Developing Rotherham Community Health Centre
Jacqui Tuffnell, Head of Commissioning
NHS Rotherham CCG

5 September 2019
Rotherham Community Health Centre

- Rotherham Community Health Centre – purpose built to house the walk-in centre, GP practice, dental services and community/outpatient facilities
- Services have changed resulting in 2/3 of the centre now being empty – clear feedback from our population that it needs to be better utilised
What will work best for the centre and our population?

• 5 options considered
• Recommended option to relocate **Ophthalmology outpatients** enabling:
  - amalgamation of the service
  - to meet CQC requirements separating children from adults
  - ensuring the estate is fit for purpose to meet current and future capacity
  - reducing the footfall substantially on the hospital site (by approximately 48000 visits per year) and increasing the footfall into Rotherham’s town centre
  - responding to the public’s request to utilise this central, good quality facility
Service user/carer engagement

Q1 - Are you a Patient, Carer

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1.1. Patient</td>
<td>74</td>
<td>35</td>
</tr>
<tr>
<td>Q1.2. Carer/Family member/friend</td>
<td>26</td>
<td>83</td>
</tr>
<tr>
<td>Q1.3. Parent</td>
<td>6</td>
<td>102</td>
</tr>
</tbody>
</table>

Your life, Your health
Service user/carer engagement contd.

Q2 What words or phases would you use to describe the Ophthalmology Out-patient environment today?

Q2.2. Pleasant
Service user/carer engagement contd.

Q2 What words or phrases would you use to describe the Ophthalmology Out-patient environment today?

- Yes
- No

Q2:16. Sometimes there’s not enough seating

Your life, Your health
Service user/carer engagement contd.

Q10. How did you travel to your appointment today?

![Bar chart showing travel options for appointments today]

- Bus
- Car Self-Driven
- Lift in relatives/friends car
- Other
- Taxi
- Walked
- No answer
Service user/carer engagement contd.

Q11. If ‘driven’ or ‘lift’ how easy was it to park or get dropped off at the hospital?
Q14. Would an Ophthalmology Out-patient appointment at Rotherham Community Health Centre be easier or harder for you to get to than an appointment at the Hospital?
Service user/carers engagement contd.

Q16. Demographics - Age

- <15
- 16-25
- 26-50
- 51-65
- 65-80
- 81+
- No answer

Your life, Your health
Service user/carer engagement contd.

Q19. Disability

Your life, Your health
Headlines from the engagement

• **107** surveys completed; this was well over 200 contacts as many people were accompanied by one or more family members
  – This was over 2 days 13-14 august
  – Conversations took place in ophthalmology outpatients and B6; covering a variety of clinics
  – People from a wide variety of ages and background took part; we had no refusals, and spoke to the majority of people attending
  – The clinics were not as busy as usual, due to the time of year, in particular a number of the paediatric appointments DNA’d

• **Positive/negative re proposal**
  – Generally, most people were very supportive of the proposal; a substantial number were extremely enthusiastic
  – 61 felt it would be easier, 22 felt it would be harder; 24 were neutral; either they felt it would be the same or were unsure.
Headlines from the engagement continued

– Those that felt it would be harder cited the following reasons
  • Longer journey
  • Parking was an issue for a large number of people
  • Not liking the town centre/road crossing/walk across town
  • One person felt there were issues with the building structure
  • They were familiar with the current service and location, and did not feel it needed to change – this in particular from those attending regularly, for years (ie monthly)

– Those that were neutral
  • A majority of these felt there would be no difference
  • Some people were not familiar with the location of the CHC, so felt they did not know
Headlines from the engagement continued

• **Main points**
  - The majority of concerns were around parking
  - A small number of people noted they live close to the hospital or on a bus route/road where they would pass the hospital, so it would be further for them
  - Several people wanted assurance that the staff would be the same
  - Even though the walk from car to unit would be shorter, some people will still need a wheelchair to be available
  - From the patients attending B6 often on a monthly basis, there was more concern and apprehension about a change of location; often with no concrete reason (i.e. ‘I like it here’); this is felt to be due to the fact that these are likely to be the most dependent patients, who have become very familiar with the current location and process
Headlines from the engagement continued

– We felt that there were generally fairly low expectations around the environment- ‘It’s OK as it is’ ‘it’s a hospital isn’t it’.

– Other concerns raised were around traffic in the town centre, waiting for appointments and in clinic, not being called in

– Several people asked how much it would cost; so assurance that we are spending the Rotherham pound well

– It was also noted that patients are brought to ophthalmology from other areas of the hospital – those mentioned were neuro and the UECC. It was queried how this would work if the department was to move, how often this is needed, and what the impact could be on appointments if staff are called to TRFT site, or the implications for moving patients round the site.
Supporting the change

• Parking – there is some on-site parking at RCHC and a drop off zone will be created, there are a number of car parks in a short walking distance
• Urgent patients from other areas – a small ‘urgent’ service will continue at TRFT connected to the staff who will be providing surgery
• Rotherham pound – the department is in need of an upgrade particularly to split paediatrics from adult services and insufficient space currently therefore investment is required whether this is at the hospital or RCHC
• Long term attenders – consideration of the impact of the change for this group – support and assurance
Next steps

• Incorporate the findings from the engagement into the business proposal
• Business proposal to Governing body and Hospital Trust Board in October
• If approved, building work to commence in the autumn and service to move by next April