

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 12 MARCH 2014**REPORT OF EAST LEICESTERSHIRE AND RUTLAND CLINICAL
COMMISSIONING GROUP****URGENT CARE (MINOR INJURIES AND MINOR ILLNESS) REVIEW AND
PUBLIC CONSULTATION****Purpose of Report**

1. East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG) has been reviewing urgent care services (minor injury and illness) in its area to ensure local people are getting the best quality services in an accessible way.
2. This report provides an update to the Overview and Scrutiny Committee (OSC) on progress with the review in light of the enhanced option appraisal and pre-consultation engagement, taking into account the fact that ELR CCG will have future commissioning responsibilities for open access services at the Oadby and Wigston Walk in Medical Centre from April 2015. The report identifies the proposed options for future service delivery and outlines our planned approach to formal public consultation, including the request for the OSC to provide formal comment on the options for the future urgent care services in East Leicestershire and Rutland.

Policy Framework and Previous Decisions

3. ELR CCG has identified the need to ensure improvements in urgent care services within its commissioning intentions and operational plans in order to reduce pressure on emergency care services. For unscheduled and emergency care ELRCCG aims to change its working systems to optimise patient flows in urgent care services, ensuring that key stages of the patient journey are designed to improve health outcomes. Consistent with national policy and priorities, this means supporting patients to access services at the right place, at the right time and at the correct intensity level of care, including the expansion of urgent care services in community and primary care settings and the provision of services available seven days a week.
4. As part of the ongoing engagement process, in September 2013, the OSC received a briefing from Tim Sacks, ELR CCG Chief Operating Officer on the urgent care (minor injuries and illness review). At this meeting, the OSC welcomed the consultation plans and direction of travel; however, at this point the scope of the CCG's proposals excluded services in Oadby and Wigston as NHS England are currently (and were assumed to be) responsible for the commissioning of the walk in medical centre. The CCG has since been advised of a transfer of the open access component of this service, as identified in paragraph 11 of this paper.

Background

5. The urgent care (minor injuries and illness) review has been undertaken to ensure that East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG)

commissions safe, timely, effective and value for money minor injuries services that meet the needs of local people in the context of the broader urgent and emergency care system.

6. The review has been undertaken recognising that:
- current Urgent Care Services in ELR are inconsistent in their scope (see table below)
 - given the current variation in scope, hours and location of commissioned services, patients are confused about where to go for what service
 - there is significant variations in peoples' use of GPs out-of-hours services and minor injury/illness services
 - urgent care at walk-in centres and minor injury/illness centres usually means shorter waiting times than A&E and they are highly valued by patients who use them
 - research indicates that almost half of the people who went to minor injury and illness units would have gone to A&E if the unit had not been there. Given the current pressures on the A&E at Leicester Royal Infirmary and other neighbouring emergency departments, the CCG is committed to commissioning services that reduce, rather than increase activity through A&E.

7. The current provision of urgent care services in ELR is summarised below:

Current Location	Services and opening times
Rutland Memorial Hospital, Oakham	Minor Illness (nurse-led), Monday to Friday 8.30am to 6pm Minor Injury, 9am to 5pm No services at weekend or Bank Holidays
Market Harborough District Hospital	7 days a week, 9am to 9pm
Melton Mowbray Hospital	Weekends and Bank Holidays, 9.30am to 1.30pm
Latham House Medical Practice, Melton Mowbray	Monday to Friday, 8.30am to 6.30pm
GPs across ELR opting to offer Minor Injury Service	Monday to Friday, 8.30am to 6.30pm
Oadby & Wigston Walk-in Medical Centre	8am-8pm, 365 days a year
The following service is temporarily suspended on the grounds of clinical safety and limited utilisation:	
Feilding Palmer Hospital, Lutterworth	7 days a week, 9am to 9pm

8. The project has been managed through a structured approach, reporting to Tim Sacks and with defined clinical leadership. The CCG has welcomed the active and constructive involvement of representatives from Healthwatch Leicestershire and Healthwatch Rutland at its project team meetings. They have given insights from a patient's point of view and have been involved throughout the review.
9. ELRCCG's approach to the review to date has included:
- analysis of current urgent care (minor injuries and illness services), based on detailed analysis of activity and commissioning costs

- assessment of need for minor injuries services across ELR CCG, including the interface with minor illness provision
 - review of the evidence based for minor injuries and illness services, nationally and locally, including the Keogh Review of Emergency and Urgent Care and Monitor's Review of Walk in Centres
 - analysis of initial patient engagement
 - development of a clinical model for a 'see and treat' nurse led service in line with the Leicester Leicestershire and Rutland (LLR) urgent care pathway and aligned to other strategic priorities.
10. The National Clinical Advisory Team (NCAT) completed a desktop review in September 2013. Key recommendations included:
- confirmation that there was appropriate evidence to support public consultation on changes to the provision of minor injuries services (progressed through the process reflected in this paper)
 - recommendation that it would not be clinically or cost effective to consult on the re-initiation of the minor injuries service in Lutterworth (as reflected within the final options within this consultation)
 - recommendation that the CCG consult on an option of providing minor injuries and minor illness services through urgent care centres, no longer contracting for the provision of the day time minor injuries service with general practice (included as option 2 within this consultation).
11. In October 2013, the Leicestershire and Lincolnshire Area Team of NHS England advised that they were reviewing the future commissioning of the Oadby and Wigston Walk in Medical Centre. The Area Team has since confirmed that the commissioning responsibilities for open access component of the Oadby and Wigston Walk in Medical Centre will transfer to ELR CCG when the current contract expires on 31st March 2015. NHS England is currently considering its approach to the future commissioning arrangements for the registered list component of this service.
12. In light of the NCAT report and to inform future commissioning of services for all localities Leicestershire County Council public health colleagues have undertaken a demographic and spatial analysis to help identify the appropriate location for future minor injury and illness services that would best meet the needs of the local population. This has been supplemented by an externally commissioned review of access to services by current public transport services. It should be noted that ELR CCG's analysis was completed prior to the announcement of changes to public transport services. However we will continue to work with Leicestershire and Rutland County Councils to understand any potential impact on our proposals. We have also assessed the potential impact on future demand for services associated with planned housing developments across ELR.
13. During the initial engagement phase in 2012, the CCG asked people for their views on urgent care (minor injury and illness services). People responded that it was important to have services close to home, to be seen quickly by trained staff furnished with the right equipment and that adequate parking was available at the facility. People also said that good transport networks were important. Feedback during this initial engagement phase informed possible options on how urgent care services could be provided in the future.

14. The next pre-consultation stage of the engagement process (December 2013 to January 2014), reflecting the inclusion of the Oadby and Wigston service, used a variety of engagement methods, including surveys and engagement events, to ask stakeholders, patients and members of the public if they considered the draft options to be reasonable and if they were clear. The full engagement report is available from the [Get Involved](http://www.eastleicestershireandrutlandccg.nhs.uk/get-involved) section of our website (<http://www.eastleicestershireandrutlandccg.nhs.uk/get-involved>)
15. Key findings from the pre-consultation engagement are that:
 - the majority of people considered that the emerging options were clear and appropriate; however, people would like greater clarity on the hours of service and the difference between minor injuries and minor illness
 - over 95% people considered that it was important to be able access minor injury and illness services during the evenings and weekends
 - over 95% people felt it was important to be able to access urgent care services (for minor illness and injury) in local communities, so that people do not have to go to an A&E unit
 - nearly 75% people felt it was important to be able to access urgent care services (minor illness and injury) at their GP practice
 - access was a recurring issue throughout the engagement, both about the need to ensure local provision and concerns expressed regarding whether general practices would have sufficient capacity to provide timely access.
16. Public feedback from the pre-consultation engagement events asked the CCG to consider:
 - if it would be possible for all centres to be open for the same hours
 - if there was an opportunity for pharmacists to be involved more in the delivery of minor illness services
 - if all GPs were committed to delivering urgent care services
 - information on services be easily available
 - all options for the location of a service in Oadby, Wigston. Blaby or Lutterworth.
17. As that the initial patient engagement in 2012 did not include the Oadby and Wigston area (as the Walk in Medical Centre was out of ELR CCG's scope of commissioning responsibility at that time), an additional survey was undertaken for this area once it became clear responsibility would transfer to the CCG from 2015. Key findings are:
 - When asked where people would attend if ill or injured and where they would take someone else who was ill or injured, most people said they would attend either their general practice (first choice for minor illness or if they needed urgent help for a medical problem) or the walk in medical centre (first choice for minor injuries).
18. Public feedback from pre-consultation engagement activities offered several suggestions for alternative locations for a minor injuries and illness service across Oadby, Wigston and Blaby. As a result, ELR CCG commissioned Routeways to find out more about the views of public in relation to this, with 397 people responding to face to face surveys in January 2014.
19. As may be expected, people overwhelmingly vote for their own locality as the place they would most like the minor injury and illness unit. The next consideration is where their second preference is. In this Wigston was preferred, with over 60% of all areas preferring it as a second option. However, we have also considered public health

information (see paragraph 12) that indicates that Oadby and Wigston represent the areas of significant health need.

20. ELR CCG has also engaged with the following groups to secure feedback and provide assurance that the pre-consultation options are reasonable and sustainable:
- *ELR GP practice locality groups*: Within locality meetings (attended at key stages, including January 2014) representatives from all member practices have confirmed their support in principle to the emerging options. All practices have also confirmed that they would be willing to provide the minor injury service, including a commitment to ensure access to minor injury services within two hours of attendance
 - *NHS England Leicestershire and Lincolnshire Area Team*: ELR CCG has secured confirmation from the Area Team that the scope of minor injuries does not duplicate the provision of core primary care services. The Area Team has also participated in discussions regarding the provision of open access minor illness services during evenings/weekends/bank holidays (in addition to minor injuries) and retention of nurse led, open access minor illness and injury services in the borough of Oadby and Wigston, with no concerns identified. The Area Team has also completed assurance of our process to date, confirming support to proceed to public consultation
 - *Leicester, Leicestershire and Rutland Urgent Care Working Group*: the Urgent Care Working Group has received formal updates and will be consulted formally during the consultation period. Representatives have confirmed they would not support proposals that decreased access to open access urgent care services
 - *Neighbouring Clinical Commissioning Groups and Providers*: ELR CCG has liaised with other CCGs and providers of urgent care services to confirm the continued provision to the hours and scope of services accessed by the ELR population in neighbouring areas, in order to provide assurance to the sustainability of our proposals
 - *Health and wellbeing boards, local authorities and MPs*: ELR CCG has briefed and presented to Leicestershire and Rutland Health and Wellbeing Boards and elected representatives from Leicestershire and Rutland County Councils, in addition to local Members of Parliament regarding the proposals.
21. Clinical commissioning and public feedback has, therefore, influenced the development of the draft and final options for the future delivery of services and has been carefully considered throughout the review. Copies of the Leicestershire County Council report are available on the CCG's website.

Proposals/Options

22. The proposed future clinical model is based on a walk-in, nurse led (with medical back up) 'see and treat' service, with hours of opening and location of service subject to public consultation and external assurance.
23. Having listened to the views of local people and partner organisations and following careful and detailed analysis of all available data, the final options recommended for public consultation are set out below:

Option	Scope	Hours of Service
One	<ul style="list-style-type: none"> Minor injury only services at urgent care centres in Market Harborough, Melton Mowbray and Oakham during the week, weekends and bank holidays. Minor injury and illness service located within the Oadby & Wigston borough 365 days a year Minor illness and minor injury services at ELR GP surgeries during normal surgery hours 	Mon-Fri: 9.00-17.00 Weekends & Bank Holidays: 10.00 – 15.00 Mon-Fri: 8.30 – 18.30
Two	<ul style="list-style-type: none"> Minor injury and illness services at 4 urgent care centres: Market Harborough, Melton Mowbray, Oakham and located within the Oadby & Wigston borough. Primary care practices provide minor illness as part of normal service provision, but minor injuries services will not be available from GP practices. 	Mon-Fri: 8.00-20.00 Weekends & Bank Holidays: 9.00 – 17.00
Three	<ul style="list-style-type: none"> Minor illness and minor injury services at ELR primary care surgeries during normal surgery hours. Minor injury and illness services from 4 urgent care centres during weekday evenings, weekends and Bank Holidays: Market Harborough, Melton Mowbray, Oakham and Urgent care centre (minor injury and illness) within Oadby & Wigston borough 	Mon-Fri: 8.30 – 18.30 Evenings: 18.00 –21.00 Weekends & Bank Holidays: 9.00 – 19.00 Mon-Fri: 8.00 –21.00 Weekends & Bank Holidays: 9.00 – 19.00

24. While public feedback from people in Lutterworth showed strong desire for the reinstatement of the minor injuries unit at Feilding Palmer hospital (which was temporarily closed on the grounds of clinical safety in 2012), careful and detailed analysis of the available data regarding past use coupled with the spatial assessment and the provision of urgent care facilities in Rugby, raised significant concerns for the project team regarding the viability of an urgent care centre in this location.
25. NCAT summarised this in their assessment of our proposed model highlighting recognition of:
- Lutterworth patients' access to the urgent care centre at St Cross Hospital Rugby, which operates 24/7, with x-ray and other diagnostic facilities
 - the expressed commitment from local primary care services to offer minor injury services during core working hours, in the event that these are commissioned by ELR CCG
 - the historically low activity base for the service in Lutterworth (with only 525 patients seen in 2012 when the service was operational 12 hours per day, 7 days per week), which presented clinical safety issues when supported by nursing staff from the inpatient service but would not be viable to commission as a standalone service.
26. After careful consideration of all the available evidence, therefore, all of the options the CCG is now recommending for public consultation include the permanent closure of the minor injury unit in Lutterworth. However, under two of the options the CCG is proposing (options one and three) urgent care (minor illness and injury services) would be provided in Lutterworth by General Practice from Monday to Friday between 8.30am and 6.30pm. At all times and under all of the proposed options,

residents in Lutterworth would continue to have access to the Urgent Care Centre at Rugby.

27. It is important to note that other existing urgent care services outside ELR (for example, those in Stamford, Corby, Leicester, Loughborough and Grantham) will remain available in future.

Consultation

28. A robust consultation process is to be progressed in line with ELR CCG's commitment to involving patients, partner organisations and clinicians in decision making and the need to ensure the CCG meets its legal obligations to consult appropriately on any major service change.
29. The CCG is committed to ensuring the public can influence the way in which we commission healthcare on their behalf and fully recognises that any future model must meet local people's needs. Therefore, a detailed consultation plan (see Appendix 1) will be implemented during the eight-week consultation period, with ongoing monitoring to ensure that feedback is being received from across our population. If appropriate, activities will be added to provide further opportunities for people to express their views. The final consultation document is included as Appendix 2.
30. The plan details how we will ensure due regard to the nine equality characteristics that need to be considered comprising age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion/belief, sex (gender) and sexual orientation as well as how we will meet all legal duties in respect of public consultation.
31. We are committed to consulting widely and will use a variety of channels, in addition to the consultation document, to do this including (but not limited to):
- face to face engagement through public meetings
 - printed and online surveys including easy read versions
 - direct marketing and e-marketing our stakeholder database which consists of more than 5000 stakeholders including more than 200 groups which are traditionally 'hard to reach' and 180 of which fall under the nine protected characteristics
 - face to face 'outreach' conversations in various locations across ELR
 - promotion by staff out and about with the CCG's listening booth
 - promotion via colleagues from Healthwatch Rutland and Healthwatch Leicestershire;
 - promotion via our Patient Participation Group/Patient Reference Group Chairs' Network
 - through provision of information at practices and via GPs and practice staff
 - through provision of information at local services such as libraries and hospitals
 - press releases to the local media (television, radio and written press)
 - engagement through social media
 - information delivered through partner organisations.
32. During the pre-consultation engagement phase, a number of very useful suggestions were made by members of the public in relation to where and how they would like to receive information during the consultation. These suggestions have been taken into

account in the development of the plan. The CCG will also be discussing the plan with ELR CCG's newly-formed Patient and Public Engagement Group who will give views on any ways in which it can be strengthened.

Resource Implications

33. The proposals are about improving urgent care; they are not about saving money. All of the options are within 5% of the current commissioning budget (£2.1m).

Timetable for Decisions

34. An independent organisation has been commissioned to complete the post consultation analysis of all the feedback received during the consultation process. The report will contain detailed information on the consultation process, including the consultation outreach, demographic breakdown and responses. The results of this analysis will be reported, with the final recommendation for commissioning to the CCG's Governing Body in June.

Conclusions

35. The Health Overview and Scrutiny Committee is asked to provide a formal response as a valuable partner during the public consultation period to the options for the future commissioning of urgent care (minor injuries and illness) in East Leicestershire and Rutland.

Background papers

ELR CCG Urgent Care MIU Pre-Consultation Patient Engagement Report
Leicestershire County Council Urgent Care Analysis

Circulation under the Local Issues Alert Procedure

The report relates only to services within the East Leicestershire and Rutland Clinical Commissioning Group boundary, including the districts of Blaby, Lutterworth, Oadby, Wigston, Market Harborough and Melton Mowbray.

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List of Appendices

Appendix 1 – ELR CCG Urgent Care Consultation Plan
Appendix 2 – ELR CCG Urgent care Consultation document

Relevant Impact Assessments

Equality and Human Rights Implications

36. An Equality Analysis and due regard to the positive general duties of the Equality Act 2010 has been undertaken in relation to the Urgent Care (minor injuries and illness) Services Review. This has been further informed by analysis of feedback from pre-consultation engagement and demographic / spatial analysis in relation to people from protected groups.
37. Further analysis and work to involve our communities in line with our statutory duties will also be undertaken in line with the public consultation process.

Crime and Disorder Implications

38. Not applicable

Environmental Implications

39. Not applicable

Partnership Working and associated issues

40. Not applicable

Risk Assessment

41. The principal risk associated with this paper is associated with the potential Failure to Comply with Duty to Involve and Consult with patients, public and stakeholders as within Section 11 of the Health and Social Care Act 2001. The proposed approach to consultation and engagement detailed in section 9 of the paper will mitigate against this risk.
42. ELR CCG also recognises that there are risks that patients and the public do not understand the differentiation between urgent and emergency care services, which would reduce the efficiency and effectiveness of service provision. Whichever option is finally agreed, significant work will need to be undertaken to communicate the new arrangements. This will include raising clinical, patient and public awareness of how, where and when to access services. Suggestions made by the public during pre-consultation engagement will be considered and plans worked up once the decision over the future of services made

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