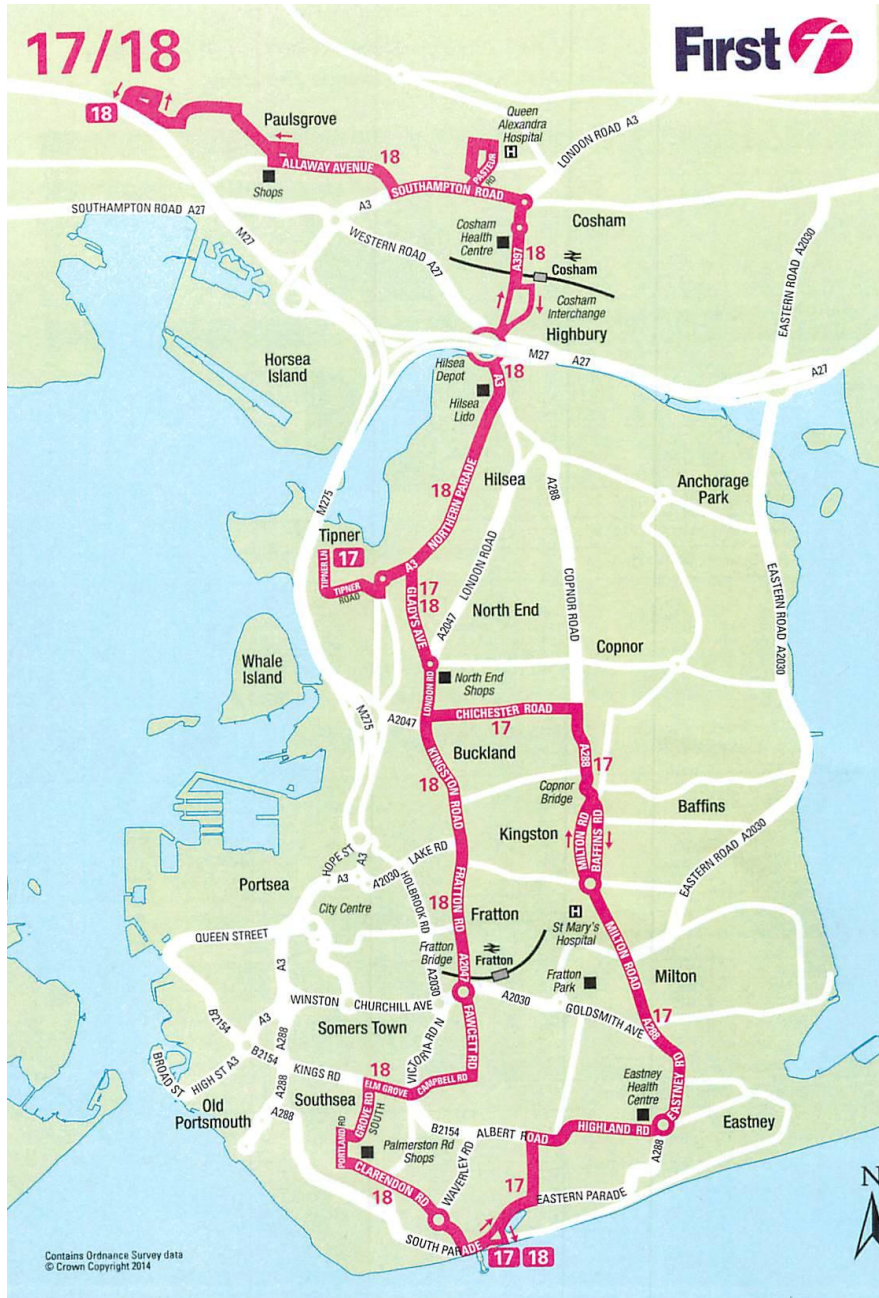
First Group - Bus No. 2 - Map indicating route



First Group - Bus No. 13 - Map indicating route



First Group - Bus No. 17 - Map indicating route



Stage Coach – Bus 21 - Map indicating Route

