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Date	Tuesday, 15 January 2019
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Title of paper	Primary and urgent care proposals – Pre-consultation Business Case
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Presenter	Janet Cree, Managing Director				
Author	Janet Cree, Managing Director				
Responsible Director	Janet Cree, Managing Director				
	Approved report Yes				
Clinical Lead	James Cavanagh, Vice-Chair H&F CCG				
Confidential	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Items are only confidential if it is in the public interest for them to be so
Assurance Level Agreed by Responsible Director	Good <input type="checkbox"/>	Adequate <input type="checkbox"/> YES	Limited <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>	

- The Governing Body is asked to:**
- **Approve** the pre-consultation business case
 - **Approve** the CCG starting public consultation on the proposals set out in the pre-consultation business case (subject to NHS England assurance).
 - **Approve** the consultation approach set out in the pre-consultation business case

Summary of purpose and scope of report

This paper from Hammersmith and Fulham CCG looks at the urgent care and out of hours primary care provision in the borough and makes proposals about the hours of those services.

Included is the case for change which includes the digital vision of the CCG to increase ease of access to services, the current usage of the two urgent care centres and the out of hours services as well as the public and stakeholder engagement to date and plans for consultation. Plans for consultation have taken into account best practice identified through The Consultation Institute and by looking at the Council's own approach.

The CCG is looking at this now as it is under financial pressure and needs to ensure it is using

money in the most efficient way. The urgent care contracts are up for renewal so it is an opportune time to look at the current demand for services and to discuss whether savings can be made by reducing services when there is little or no usage from residents. Our data suggests that what we are currently paying for is not good value for money.

The proposals, set out in chapter 4, are:

- To make no changes to the Urgent Care Centre at Charing Cross
- To change the hours of the Urgent Care Centre at Hammersmith Hospital to close it overnight from Midnight to 8am when it has a low volume of attendances and the majority do not require the services of the UCC.
- To reduce the number of GP appointments available outside the core hours of 8am to 6.30pm by 155 GP appointments a week in line with demand
- To look at the number of hubs providing weekend plus services to all Hammersmith and Fulham residents registered with any GP in the borough.

The consultation is currently planned to start in early February 2019, subject to appropriate assurance and decision making. It will cover the whole borough and neighbouring boroughs where there is a regular flow of activity to Hammersmith UCC.

Consultation period is planned to be over six weeks. We will develop printed materials and a section on our website for all the information on the proposals as well as questions for people to respond to. Translations would be available online or on request. More information on this is set out in chapter five.

Jargon buster

Primary care - These are services, generally outside of a hospital, where a patient will often first access the NHS. It includes GPs, pharmacists and dentists.

Urgent care – NHS services provided for when you need care quickly but it is not a life threatening emergency. It includes services such as Urgent Care Centres which are found at some hospitals.

Pre-consultation business case – A document which sets out why an organisation feels it is ready to go to consultation. It sets out the reasons why they want to make changes, gives evidence and background, explains what it would ideally like to do and explains how it will talk to the public about the plans.

Commissioner – The side of the NHS that decides which services are going to be purchased and provided in the local area.

Provider – The side of the NHS that delivers the care to patients.

Emergency Department – Also known as an A&E. This is where you go when you have a life threatening emergency.

Urgent Care Centre – A GP led service, generally at a hospital, where you can walk in when you need to be seen there and then.

Urgent Treatment Centre – A new name which will reduce the number of different names that urgent walk in services are known by (i.e. Urgent care centre, walk in centre, minor injuries units).

Quality & Safety/ Patient Engagement/ Impact on patient services:

Quality and Safety

The London Clinical Senate considered the proposals from Hammersmith and Fulham CCG and provided a formal response which can be found in the appendices.

The Senate supports the proposed change to opening hours at the Hammersmith Charing Cross Hospital and the CCG's initial proposals for a new model for primary and urgent care in Hammersmith and Fulham. It finds that the proposed change to the opening hours of the Hammersmith UCC:

- is clinically safe
- will improve the safety of care when compared to the current model.
- will not materially affect the capacity of out of hours primary care services in Hammersmith and Fulham to provide a service to the residents of the borough

Patient Engagement

To date, the CCG has engaged with members of the public on primary and urgent care access at a number of local community events, focus groups and patient engagement events.

We have heard a range of views from the public, some of which have fed into our planned consultation approach and some of which are more relevant to the consultation itself and will therefore be considered at the appropriate time. A full list of the themes and feedback received to date can be found in appendix 11 and events held can be found in appendix 12.

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Finance, resources and QIPP

It is estimated that the financial implication of the proposals in this document would be a cost saving in the region of £1million per year for Hammersmith and Fulham.

Equality / Human Rights / Privacy impact analysis

An equalities screening assessment has been undertaken. It is encompassed in the report and will be considered in the on-going engagement.

Risk	Mitigating actions
<p>Risk HF163 - Primary Care Access Work Programme – captured in the CCG’s Corporate Risk Register</p> <p>There is a risk that we do not deliver the 18/19 engagement elements of the Primary Care Access Work Programme and fail to achieve effective engagement outcome, due to lack of resources and time, in order to meet the commitments set out in our comms and engagement strategy</p>	<p>Discussions with lawyers on the legal aspects were undertaken by Mark Jarvis in September 2018. Paper was produce and presented to NHS England (London) clinical senate for consideration of the clinical rationale of any change.</p> <p>Paper was taken to PAC in early December following the outcome of the Senate meeting with the aim of obtained PAC’s comments on the proposed consultation process. The pre consultation business case paper due to go to the 15th Jan governing body will lay out how PAC will be consulted during the formal consultation process.</p> <p>UPDATE 23.10.18 It may be possible to consider reducing this risk due to the additional resource of Sarah Bellman, NW London Assistant Director of Communications and Engagement. Sarah is joining the team two days a week to support planning and running primary and urgent care access. However, it would be advisable to hold off on this until the necessary budget for the engagement and equalities work has been identified.</p> <p>UPDATE 31.12.18 - Sarah Bellman provided 2 day support per week until 1st January 2019. However due to limited capacity in the NWL communications team this arrangement will reduce from January 2019. To mitigate this, the engagement lead will discuss with the NWL comms team what resource they can provide between Jan-March 2019. Further mitigating will be undertaken in the form of a clear timeline indicating what level and type of resource will be required and when.</p> <p>The additional mitigating actions identified are reviewed frequently.</p>

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Supporting documents

Primary and Urgent Care pre-consultation business case

- Appendix 1: Draft NW London Urgent Treatment Centre key performance indicators
- Appendix 2: Hammersmith UCC - Socio-economic characteristics of attendees, 17/18
- Appendix 3: Hammersmith UCC – Location of night attendances, 17/18
- Appendix 4: Hammersmith UCC – Night attendances by distance to UCC, 17/18
- Appendix 5: Charing Cross UCC – Socio-demographic characteristics of attendances, 17/18
- Appendix 6: Charing Cross UCC – Location of night attendances, 17/18
- Appendix 7: Charing Cross UCC – Night attendance by distance to UCC, 17/18
- Appendix 8: 24/7 services in NW London
- Appendix 9: Weekend plus options
- Appendix 10: EHIA screening
- Appendix 11 Public and stakeholder feedback to date
- Appendix 12 Pre-consultation engagement events
- Appendix 13 Clinical Senate Report

Conflict of interest

None identified in producing this paper.

Governance and reporting

(list committees, groups, other bodies in your CCG or other CCGs that have discussed the paper)

Committee name	Date discussed	Outcome
N/A		