

Agenda Item:

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Dorset Health Scrutiny Committee

Dorset County Council



Date of Meeting	10 March 2015
Officer	Director for Adult and Community Services
Subject of Report	Weymouth Integrated Assessment and Treatment Service Project
Executive Summary	<p>The purpose of this paper is to provide a brief on proposed service changes for the three different community services that are separately contracted but all based at Weymouth Community Hospital (WCH):</p> <ul style="list-style-type: none"> • The GP led Walk In Centre (WIC) - Provided by the Practice PLC; • Minor Injuries Unit (MIU) - provided by Dorset HealthCare University NHS Foundation Trust; • Out of Hours (OOH) Service - provided by South Western Ambulance NHS Trust. <p>These services respond to and treat patients who walk in or are triaged from 111, with a varying range of primary care needs, minor ailments, minor injuries and urgent care needs. The current services create duplication and ineffective use of local NHS resources.</p> <p>This proposed service change brings together and integrates the WIC, MIU and OOH to become one Urgent Care Centre (or service).</p>
Impact Assessment: <i>Please refer to the</i>	<p>Equalities Impact Assessment:</p> <p>Not applicable.</p>

<u>protocol</u> for writing reports.	Use of Evidence: Report provided by NHS Dorset Clinical Commissioning Group.
	Budget: Not applicable.
	Risk Assessment: Having considered the risks associated with this decision using the County Council's approved risk management methodology, the level of risk has been identified as: Current Risk: HIGH /MEDIUM/LOW (Delete as appropriate) Residual Risk HIGH /MEDIUM/LOW (Delete as appropriate)
	Other Implications: None.
Recommendation	That the Committee considers the content of the briefing and comments on the proposed service model.
Reason for Recommendation	The work of the Committee contributes to the County Council's aim to protect and enrich the health and wellbeing of Dorset's most vulnerable adults and children.
Appendices	None.
Background Papers	None.
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Weymouth Integrated Assessment and Treatment Service Project

1. SUMMARY:

- 1.1. The purpose of this paper is to provide a brief on proposed service changes for the three different community services that are separately contracted but all based at Weymouth Community Hospital (WCH):
 - The GP led Walk In Centre (WIC) - Provided by the Practice PLC;
 - Minor Injuries Unit (MIU) - provided by Dorset HealthCare University NHS Foundation Trust;
 - Out of Hours (OOH) Service - provided by South Western Ambulance NHS Trust.
- 1.2. These services respond to and treat patients who walk in or are triaged from 111, with a varying range of primary care needs, minor ailments, minor injuries and urgent care needs. The current services create duplication and ineffective use of local NHS resources.
- 1.3. This proposed service change brings together and integrates the WIC, MIU and OOH to become one Urgent Care Centre (or service). The Urgent Care service (or Centre) will offer assessment and treatment that will meet the needs of the local population in Weymouth, surrounding population of Mid and West Dorset and visitors to the area. This service model supports the Clinical Service Review (CSR) through providing efficient, effective, quality, safe and sustainable healthcare solution for the local health economy.
- 1.4. A project team with local GP clinicians and health and social care professionals from the three services and Social Services have explored the opportunities to commission a service that builds on the foundations of the current Weymouth Health Centre/GP-led Walk in Centre.
- 1.5. The following project objectives were agreed:
 - How we could bring together the GP-led Walk in Centre, Minor Injuries Unit and Out of Hours Services currently provided in Weymouth Community Hospital to improve healthcare for those who live in and visit south Dorset;
 - Help focus on meeting needs of vulnerable, homeless and disadvantaged;
 - Help the right patient see the right professional at the right time;
 - Ensure use of resources efficiently to the benefit of local community and visitors;
 - Ensure best communication between all those involved in an episode of care.
- 1.6. The proposal needed to enhance and support the following national requirements and direction of travel:
 - The NHS Five Year Forward View published by NHS England on the 23rd October 2014 has informed the need for integrated urgent care service to be provided from the Weymouth Community Hospital;
 - Walk This Way: Estimating Impacts of Walk In Centres at Hospital Emergency Departments in the English National Health Service, Ted Pinchbeck (SERC and London School of Economics) December 2014;
 - Supports and fits with the Clinical Services Review by delivering quality, safe and sustainable services.

Proposed Service Model

Current	Proposed Model	Benefits
Opening times: WIC: 8.00am to 8pm 7 days a week MIU: 8am to 10pm 7 days a week OOH: 6.30 to 11pm 7 days a week	One service opening hours: 8am to 11pm, after 11pm switching to Dorchester Out of Hours service 11pm to 8am.	- Improved access to higher skill mix 8am-11pm - Use resources efficiently to the benefit of local community and visitors.
Separate services with separate receptions - can be confusing for patients and the local services.	One service, a single reception.	-User-friendly -Improve navigation so the patient sees the right professional first time -Use resources efficiently to the benefit of local community and visitors.
Patients access the service by walk in or referral.	No change.	No change.
WIC - GP led MIU - Nurse led OOH - GP led	When patients present to the service the triage assessment and advice will be supported by a senior clinician.	-Improve navigation so the patient sees the right professional first time for the need.
Patient education and self-management of long term conditions.	Greater focus on patient education to manage long term conditions as well as the use of other local health services.	-Patients feel empowered to manage their health own conditions -knowledge of what services can best support their health need.
Workforce: A range of skills and expertise across the three services. Local Workforce is well respected.	One service bring existing workforce together to enhance skills and expertise.	-Use resources efficiently to the benefit of local community and visitors.
Separate IT systems.	IT system to be compatible with the GP locality IT system.	-Allows high quality, consistent communication between all of those involved in an episode of care.
Partnership working already taking place with other local health services.	Strengthen and enhance partnership working with the A&E department in Dorchester, the locality GP practices, local pharmacy, mental health team and Community Alcohol and Drug Advisory Service and the sexual health services.	-Use resources efficiently -Further supports improve navigation so the patient sees the right professional first time for the need.

- 1.7. This model also offers opportunities for interesting careers for staff, through broadening options for personal development. This model should also attract workforce and sustain this locally into the future.

2. OPPORTUNITIES FOR OTHER FUTURE SERVICE DEVELOPMENTS

- 2.1 A GP practice with relatively small registered patient list (approx. 450 patients) is included in the current contractual arrangement for the WIC. This practice accepts patients with relatively difficult and chaotic lifestyles or with addictions. In addition this practice hosts the Violent Patients/Zero Tolerance Scheme. Within Dorset, no similar arrangement exists.
- 2.2 The development of future options for the Registered Patient List and Violent Patients/Zero Tolerance Scheme will be led by the commissioners, NHS England-Wessex Area Team, working in partnership with the CCG to progress.
- 2.3 The work undertaken has presented a further opportunity to consider the future service model for the provision of the Portland MIU to meet the needs of the local population. These opportunities will be explored further in the context of the CSR, Primary Care Development and the Urgent and Emergency Care programme.

3. PARTNERSHIP ENGAGEMENT AND VIEW SEEKING:

Initial Engagement

- 3.1. Local partners include; South Western Ambulance NHS Foundation Trust, Dorset County Hospital NHS Foundation Trust, Dorset HealthCare University NHS Foundation Trust and The Practice PLC (current health provider of the GP-led Walk in Centre). All these partners input throughout all of the project stages.
- 3.2. At various stages of the project tailored engagement events took place. The CCG has engaged with (please note this list is not exhaustive):
 - Staff from the current services;
 - Local GPs;
 - Patient Health Network members;
 - Dorset Health and Overview Scrutiny Committee members;
 - Local Councillors;
 - Social Services;
 - Wider engagement from a range of organisations and representatives (invitation extended to carers' groups, BME representatives, Mental Health Forum, Age UK, Dorset Community Action, Community Alcohol and Drug Advisory Service).
- 3.3. Views were sought on the current service, as well as areas for development.
- 3.4. A patient survey was also undertaken, to engage with the public and service users and gain their views of the current services. Public views were sought via a paper survey, over the period of a week, distributed by reception staff, across all 3 current services. Of the 150 surveys 91 were returned giving a positive return rate of 61%.

Service Model development

- 3.5. Further events took place in November and December 2014 (Phase 2 engagement), for staff working within the affected services, wider stakeholders and Weymouth Health Network. These events were well attended and supported (in total, approximately 75 people attended the events). Attendees were given a brief

presentation on the proposed service model and were invited to comment on it, specifically regarding whether they felt that the proposal would meet the project objectives and the role of Community and Voluntary sector in the proposed service model.

- 3.6. This was followed by an 8 week public engagement from 19 December 2014 to 13 February 2015. A document outlining the background of the project and the slides from the stakeholder engagement events was published on NHS Dorset CCG's website. The public was invited to comment on the same questions asked at the stakeholder events, via an online survey.

Stakeholder feedback on the proposed service model:

- 3.7. Feedback from stakeholders, including the wider general public, has been positive with overall support of the proposed model. We have also received constructive feedback to build on the proposed service model, as well as important considerations for the future service specification, if the commissioning proposal is approved by the CCG.

- 3.8. The following themes emerged from the feedback:

Better Integration:

- Great opportunity for joint working between services;
- Single service will ensure good information governance;
- Less duplication and confusion for patients and the wider local health economy.

Opportunity to expand/utilise current staff skills:

- Staff would appreciate more interesting careers with broader options for personal development with an integrated service.

Patient focussed service:

- 'A very thorough and accurate assessment of things as they stand at the moment and the changes required to provide a comprehensive, economically run, patient friendly service'.

- 3.9. Constructive feedback to support the development of the service model proposal and the service specification:

- Ensuring adequate staffing levels during periods of high demand e.g. summer months and bank holidays;
- Support work/life balance for staff;
- Important to publicise opening hours of new service and its function – as an alternative to A&E;
- Process of integrating services needs to be handled with care, particularly staff and IT;
- Strong leadership/management in service to ensure service works well.

- 3.10. Based on feedback the following is being considered within the service model to harness the skills and expertise of the community and voluntary sector:

- Voluntary organisations to be given the opportunity to share their knowledge and experience with the staff in the Urgent Care Centre, so that information and skill set can be transferred;
- Consider developing volunteers' skills to support the service;
- Voluntary and Community Sectors to be given a defined role.

4. NEXT STEPS

- 4.1. Dorset Health Scrutiny Committee has been invited to submit comments and views during the proposal development at various stages of the project. Following the presentation of the service model at Committee, members are requested to feed any further views on the proposed service model to the CCG by Friday 13th March 2015.
- 4.2. Pending comments received from the Dorset Health Scrutiny Committee, the service model proposal will be presented to the Governing Body on the 18th March 2015 to ask for a decision to approve subject to confirmation that the proposals are consistent with the outcome CSR review, design and engage phase completing in spring 2015.

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