

Guildhall Walk Healthcare Centre

Briefing update for members of the Portsmouth Health Overview and Scrutiny Panel – July 2015

1. Introduction

Following the Portsmouth Health Overview and Scrutiny Panel meeting on June 16th 2015, NHS Portsmouth Clinical Commissioning Group has been further refining its proposals for the walk in and GP practice services at the Guildhall Walk Healthcare Centre (GWHC) and has continued its engagement activity to seek feedback from local people about the current proposals.

The NHS Portsmouth CCG Governing Board received an updated briefing at its meeting in public on Wednesday 15th July 2015 and this forms the basis of this update paper for HOSP members. The information that follows provides more detail about the proposals and the reasons for developing them, as well as offering an update on current progress with our local engagement activity.

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 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. It has a registered raw patient population of 5,921 (as of April 2015), which consists 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 NHS Portsmouth Primary Care Trust (PCT) as an Equitable Access Centre (or 'Darzi Centre') in 2009, providing services from 08:00-20:00, 365 days a year. Following the NHS reforms that came into effect in 2013, NHS Portsmouth CCG has responsibility for the commissioning of unscheduled care across the city, and as such has oversight of the PHL contract related to the walk in service service at GWHC. Although NHS England had assumed commissioning responsibility for the primary medical care service element of the contract for the registered patient population in 2013, following a Scheme of Delegation Agreement signed by both NHS England and NHS Portsmouth CCG, Portsmouth CCG now have delegated commissioning responsibility for the whole GWHC contract (as of 1st April 2015).

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. A decision now needs to be made as to what elements of service provision from the GWHC contract will be commissioned beyond this point, and how that service provision will be configured in relation to the wider healthcare system.

13/14 Costs to Portsmouth CCG

The costs incurred for 14/15 for GHW are in the process of being confirmed. Therefore for figures for 13/14 for GHW are presented here. As a comparison the costs for the St Marys Walk In Centre are also given:

Urgent Care Provision

St Marys Minor injuries Unit	£1.2m
St Marys Minor illness service (nurse led)	£0.4m
GHW GP led walk in	£0.7m
Total Urgent Care Provision	£2.3m

Primary care provision

GHW registered list (GP Practice)	£0.6m
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3. Care Provision in Portsmouth City

The current configuration of Urgent Care Services within Portsmouth City has built up gradually over the years in response to both external and internal influences. Currently, and historically, local commissioning organisations have had to respond to national policies (for example, the procurement of “Darzi centres” and Independent Sector Treatment Centres); however, we have also, in collaboration with local healthcare partners, evolved in response to local demand (for example, the establishment of the Urgent Care Centre at Queen Alexandra Hospital). The result of which is that patients within Portsmouth City have to choose between a number of different services when seeking care urgently.

3.1. Current Configuration of Urgent and Primary Care Services

Detailed below is an overview of services currently commissioned within Portsmouth that meet the population’s urgent care and primary care needs, and serves to highlight how patients can access a variety of care.

Urgent Care

Presently there are two separate WICs located within the city. One WIC is located at the St Mary’s Treatment Centre and manages both minor injuries and minor illness; this is a nurse-led service open from 07:30-22:00 Monday-Friday, and 08:00-22:00 at weekends and Bank Holidays. Another WIC is located at GWHC and manages minor illnesses only; this is a GP-led service (with support from nurses) open from 08:00-20:00 365 days a year.

There is also an Urgent Care Centre located at Queen Alexandra hospital which manages both minor injuries and minor illnesses; this is a GP-led service (with support from nurses). In addition to these services the NHS 111 telephone service also provides signposting to services and advice to patients who have an urgent care need.

Primary Care

NHS Portsmouth CCG currently has 23 member GP practices operating out of 31 sites across the city. In addition to their core opening hours (08:00-18:30, Monday-Friday), 22 member practices also offer patients extended access through additional clinics either in the early morning (before 08:00) or late evening (after 18:30) during weekdays, or through additional clinics on Saturdays; this is dependent on patient preference within individual surgeries.

GWHC are unique in that they are the only surgery in Portsmouth contracted to provide access to their registered patients between 08:00-20:00, 365 days of the year. This was

stipulated in their APMS contract when it was first awarded in 2009 and they are paid more per patient than a practice with normal core opening hours to reflect this.

All GP practices in Portsmouth also offer same day access for patients with urgent primary care needs.

In addition to in-hours GP service provision (08:00-18:30), Portsmouth patients also have access to an out-of-hours GP service between 18:30-08:00 on weekdays, and 24 hours a day at weekends and on bank holidays. Access to GP Out of hours is determined on the outcome of clinical pathways operated by NHS 111.

Pharmacies are another important access point to primary care within Portsmouth city; currently all 41 pharmacies within Portsmouth are commissioned to deliver at least one enhanced service with many providing multiple enhanced services.

3.2. Walk-In Centre Activity

Detailed below is an overview of the demand for WIC provision within Portsmouth City and an indication as to who utilises these services.

St Mary's Treatment Centre

There are currently circa 44,000 attendances at STMC WIC per annum; around 31,000 of these attendances are for patients registered with GP practices within Portsmouth, while around 13,000 attendances are for patients registered with GP practices outside of Portsmouth. Approximately 2/3 of the attendances are for minor injuries, whilst 1/3 are minor illness related.

Guildhall Walk Healthcare Centre

Excluding patients registered at GHWC, there are circa 20,000 attendances at GWHC WIC per annum; around 13,500 of these attendances are for patients registered with another GP practice within Portsmouth, while around 6,500 attendances are for patients registered with GP practices outside of Portsmouth. All of these attendances are for minor illnesses (as the GWHC WIC does not treat minor injuries). Approximately 45% of these occur during core GP hours (08:00-18:30, Monday-Friday).

4. Strategic Development of Urgent Care and Primary Care

This section looks at the strategic direction of urgent care services documented in the national Five Year Forward View and the CCG's 20/20 Vision strategy. Both documents will assist in shaping the commissioning decisions that need to be undertaken when constructing future healthcare provision in Portsmouth.

4.1. The NHS Five Year Forward View

The NHS Five Year Forward View (FYFV) was devised in 2014 in partnership between NHS England, Public Health England, Monitor, Health Education England, the Care Quality Commission, and the NHS Trust Development Authority. It articulates why change is needed in the NHS, what that change might look like, and how it might be achieved. In relation to urgent care services the FYFV offers a strategic vision of how they may be configured in the future and what the priorities are to help transition to this vision.

The FYFV 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. The importance of the need to expand and strengthen primary and 'out of hospital' care as means to managing urgent healthcare needs is highlighted throughout the FYFV. The emphasis of having community bases equipped to manage more diverse urgent care needs indicates that services commissioned locally will need to provide a much greater range of tests and treatments in one location without the need for healthcare professionals to refer patients on.

The FYFV emphasises the importance of continuing list-based primary care and ensuring its stability over the next five years. "General practice, with its registered list and everyone having access to a family doctor, is one of the great strengths of the NHS". The plan looks to expand scope of services provided in primary care and to encourage GPs to tackle health inequalities.

There is recognition that the traditional model of general practice is evolving. This is partly in response to national (and local) pressures that relate to the recruitment of GPs. In 2014 there were around 130 GPs working in the city, just over a fifth of whom were over the age of 55. A Local Medical Council (LMC) survey responded to by 48 of the GPs working in the city (less than half) showed that 40 per cent were thinking about retiring over the next five years – about 19 GPs. The emphasis is increasingly on extended group practices, either as federations, networks or single organisations, to enable a wider scope of services to be delivered. Meeting the demand on urgent care systems will be achieved either by ensuring evening and weekend access to GPs or having community bases equipped to provide a much greater range of tests and treatments.

4.2. Portsmouth CCG's 20/20 Vision

In 2014 Portsmouth CCG published its five year strategic plan, *20/20 Vision*. Within this document it is recognised that in order to meet the future health needs of people living within Portsmouth, and to do this on the funding predicted to be available, then a credible and robust plan would need to be in place detailing what changes would need to be enacted, and what key priorities would enable us to make those changes.

The key priority area within the *20/20 Vision* relevant to urgent care states: ***"We want everyone to be able to access the right health services, in the right place, as and when they need them."*** and a commitment to this ambition means that:

- People will know how and when to access the most appropriate services in an emergency
- People will not have to wait longer than they should for appointments, treatment and emergency care
- There will be an increase in the availability of x-rays, scans and tests so people can be diagnosed and receive the treatment they need more quickly

As a CCG we are signalling our intention to develop hub-based models of care in community settings incorporating primary care, community care, social care, and elements of secondary care. Decisions about the future of individual GP practices and groups of practices should be assessed in the light of this ambition and how it moves us closer to this goal

5. An Opportunity for Change

The current contract for the GWHC contract is due to expire at the end of March 2016 and this provides the CCG with a unique opportunity to review the current configuration of walk in

services within Portsmouth and to ensure that these commissioned services meet the needs of the population and deliver a more sustainable model of care for the future.

Based on the feedback from the various engagement exercises conducted with key stakeholders, the direction of travel in both national and local healthcare strategies, the CCG's preference would be to have all WIC activity delivered from one location within Portsmouth, at St Mary's Treatment Centre. The rationale for this includes the following:

- It will simplify and strengthen walk in services in the city by bringing together GP-led and nurse-led Walk-In services
- Patients and other health care providers will not have to choose between an injury or an illness service
- It will create a simpler overall structure for urgent care services which the public can navigate
- It place services where they can operate most effectively, to high standards, and remain accessible to those who need them
- It will improve access to x-rays, scans, and tests for those patients accessing walk in services as they will be co-located
- It will maximise the use of St Mary's campus, a strategic site in Portsmouth

The CCG is now consulting specifically on the proposal to relocate the GP led walk-in service from GHW to the St Marys treatment Centre.

6. Wider Implications: Guildhall Walk GP Practice for registered patients

The current GWHC contract binds the provision of WIC and primary medical care services together, therefore any decision about the future of WIC provision must be considered in the context of what impact it will have on the GWHC GP practice.

The GP practice located at GWHC has approximately 6,000 registered patients consisting mostly of students and young people; in fact, 15-34 year olds make up around 60% of the registered list, whereas patients aged over 75 account for only around 1%. In addition to the student and younger person dominated demographic, the practice also provides important access to primary care for the City's homeless population and other vulnerable patients.

The CCG is now consulting specifically on the impact and options for the GP services with those patients registered with the GHWC.

7. Engagement and Consultation

Over the previous 18 months the CCG has been working to consult with a wide range of stakeholders regarding the use of urgent care services with the City; this includes members of the public, patients, and providers of care. The timeline below summarises this activity with more detail provided in the pages that follow. This seeks to provide insight into how our engagement activity has unfolded over the past 18 months and how we are moving into some more detailed activity now that some firm proposals have been identified.

We remain very keen to remind people that the proposals around the walk in service focus on enabling them to make decisions about their care more easily and represent a relocation of the existing service with the retention of capacity, not the withdrawal of much needed alternative provision to urgent care services in Portsmouth. To ensure that we are able to seek the views of as many people as possible, from as many different backgrounds, we have also undertaken an Equality Impact Assessment on the proposals.

2013	Discussions with GP commissioning leads and Patient Participation Group representatives
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2014	JAN/FEB	MAY/JUNE	SUMMER
	Under Pressure campaign and survey with The News	Portsmouth University & Highbury student interviews	3 x CCGs urgent care survey

2015	JAN/FEB	APRIL	MAY/JUNE	JUNE 3rd	JUNE 4th
	Urgent care campaign and survey with Wave 105fm	Publication of engagement report	Meeting with GHW practice	Further discussions with GP commissioning leads	Letter & survey to all GHW patients
	JUNE	JUNE 16th	JUNE/JULY	JULY 1st	JULY 1st
	Briefings to HOSP, HASC, local MPs, HWB, Healthwatch	HOSP meeting	Develop plans for working with Salvation Army over impact on homeless contract	Launch of walk in survey to accompany registered patients survey	Meeting with PPG network (16)
	JULY 2nd	JULY 3rd	JULY 7th	JULY 9th	JULY 15th
	Media & social media promotion of surveys for reg and walk in patients	Specific contact with Carers Groups to identify impact	Social media reminder for students at Portsmouth University	Meeting with Healthwatch to discuss proposals	Update to CCG Governing Board
	JULY 20th	JULY 22nd			
	Meeting with Portsmouth University	Update meeting with HOSP			

7.1. Engagement activity since June Health Overview and Scrutiny Panel

This section highlights engagement activity that we have undertaken since the HOSP meeting in June 2015.

Walk in services: we are now running a more detailed survey about the Guildhall Walk and St Mary's walk in centre arrangements to ascertain people's thoughts and concerns about our proposals. This is being done via an on line survey on the CCG's website and seeks to understand the issues that are important to the public and what concerns they would have regarding this proposal. The survey was made live on June 26th and promoted to the media. The link was made available on the CCG website, posted on the CCGs Urgent Care Facebook page and on the CCG twitter feed. The information on the website is accessible via a 'banner' on the homepage. The consultation will end on August 31st. Again this will continue to be promoted over the next few weeks and is running until the end of August. We are linking with a number of other organisations locally to seek their support in publicising the survey more fully.

Registered patients: In order to fully consider the impact on the practice population we are currently conducting survey-based engagement with the practice's 6,000 registered patients to understand how they use the service and the impact of any changes on them. Initially a letter and request to complete the online survey was sent to every patient's registered address on June 1st 2015 and the consultation will run until August 31st 2015.

This letter explained that the CCG has decisions to make over the next few months regarding the future of the practice and that broadly the options are:

- To continue to fund the same range of services at Guildhall Walk
- To move some of the services currently provided there to other locations, or to move the practice itself
- To end the contract for GP services there, and ensure that patients can register at other practices instead

Further work will be undertaken to continue to promote the survey between now and the end of August and we have had some help from the university in allowing us to utilise some of their engagement channels with students to remind them of the survey and request their support in filling it in.

As at 30th June 2015, there had been 162 responses to the survey, which was sent to all people registered as patients at Guildhall Walk Healthcare Centre. The initial mailing was supplemented by an online article in the 'student' section of the University of Portsmouth website, and subsequently by mentions on both Twitter and the Urgent Care Pompey Facebook page.

The survey has now been made available via the CCGs website and social media has been used to increase awareness of this ongoing consultation. The consultation will continue until the end of August 2015

Meetings and discussions: since the last HOSP meeting we have had a number of useful meetings and discussions with several different organisations and groups and we will continue to pursue these over the summer. These have included:

- A meeting with representatives of Healthwatch Portsmouth to identify possible areas for Healthwatch to be able to encourage people in the city to air their views. As well as supporting us with some publicity it may be that Healthwatch can also offer an

independent 'take' on the proposals and help us gain access to a broader range of groups and communities

- A meeting with representatives of the Patient Participation Groups in Portsmouth where we were able to explain our proposals to them and ask them to encourage patients in their surgeries to do the survey
- The practice provides primary medical services to a significant number of people who describe themselves as homeless; we will therefore be working with the Salvation Army to use semi-structured focus groups with the homeless population and potentially linking with Public Health colleagues who are planning a wider health needs assessment with this group. It is expected that this work will be completed by August 14th.
- The practice also supports a number of registered patients with drug and alcohol issues so we will be linking with relevant commissioners and user groups e.g. PUSH
- We are also working with the current provider to explore future options and whether the end of this contract provides an opportunity to explore more innovative solutions and ways of delivering primary care.
- The University of Portsmouth has agreed to support us in contacting students through some of their social media channels and we are meeting with representatives from the University on July 20th to discuss the proposals in more detail
- We have also sought the support of both Adult Social Care colleagues and Action Portsmouth to disseminate information regarding both aspects of the current consultation via their networks.

Feedback, from these discussions is being collated and analysed, alongside the results from the survey and these will be considered fully as we prepare our recommendations.

7.2. Urgent Care/Walk in: Engagement with service users

The activities outlined in section 7.1 help us to build on the findings of our initial round of engagement which took place between 2013 and early 2015 and featured three significant pieces of survey work focused on urgent care services, along with discussions with GPs and Patient Participation Group representatives. This initial engagement work helped us build a picture of behaviour, experience, perception and expectation in those who have, or may, use urgent care services in Portsmouth, Fareham, Gosport and South Eastern Hampshire through a range of public engagement and consultation activities.

The surveys were:

- **Under Pressure survey:** conducted with The News in January 2014 following our week long campaign with them seeking to raise awareness of local services. 414 people took part, 60% of whom were aged between 18 and 64
- **Our own CCG urgent care survey:** conducted during the summer of 2014. 808 people took part again 60% were aged between 18 and 64
- **Wave 105 survey:** conducted in February 2015 following a month long campaign that featured radio and video promotions featuring local providers of urgent care and their staff. 2637 people took part, 450 of whom were from the Portsmouth, South Eastern Hampshire area

Key Findings from these surveys:

The public are confused, don't know enough about the options available to them and few, for example, know the differences between St Mary's Treatment Centre and Guildhall Walk

walk-in service. Almost one-third of people don't know GPs offer same-day appointments. Many people would prefer a simpler system, even if this means fewer choices.

The most popular suggestion for easing pressure at A&E was "making it easier to see a GP" More personal responsibility/self care, more information, and simplicity are seen as key principles. GPs are the preferred, trusted option for minor illnesses, but for minor injuries people look to walk-in facilities. Proximity to services matters, however almost 60% of respondents think travelling up to 3-4 miles between home and a walk-in centre is reasonable.

The CCG has also been engaging with member practices via our commissioning events.

Key Findings from engagement with member practices

Member practices generally support ongoing provision of a minor injury walk in service at St Mary's but the stand alone nurse led minor illness services at St Mary's is generally not thought to be an effective way to manage demand and co-location with a GP led services is generally supported. GPs expressed some preference for having capacity to deal with their own patients in-hours BUT there were concerns over current capacity in-hours for GP services and meeting patient expectations. Practices therefore recognise the current ongoing need for a GP led walk in service in the City to manage demand until such times as primary care services can be remodelled.

8. Next steps

In order to inform the full development of the options outlined above the following work is in hand

- Continuation of consultation and engagement with the public and stakeholders
- Completion of an Equity Impact Assessment
- Review of current capacity in existing GP practices
- Assessment of financial impact of the options referred to above

We are working towards completing our engagement and consultation activity by Monday 31st August 2015 and we would anticipate that we would be presenting a preferred set of proposals to the CCG's Governing Board at its meeting on Wednesday 23rd September. We would be happy to update members of the Health Overview and Scrutiny Panel further on our progress at its meeting on Friday 18th September.