Have your say on developing local urgent care services

www.makinghealthsimple.org

Public consultation | 11 January - 1 April 2016
Who are we?

We are NHS South Tees Clinical Commissioning Group (STCCG) which is the NHS organisation responsible for planning, choosing and buying (commissioning) the majority of healthcare services for people in South Tees, such as those from hospitals and community services.

Approximate population registered with a GP

290,000
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Introduction

Thank you for taking the time to read this booklet which provides an opportunity for you to have your say about potential changes to the way we deliver urgent care services in South Tees.

By urgent care we mean, the range of health services available to people who need urgent advice, diagnosis and treatment quickly and unexpectedly for needs that are not considered life threatening. Excluded from this is emergency care which is defined as ‘immediate or life threatening conditions, or serious injuries or illnesses.’ Examples of urgent care services are:

- NHS 111
- Pharmacy
- Local doctor services (GPs), during and outside normal working hours
- Walk-in Centres
- Minor Injury Services.

We began a review of urgent care services and from July to September 2015 we asked local people about their experience of using services and for their views on how they could be improved. Feedback from this engagement activity can be viewed at our website at: www.makinghealthsimple.org.

In summary, people told us that the current system is confusing and needs to be much simpler. This feedback has helped us to develop a range of options for the future. These options have also been informed by key national guidance which directs us to further develop the NHS 111 telephone service and to also increase GP surgery opening hours to cover weekends and evenings. In order for us to make these improvements, we will need to change the way we deliver services. To do nothing is not an option.

Now we are asking for your views on proposals we have developed as a result of both public feedback and this national guidance.

The views of local people are extremely important to us. This public consultation is therefore designed to listen to your views. No decision will be made until the end of the consultation. This document summarises our proposals and also informs you about the many ways in which you can have your say.

We look forward to hearing your views.
What is urgent care?

‘Urgent care’ is defined as ‘the range of health services available to people who need urgent advice, diagnosis and treatment quickly and unexpectedly for needs that are not considered life threatening’.

Excluded from this is ‘emergency care’ which is defined as ‘immediate or life threatening conditions, or serious injuries or illnesses’. These conditions or illnesses are usually dealt by 999 calls and A&E departments.

This is how urgent care services are currently delivered in South Tees:

**Self-Care**
Around 80% of adults can manage common illnesses like coughs and colds using medicines that can be easily bought in shops or at the local pharmacy.

**Pharmacy**
Local pharmacies prepare and supply prescription and non-prescription treatments and offer advice and support people to manage long-term conditions. Most provide contraception and flu vaccination services. Some provide specialist drugs. In South Tees we have 62 community pharmacies with 12 pharmacies (6 in Redcar and Cleveland and 6 in Middlesbrough) which offer up to 100 hours of opening per week, (usually 7am to 11pm Mon to Sat, and 8 am to 8 pm on Sunday).

**NHS 111**
NHS 111 is an easy to remember national freephone NHS non-emergency number phone number that has been in place across South Tees since April 2013. Available 24 hours a day 365 days a year, users speak to a highly trained adviser, supported by healthcare professionals. Advisors ask questions to assess symptoms and immediately direct users to the best medical care.

**GP Practice (usually open 8am to 6pm)**
We have 46 GP practices providing NHS services. They are the only service to hold a complete patient health record. They work closely with community health and social care teams. Some practices offer other services from their buildings, such as physiotherapy, podiatry, x-ray and pharmacy.
Mental Health Services
A mental health team is based in James Cook University Hospital’s A&E department and in-patient wards. There is also a 24 hours a day service for patients experiencing a mental health crisis and a Crisis Assessment Suite at Roseberry Park Hospital can also be accessed on a walk-in basis.

Emergency Dental Services
Dentists provide emergency treatment for patients in surgery hours if the patient is registered with them. If the patient is not registered, information is available on NHS Choices website or through NHS 111. When a patient has dental pain out-of-hours, NHS 111 will direct them to the out-of-hours emergency dental service for advice or an appointment.

Ambulance Service
The ambulance service receives and responds to 999 calls, assesses patient need and provides an appropriate response. This includes the ‘hear and treat’ service where trained staff provide advice and guidance over the telephone.

Minor Injuries Units
Located at Redcar Primary Care Hospital and James Cook University Hospital, these nurse-led services are open 24 hours a day, 365 days a year. They treat a range of minor injuries, including sprains and strains, broken bones, wound infections, minor burns and scalds, minor head injuries, insect and animal bites, minor eye injuries, injuries to the back, shoulder and chest. At the Centre in Redcar, x-ray cover is provided from 8am to 6pm Monday to Friday and 9am to 4pm at weekends with some GP cover provided from 8pm to midnight 7 days per week.

Walk-in Centres
There are two Walk-in Centres in South Tees located approximately 4 miles apart, one within Resolution Health Centre, North Ormesby and one within Eston Grange NHS Health Centre. They treat minor illness and injury, with no need to book an appointment. Centres are open 8am to 8pm, 7 days a week with access to pharmacies. Walk-in Centres have no access to patient records. There is no service in East Cleveland.

Mental Health Services
A mental health team is based in James Cook University Hospital’s A&E department and in-patient wards. There is also a 24 hours a day service for patients experiencing a mental health crisis and a Crisis Assessment Suite at Roseberry Park Hospital can also be accessed on a walk-in basis.

GP Out-of-Hours Service (usually 6pm to 8am)
People can see a doctor or other health professional when their GP surgery is closed. The service is accessed through 111 and offers a combination of home visits or face to face appointments in centres based in Middlesbrough and Redcar. The service can access support from other community and social care services. The out-of-hours service does not have access to full patient records.

Accident and Emergency
Accident and Emergency (A&E) is a service for emergencies. It is NOT an urgent care service. However, it is sometimes used inappropriately for urgent care needs.

In 2014/15, 44% of our A&E patients were discharged without requiring any treatment.
Why urgent care services need to change

Local NHS healthcare needs are increasing as people live longer lives. More and more people are using NHS services every year, increasing the pressure on an already overloaded system.

Understanding local challenges

In July 2015, STCCG produced a case for change discussion document, which described the current services and challenges faced, illustrated across:

- Complex System
- High cost of some services
- Service Duplication
- Patient Demand
- Patient Confusion
- URGENT CARE
- Patient Demand

We believe that urgent care services should:

- Provide consistently **high quality and safe care**, seven days per week
- Be **simple**, ensuring the urgent care system **works together** rather than pulling apart
- Provide the **right care**, at the **right time** in the right place by those with the right skills, first time
- Acknowledge that **prompt** care is good care
- Deliver care **closer to home** where appropriate and safe to do so
- Be **efficient and effective** in delivery of care for patients.
Why urgent care services need to change

Services are complex and confusing

Our evidence shows that the majority of patients do not access urgent services routinely. Therefore it is really important that they are as clear and straightforward as possible to navigate. Currently in South Tees we have a range of different services as outlined in the introduction, delivered by a range of providers.

This can lead to confusion for patients and provides challenges in the different services being able to effectively communicate and share information for the benefit of the patient. Our data suggests that patients are not always seen in the most appropriate place first time.

Demand

General demand for health services locally is in line with the national picture and continues to grow. For example, the number of emergency admissions in South Tees is higher than the national average. Furthermore, in South Tees we have the second highest rate of admissions for conditions which shouldn’t usually require a person to be in hospital.

Locally we have seen growth in demand for primary care (GP and community services in and out of hours).

Whilst we have not seen overall growth in A&E attendances, we know that in 2014/15 44% of our patients could have been treated more appropriately elsewhere. This would have enabled A&E to better meet the needs of those people with more serious illness and injury and help ensure that no patient waits more than 4 hours to be assessed, treated and discharged.

Some of our urgent care services do not have opening times that reflect demand. For example, we see surges in demand at GP practices on Monday mornings and at Walk-in Centres and A&E between 6pm and 8pm when GP practices are closed. In addition, demand at the MIU at Redcar Primary Care Hospital significantly reduces after 9.30pm (approximately 2 patients per hour).

Duplication in the system

There is currently duplication with services providing similar treatments within a close proximity, often at the same time, leading to confusion for patients as to where to seek care. 68% of local patients attending the Walk-in Centre are referred back to their own GP. This adds to duplication, not only for the patient but also for the local health system. This duplication is also impacting on the availability of the current workforce.

Nationally and locally there is a shortage of GPs and other health professionals involved in urgent and emergency medicine. There is recognition that current service duplication is diluting this scarce workforce resource and our options take this into account.

Cost of urgent care is high

The current cost of delivering the urgent care system in South Tees is approximately £8.6M and whilst our proposals are not about cost savings, we want to ensure that we use our money much more effectively to the benefit of our local people, recognising the growing health care demand, an ageing population and the need to sustain services for the future.

In order to deliver 7 day access to GP practices, as per national guidance and public feedback we cannot afford to duplicate services, thus our proposals include replacing Walk-in Centres with greater GP access 7 days a week in more locations across South Tees.
National Policy/Strategic Direction

In response to increasing pressure on the health care system, the government carried out a comprehensive review of the NHS urgent and emergency care system in England. The overall objective of the review was to consider how to improve services for patients across the spectrum of urgent and emergency care, and to identify potential solutions. It made a number of recommendations including working towards a 7 day NHS service. Further guidance has since been issued which requires us to deliver 7 day GP services by 2020. Clearly our proposals need to take this into account and build upon the work already being piloted by our local GPs to increase access over 7 days.

In September 2015, NHS England published further guidance for CCGs - ‘Integrated Urgent Care Commissioning Standards’. This document recommends improvements for the NHS 111 service model that must be adopted by all CCGs. It outlines NHS England’s vision for urgent care which has also been taken into account when drawing up our proposals.

This includes:
- Access to a summary patient record
- Increased telephone access to a range of clinical professionals working within the 111 service
- An expanded directory of services in order to signpost more people to appropriate support
- The ability to book appointments into GP practices and other relevant services.

Have your say on developing local urgent care services
To support the public engagement, South Tees Clinical Commissioning Group produced a case for change document which described the current services and challenges.

This engagement helped us to:

- Understand the experience of using current, local urgent care services
- Understand how urgent care services could be improved
- Develop criteria which we could use to evaluate potential urgent care scenarios
- Gain feedback on the potential scenarios
- Ensure a balance between clinical and public perspectives within the scenarios
- Better understand the reported confusion around access to face-to-face services, and treatment provision within South Tees.

If you require further detailed information please find this in the Engagement Report on www.makinghealthsimple.org

Or request a copy of the report by calling 01642 745401

Or email stccg.makinghealthsimple@nhs.net
In July 2015 the CCG embarked upon a detailed programme of public engagement to understand how to improve urgent and emergency care. Engagement activity included:

- Discussion Groups
- Questionnaires
- Street Surveys
- Working with the voluntary sector to engage minority and disadvantaged groups and communities.

We spoke to around 1,500 people in total including people from a wide range of different backgrounds.
A number of people said they wouldn’t use A&E if they knew the correct service to use and 90% of respondents felt that A&E was being used inappropriately and to quote, ‘wanted us to toughen up on people who don’t need to be there’.

Almost 50% of people thought that A&E should be for serious emergencies only. Suggestions for changing this were:

• Educating patients about the A&E Department
• Making GPs more accessible/longer hours
• Signposting patients to more appropriate services.

Urgent care

Most people found urgent care difficult to understand and confusing. In summary:

• People don’t know which service to access and they don’t know what each service does
• Need more information and greater promotion of urgent care services.

People identified the following as important when choosing which service to use:

• Seeing the right health professional
• Having information about the services/knowing which service to access
• Service close to where live
• Getting an appointment at a suitable time.

NHS 111

Although a number of respondents were not aware of NHS 111, generally people had a positive experience, call back times were good and if referred on, people felt they were seen quickly and efficiently.

Some reported that the service could feel impersonal and time consuming. Communication was seen as a barrier where English was not the first language.

You told us:
**Self-care**
Most people do treat themselves but felt they would benefit from more support and from health professionals as this would build confidence.

**Patient information**
A number of people felt that sharing patient information across services would ‘instantly’ improve urgent care services.

**Advice from pharmacist**
97% of people knew that they could get advice from a pharmacist but less than 50% did so with the main reasons given as lack of privacy or feeling that the pharmacist is too busy.

**GP appointments**
When asked about access to their GP surgery, only a very small number of people had not been able to get an appointment.
The levels of satisfaction people felt regarding seeing their GP or practice nurse and their problem being dealt with was high.
There is variation between GP practices in the way appointments are booked and managed. **The majority of people said they would welcome telephone consultations.**
You told us:

**GP Out-of-Hours (OoH) Service**
- 35% (online survey) didn’t know how to contact the GP OoH service
- Some people would use it more if there was a quicker response
- Travel costs would prohibit some people using the service if asked to attend a centre which was not local.

**Walk-in Centres**
Via the online survey the main reasons for people attending walk in centres were:
- Too long to wait for GP appointment
- Medical need
- More convenient.

Reasons for NOT attending Walk-in Centres:
- Location - too far to travel
- Don’t know they exist
- Don’t like the location/feel unsafe while waiting
- Past experience of using service.
How we developed our options

Potential scenarios

We started by developing a large number of potential scenarios that we thought might make urgent care services better. These were informed by the public engagement, as well as input from local doctors, the CCG and stakeholders such as our two councils and NHS England.

In addition, Healthwatch Middlesbrough and Healthwatch Redcar and Cleveland acted as a ‘critical friend’ through the scenario development process. This helped us to make sure that the views of the public were appropriately reflected in the scenarios.

We developed a set of criteria to assess all of the scenarios that measured things like:

• Patient experience
• Quality
• Deliverability
• Efficiency
• National policy.

The public were also involved in deciding what should be included within the criteria that we used.

A combination of this criteria and scoring helped us develop our final scenarios and the top six were taken forward.

The diagram below illustrates how scenarios were generated, appraised and then put forward for financial assessment.
How we developed our options

Stage 1: Scenario Generation

As discussed previously we started with a number of ideas (or scenarios) that we thought would make urgent care services better. These were informed by what people had said during the engagement we had already completed. It was also informed by local doctors, the CCG and stakeholders such as our two councils and NHS England.

Extended GP hours and improvement of NHS 111 must be implemented under national policy, so we didn’t develop specific scenarios relating to these.
Stage 2: Scenario Appraisal

With the support of our local doctors, our CCG dedicated patient group, and the information received from our public engagement work, we developed a set of criteria to assess all of the potential scenarios. This was divided into sections:

**Quality of patient experience which included:**
- Ease of understanding
- Home visits available 24 hours a day 7 days a week for appropriate patients
- Flexible and convenient appointments to meet the needs of all patients
- Services delivered close to home

**Capacity and Efficiency which included:**
- The ability to ensure patients get the right service at the right time, first time
- Equitable access for all patients
- A new model which would be able to cope with demand
- Avoiding duplication of services

**Deliverability and sustainability which included:**
- Cater for patients of all ages at all times
- Ability to link with 111
- In line with national guidance
- Sufficient skilled workforce

**Clinical Quality which included:**
- Improved outcomes for patients
- The ability to respond to urgent and crisis needs
- Tailored care for patient
- Prompt response times
- Sharing of patients records

**Finance which included:**
- Cost effectiveness
- Ability to deliver new services within our current urgent care budget

The following table lists the scenarios that did not meet the criteria. These were therefore not taken forward beyond this stage.
A combination of the criteria and scoring helped develop six final scenarios. Healthwatch Middlesbrough and Healthwatch Redcar and Cleveland acted as a ‘critical friend’ throughout this process. This helped to make sure that the views of the public were appropriately reflected in the scenarios.
Stage 3: Options selection

The scenarios that met and scored well against the criteria then became the final three options that we are asking you to comment on.

**OPTION 1**
- 6 extended hours GP Centres
  - 6pm to 8pm Weekdays
  - 8am to 8pm Weekends
- GP working in front of house at JCUH A&E department
- GP Out-of-hours reduced
  - 8pm to 8am
  - 7 days a week
- GP led MIU with x-ray
  - JCUH open 24/7
  - RPCH open
  - 8am to 9.30pm

**OPTION 2 - OUR PREFERRED OPTION**
- 4 extended hours GP Centres
  - 6pm to 9.30pm Weekdays
  - 8am to 9.30pm Weekends
- GP working in front of house at JCUH A&E department
- GP Out-of-hours reduced
  - 9.30pm to 8am
  - 7 days a week
- GP led MIU with x-ray
  - JCUH open 24/7
  - RPCH open
  - 8am to 9.30pm

**OPTION 3**
- 8 extended hours GP centres
  - 6pm to 8pm Weekdays
  - 8am to 8pm Weekends
- GP Out-of-hours reduced
  - 8pm to 8am
  - 7 days a week
- GP led MIU with x-ray
  - RPCH open
  - 8am to 9.30pm
  - James Cook open 24/7

The CCG believes Option 2 is the best option because:

1) It is the optimum affordable solution
2) It offers extended opening in primary care (til 9.30pm) that matches demand
3) It reduces confusion and makes services simpler for people to understand. After 9.30pm people would call 111 and be directed to the most appropriate service (MIU at JCUH or GP OoH service). This would provide the right care, first time.
We want to transform urgent care by ‘designing a simpler, more responsive and cost-effective system. This will give streamlined access points that makes sense to patients and helps them get the right care in the right place, first time’.

**In future:**

**To further help you self-care**

You will have access to more information and guidance in a variety of formats. This will be written guidance provided by a health professional or accessed on-line.

If you are not sure whether you need to see a GP or health care professional and need some advice on which service you can access you can ring 111. They will have detailed information on local services and will be able to signpost you to the most appropriate service based on your reported need. They will also call upon health professionals within the service if required and be able to make an appointment for you at a GP surgery or other service if required.

You will be able to visit a Pharmacist who would be able to deliver more treatments and advice in the community.

**If you need to see a GP**

During the day there will still be 46 GP practices open between 8am and 6pm. NHS 111 will also be able to make appointments for people at their own GP.

In addition, extended hours GP centres (a cluster of GP practices, with access to your records, working together in a shared facility) will have longer opening hours.

GP Out-of-Hours service will be reduced to take into account the new times of these centres and will consist of home visits and consultations as they do now, accessed through NHS 111.

As the extended hours GP centres will be in place and will be provided nearer to you, the Walk-in Centres will no longer be required as they are duplicating the new service.
If I have a minor injury

For example, a sprain, strain, broken bone, wound infection, minor burn or scald, minor head injury, insect or animal bite, minor eye injury or injuries to the back, shoulder or chest.

You will be able to go directly, or NHS 111 will direct you if required, to a Minor Injuries Unit at either Redcar Primary Care Hospital or James Cook University Hospital.

James Cook University Hospital will be open 24 hours a day and Redcar Primary Care Hospital will be open 8am to 9:30pm. After you attend Redcar Primary Care Hospital, if your injury is found to be more serious, you may still have to travel to James Cook Hospital for more specialised care.

In Redcar Primary Care Hospital there would be extended x-ray availability up to 9:30pm. To avoid confusion, after 9.30pm every day of the week, James Cook University Hospital would be the single point of contact for minor injuries.

Accessing other urgent care services

For mental health, the ambulance service and emergency dental services, existing arrangements will remain unchanged.
How you can have your say

We are keen to hear your views, experiences and ideas about how we can improve urgent care services across South Tees. There are lots of ways to get involved.

To make sure your voice is heard, you can share your views in the following ways:

Online survey:
Visit: www.makinghealthsimple.org

A paper version is also available by calling 01642 745401

Email us:
stccg.makinghealthsimple@nhs.net

Twitter: @SouthTeesCCG

Facebook: www.facebook.com/STurgentcare

Write to us:
NHS South Tees Clinical Commissioning Group,
North Ormesby Health Village,
First Floor,
14 Trinity Mews,
Middlesbrough
TS3 6AL

Public Consultation events:

**Middlesbrough**
Wednesday 20 January 2016: 5 to 7pm
Trinity Centre, James Street, North Ormesby,
Middlesbrough TS3 6LD

**Guisborough**
Friday 29 January 2016: 12 to 2pm
Parish Church of Guisborough, The Rectory,
Church Street, Guisborough TS14 6BS
(St Nicholas)

**Eston**
Saturday 6 February 2016: 12:30 to 2:30pm
Inspire To Learn, Eston City Learning Centre,
Normanby Road, Middlesbrough TS6 9AE

**Skelton**
Tuesday 16 February 2016: 5 to 7pm
Skelton Civic Hall, Coniston Road,
Skelton TS12 2EY

**Skelton**
Saturday 27 February 2016: 2 to 4pm
Skelton Civic Hall, Coniston Road,
Skelton TS12 2EY

**Eston**
Thursday 10 March 2016: 5 to 7pm
Inspire To Learn, Eston City Learning Centre,
Normanby Road, Middlesbrough TS6 9AE

**Middlesbrough**
Saturday 19 March 2016: 11am to 1pm
Trinity Centre James Street, North Ormesby,
Middlesbrough TS3 6LD

**Redcar**
Thursday 31 March 2016: 12 to 2pm
Tuned In, Majuba Road, Redcar TS10 5BJ
NHS 111

Does this mean that every time I want to make an appointment with my GP, I have to ring 111 first?

No, you don’t have to. You should ring your GP first and if they cannot accommodate your urgent need the practice will arrange an appointment for you in one of the GP Centres.

Will I be given a choice of where I can attend for a GP appointment if my own surgery is not available – for example if I need to go to one of the extended hours GP centres?

Yes, where possible you will be offered a choice of venue and time. However during busy times it may be that choice will be limited.

Will a doctor or nurse answer my call when I ring 111?

Not initially, your call will be answered by an experienced call handler who will ask you a series of questions. After this assessment, you may be transferred to a doctor, nurse or other health professional who will ask you further questions and make recommendations on what you need to do next.

Will 111 direct me to a GP appointment every time?

Not necessarily. You may just be given advice which meets your need or directed to another more appropriate service, e.g. a pharmacist, a falls service, a district nursing service, a Minor Injury Unit or A&E.

Will 111 be able to book an appointment for me to see a GP directly if I need one or will I then have to make another call myself to make an appointment?

Yes, in the future NHS 111 will have access to appointments, not only in your GP surgery but in the extended hours GP centres, minor injury and other health services.

Does NHS 111 have access to my medical record?

NHS 111 would have access to a summary of your medical record.

Is it free to ring 111?

Yes, this is a free phone number. Also remember NHS 111 has a website which offers useful advice and guidance around how to manage conditions and where to access local services.

GP Centres

Will I be able to see my own GP if I have an appointment at an extended hours GP centre?

In an extended hours GP centre you may not be able to see a doctor from your own practice but he/she will have full access to your medical notes.

Will the centre have access to my medical record?

Yes, this will enable the GP to have a holistic view of your health and be able to offer personalised support. You will be asked to give your consent to sharing this information first so if you do not want the centre GP to see your record you don’t have to give permission.
Will my own GP surgery be able to make me an appointment in the extended hours GP centre?

Yes, when your own surgery is not able to accommodate you, they will be able to make you an appointment in the centre.

If the appointments offered to me by my own GP surgery are not convenient, will I be able to book an appointment in the extended hours GP centre after hours or on a Saturday or Sunday?

Yes, it may be possible to do this. Obviously this will depend on availability and the urgency of your need.

Will the appointments in the extended hours GP centres just be for urgent conditions?

No although urgent needs will be prioritised. The new extended hours GP centres will offer more convenient routine appointments for people too.

Minors Injuries

Do I need to make an appointment to go to one of the Minor Injuries Units or can I just turn up?

You can just turn up. However, NHS 111 would be able to book you an appointment which could potentially avoid a longer waiting time. Also NHS 111 will ensure that a Minor Injury Unit is the most appropriate place for you to go to.

What will happen if my injury turns out to be more complex than first thought?

The staff in the minor injury will always do their best to treat you, calling upon all the expertise within the unit. If your injury is something the Minor Injury Unit can’t deal with, you will be transferred to a specialist A&E doctor. For those patients in Redcar, this will mean that you will need to be transferred to James Cook University Hospital.

Will the minor injury unit have an x-ray department?

Yes, although more complex injuries may need to go to James Cook University Hospital for an x-ray.

Out-of-Hours

What should I do if I feel ill during the night and want to see a doctor?

You should contact 111 who will advise you the best treatment or course of action.

What will happen if I am a patient at one of the GP surgeries that delivers walk in appointments, i.e., Resolution or Eston?

The consultation relates to urgent care services. If you are registered with a GP based at Resolution or Eston, this will not be affected by this consultation, and you will continue to access your GP as normal.

NHS England Cumbria and the North East commissions local GP services. At this stage, no decision has been made regarding GP services at both Eston Grange Health Centre and Resolution Health Centre. NHS England will be working with South Tees CCG to look at all feasible options and talking with patients and stakeholders before any decision is made.
How we will use your feedback

We know it is really important to keep you updated, especially when you have taken the time to share your thoughts and views with us.

At the end of the consultation, we will write a report. The CCG Governing Body will look at the report and use the information and views to decide how best improve urgent care services across South Tees.

We will share the report with you and make sure it is available on our website. Please remember to leave your contact details with us if you would like a copy.

The CCG recognises that the consultation relates to complex services, options and issues. If you need more information to help you respond to the consultation, or have any further questions please contact the CCG by:

telephone on 01642 745401
or email at stccg.makinghealthsimple@nhs.net
It is recognised nationally that we don’t have the GP workforce or potential demand to offer 7 day GP extended hours in every practice. It is therefore recommended that GP practices work together to deliver these services to populations of at least 30,000 or more although this can be determined locally.

South Tees has a number of health buildings ranging from community hospitals, health centres and GP properties. Over the last 5 years there has been significant investment in these premises and we will be keen to use this space to deliver our extended hours GP Centres.

We will assess their suitability by applying criteria such as ease of access, (location, health & safety and car parking), available space, value for money, and quality of the building (the property must meet NHS Standards).

In order to identify where we should locate the extended GP Centres for each of our options, we have divided a map of South Tees into areas according to geography and GP population sizes as can be seen below. Suitable premises within those areas would be identified as described above.

Area 1 - has approximately 139,395 people registered with a GP
Area 2 - has approximately 81,351 people registered with a GP
Area 3 - has approximately 36,223 people registered with a GP
Area 4 - has approximately 33,059 people registered with a GP
1. Do you agree that the changes we are proposing reflects what the public told us during our period of pre-engagement? (please tick one box)

Agree □ Unsure □ Disagree (please state why)

2. We have given an outline of how urgent care services might look in the future. Do you agree that this best meets patients’ urgent care needs in the future? (please tick one box)

Agree □ Unsure □ Disagree (please state why)

3. Do you think that the proposals will reduce confusion and provide a simpler service for patients?

Agree □ Unsure □ Disagree (please state why)

4. In each of the options in this consultation there are a different number of extended hours GP centres. Which of the options do you feel would best meet the needs of the local population?

- Option 1 - has 6 extended hours GP centres working to 8pm, 7 days a week with a GP at the front of A&E.
- Option 2 - has 4 extended hours GP centres working to 9.30pm, 7 days a week with a GP at the front of A&E.
- Option 3 - has 8 extended hours GP centres working to 8pm, 7 days a week but without a GP working at the front of A&E.

5. Please look at the map on page 26 (also shown below) that shows the locations of hospitals and GP surgeries. Please give us your recommendation how extended hours GP centres should be shared out across the four areas. Write the numbers of extended hours GP centres in the boxes below.

If you have answered Option 1 above you need to allocate 6 extended hours GP centres across four areas. For Option 2 you need to allocate 4 extended hours GP centres and for Option 3 you need to allocate 8 extended hours GP centres.

Area 1 □ Area 2 □ Area 3 □ Area 4

Area 1 - has approx. 139,395 people registered with a GP
Area 2 - has approx. 81,351 people registered with a GP
Area 3 - has approx. 36,223 people registered with a GP
Area 4 - has approx. 33,059 people registered with a GP
6. Do you have any other feedback? (If you need more space please attach a separate piece of paper)

ABOUT YOU

7. Where have you heard about this consultation? (please tick all that apply)
   - [ ] Local radio
   - [ ] Local television
   - [ ] Local newspaper
   - [ ] Consultation website
   - [ ] CCG website
   - [ ] Email
   - [ ] Poster
   - [ ] Leaflet to home/work
   - [ ] Public meeting
   - [ ] Roadshow
   - [ ] Leaflet in hospital
   - [ ] Leaflet in health centre/GP
   - [ ] Leaflet elsewhere
   - [ ] Other

8. Have you read any of the following? (please tick all that apply)
   - [ ] Summary document (4 pages)
   - [ ] Making Health Simple website
   - [ ] Press article
   - [ ] Full document (24 pages)
   - [ ] CCG website

9. Please state your gender
   - [ ] Male
   - [ ] Female
   - [ ] Prefer not to say

10. Please state which age range you fall into.
    - [ ] Under 25
    - [ ] 25-35
    - [ ] 36-45
    - [ ] 46-55
    - [ ] 56-65
    - [ ] 66-75
    - [ ] 76 and over

11. Please identify which ethnic group you consider yourself to be.
    - [ ] White
    - [ ] Mixed/Multiple ethnic groups
    - [ ] Asian/Asian British
    - [ ] Black/African/Caribbean/Black British
    - [ ] Other ethnic group
    - [ ] Other

12. Do you consider yourself to have a long standing illness or disability
    - [ ] Yes
    - [ ] No

13. How would you describe your sexuality?
    - [ ] Heterosexual or Straight
    - [ ] Gay or Lesbian
    - [ ] Bisexual
    - [ ] Other
    - [ ] Prefer not to say

14. Please tells us the first 4 or 5 characters of your post code (please note this does not identify a street or house)
    [ ] [ ] [ ] [ ] Please do not include the last two characters. e.g. write in TS5 2 or TS14 3

Thank you for completing the questionnaire. Your feedback is most important to us.
Do you need further help?

We can provide versions of this document in other languages and formats such as Braille and large print on request. Please contact the Engagement and Involvement department, telephone 01642 745401

Somali
Waxaan ku siin karnaa bug-yarahaan oo ku qoran luqado iyo habab kale sida farta indhoolaha Braille iyo daabacad far waa-wayn markii aad soo codsato. Fadlan la soo xiriir qaybta Ka-qaybgalka iyo Dhex-gelidda, lambarka telefoonka waa 01642 745401

Polish
Jeżeli chcieliby Państwo otrzymać kopię niniejszej ulotki w tłumaczeniu na język obcy lub w innym formacie, np. w alfabecie Braille'a lub w powiększonym druku, prosimy skontaktować się telefonicznie z zespołem ds. zaangażowania (Engagement and Involvement) pod numerem telefonu 01642 745401

Cantonese
如有要求，我們可以將本宣傳手冊用其他語言或格式顯示，如盲文或大號字體。請致電我們的“參與部門” (Engagement and Involvement Department) 01642 745401

Gujarati
અમે આ યોજનાનું ભાગ અને આ યોજનાનું ભાગ અને બાસ્ટાંલી ગુણવત્તા અલ્પ અલ્પ પ્રાકૃતિક શિક્ષણ તરીકે ચીરીયા. છંખણલે અને ઇન્વેલ્યમ્ન્ટ વિભાગોનો ટેલિફોન 01642 745401 દ્વારા સંપર્ક કરો.

Hindi
हम आपको यह परचा दूसरी भाषाएँ में और ब्रेल एवं बड़े अक्षरों जैसी सूचना में निवेदन करने पर प्रार्थना कर सकते हैं। कृपया कर के इन्जीजमन्ट और इन्वेल्यम्नट विभाग में टेलिफोन द्वारा 01642 745401 पर संपर्क कीजिए।

Arabic
يمكننا تقديم نسخ أخرى من هذه النشرة بلغات أخرى مثل برايل أو الأحرف الكبيرة حسب الطلب. برجاء الاتصال بالمشاركة والانخراط على هاتف رقم 01642 745401

Urdu
طلب کریئ یو براو کوئی ویک کئی گئے کا نیرمحمد دیگر زبانو وہ صوتونو مثلاً برايل یا بڑو حروف مین بیکی 01642 745401
Have your say on developing local urgent care services
NHS South Tees Clinical Commissioning Group
North Ormesby Health Village
First Floor
14 Trinity Mews
North Ormesby
Middlesbrough
TS3 6AL

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