

Urgent Care Service Redesign in Bury Tuesday 7th February 2017



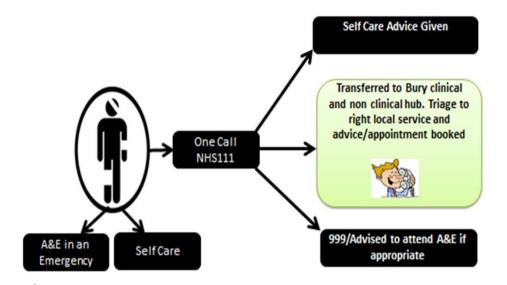
Introduction

- Where did the journey in Bury begin?
- Both nationally and locally it is recognised that the Urgent Care systems are under considerable pressure.
- In Bury it has been recognised that there is a need for better service planning and design to facilitate urgent care services.
- There is already local evidence of shift in urgent care trends as services continue to evolve.

Current Model

Online Advice? NHS111? Pharmacist? PWIC? GP OOHs? BWIC? Family/Friends? Pharmacist?

New Model



Current Model Key:

- Self Care = Patient feels able to deal with condition
- Online Advice = Internet
- NHS111 = Free self care telephone number
- A&E = Accident and Emergency Department
- PWIC = Prestwich Walk In Centre
- GP OOHs = BARDOC provider of full GP services evenings and weekends

 Weekends

 Lives strong communities

- 999 = Emergency Telephone Number
- Pharmacist = Option for clinical advice
- Friend/Family = Patient options for advice
- BWIC = Bury Walk-In Centre
- GP EWHs = Access to GP appointments at local hubs evening and weekends
- EDS = Emergency Dental Service

- In August 2016 the Bury CCG Clinical Lead presented proposals to the Governing Body for the redesign of Urgent Care service across Bury as supported by the Bury Urgent Care Partnership Group.
- The object being to realise a more integrated service building on the innovation of NHS 111 in simplifying access for patients and ensuring local services are delivering high quality clinical assessment, advice and treatment.



The Public and Stakeholder Engagement Process

The engagement period comprised of three elements:

- Face to Face Engagement
- Written Correspondence 'Received' Engagement
- Urgent Care Redesign Survey Engagement

Urgent Care Redesign Survey Findings

Q3: When thinking about future urgent care services, please tell us which of the following elements are important to you? (range of options where patient could select more than 1)

79% a service that is easy to understand and access
77% A service where I can receive clinical advice from qualified staff

Q7: Do you agree with the proposal to not renew the contract for the Walk-in Centres?

83% Disagree or strongly Disagree

Q10: Do you believe the Walk-in Centres provide a service or care now, that isn't provided anywhere else for patients in Bury?

90% Yes

Healthy lives strong communities

Urgent Care Redesign Survey Findings

Q11: If the Walk-in Centre contracts were not renewed from April 2017, would you like alternative health and social care services still delivered from the two locations?

87% Yes

Q12: Are you aware of the following services? Please tick all that apply (respondents were given a range to choose from)

87% NHS 111 service (signposting telephone service 24 hours a day)

72% GP Practice appointments available in the evening, at the weekend and bank holidays

71% Community pharmacies who are experts in medicines and can provide self-care advice

64% NHS Choices (internet based service 24 hours a day)

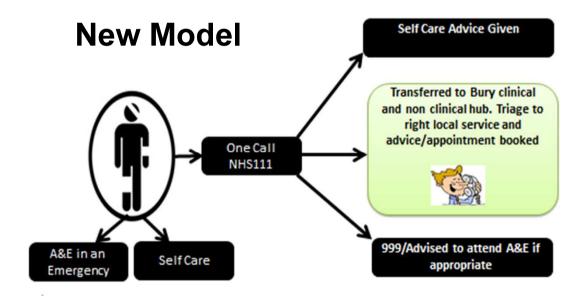
Public and Stakeholder Engagement Redesign Key Themes

- Patients and professionals do find the current urgent care system confusing
- Patients want to get the right care from the right place at the right time
- The CCG need to focus further on communication and the reassurance to patients and stakeholders that the services they require are responsive to their need
- Patients and stakeholders wish to maintain local service provision of healthcare



How has the engagement process changed the original proposals

- Much greater emphasis to be placed on the communication of Urgent Care options
- To continue to develop the Integrated Clinical Hub providing a local response to NHS 111 calls enabling patients and professionals access to clinical advice and assessment



How has the engagement process changed the original proposals

- To develop the Primary Care integrated model of care with our local A&E departments at Fairfield General Hospital and North Manchester General Hospital
- An acknowledgement of the importance placed on the local delivery of care
- A phased implementation of proposals reflective of opinions expressed during the engagement period. Proposals to be implemented in full by 1.10.17

Recommendation

Governing Body is advised by the Urgent Care Clinical Lead to support Option 1:

The clinical model for urgent care as now presented after consideration of the findings of the Urgent Care Redesign engagement process.