

ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1.	Meeting:	Health Select Commission
2.	Date:	11 th July, 2013
3.	Title:	Urgent Care Review
4.	Directorate:	Resources

5. Summary

The report provides a summary of and the conclusions from a workshop held between some members of the Health Select Commission and colleagues from Rotherham CCG, looking at the proposal to create a co-located Urgent Care Centre based at Rotherham Hospital.

6. Recommendations

That the Health Select Commission:

- Considers the conclusions drawn by members of the Health Select Commission who were part of the workshop meetings.
- Agrees the basis of a response to the CCG, as part of their 'Right First Time' consultation
- Recommends this response to Cabinet prior to final submission by the deadline.

7. Proposals and details

The Health Select Commission received a presentation from Dr Ian Turner, the Clinical lead for the Right First Time consultation, at its meeting in April 2013. This outlined the case for the replacement of the current split site provision of Walk In Centre, Out of Hours GPs and A&E, with an Urgent Care Centre, co-located at the hospital site.

Members requested further information on these proposals and as such a working group was established, to be chaired by Councillor Dalton and to include Cllrs Hoddinott and Wootton and Peter Scholey (co-optee).

This report provides the Health Select Commission with the conclusions of this workshop, which took place over two separate meetings, and makes recommendations regarding the development of a Council response to the consultation.

The areas considered by the workshop were as follows:

Finance – Expected costs for the centre will be the same as current provision, therefore there will be no change in the resources being invested in Urgent Care. Expected costs per annum will be £9,403,375, projected to stay the same in the following four years.

The building will be funded from a bid to non recurrent pot of funding from NHS England. Indications are that this bid will be received positively. Members noted, however, that the fund can be used under the heading of service transformation, so long as it doesn't involve any recurrent costs. IT systems and pump priming an initiative were given as examples of how else it could be used.

Opening hours – It was confirmed that the new centre would be open 24:7, unlike the current walk in centre which has shorter opening hours.

Staffing - Current staff will transfer and the extra opening hours will be covered.

Transport and travel – concerns were expressed around public transport and car parking.

- Car parking has been a very strong theme in the consultation feed back and as such the CCG have reached an agreement with RFT that they will provide the same number of parking spaces as are currently on offer with the Walk In Centre. No further reassurances could be given as to how these will be managed or what the charges will be. This will be down to RFT management and Members agreed to pursue this directly with them, expressing their wish for the detailed proposals to come to the Health Select Commission when they are available.
- Public transport routes are more complicated for some areas of the Borough to get to the hospital site, as opposed to the Walk in Centre. Members expressed concern about this, although CCG colleagues have received assurances about this from the bus companies. Again no further reassurances could be given on

this matter and members agreed to raise this with the bus companies via the Transport Liaison Group.

Waiting times – there is a public perception that waiting times at the walk in Centre are less than those for A&E. Adults triaged within 20 minutes and children within 15 minutes are quality requirements within the service specification of the proposed Urgent Care Centre.

Other issues – it was confirmed that this is a national policy direction and that other districts in South Yorkshire are also adopting this model. It was agreed that there is a strong clinical case for bringing the services together, however, members are concerned about the unintended consequences of co-location, predominantly around access.

Members also requested further information about different users of the A&E facility and it was identified that there are some surgeries where lack of knowledge and understanding of the NHS system for numbers of patients was resulting in disproportionately high numbers using A&E.

Primary Care/GP appointments – The consultation has revealed a potential issue with regard to access to GP services and it was agreed that the Health Select Commission should prioritise its work on this area, meeting initially with NHS England to discuss this.

Members have therefore concluded the following:

- There is a strong clinical case for integration of the services which members are supportive of.
- They have significant concerns about the access issues outlined in the report creating a barrier to the success of the proposals.
- There is a less convincing case for co-location and the spending of a large sum of capital on another new building.

8. Finance

There are no financial implications for the Council. The CCG will be submitting a bid to NHS England for the funding of the capital costs for the new centre.

9 Risks and Uncertainties

The main risks with this proposal, as identified by members, are the potential barriers to access that may be faced by some residents and communities to the new centre. These are outlined in the report.

10 Policy and Performance Agenda Implications

The proposal to provide a co-located urgent care centre is in line with national policy direction from NHS England.

11 Background Papers and Consultation

Right First Time consultation papers – Rotherham CCG.

12 Contact

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