



Title

Urgent Care Developments and Cricklewood Walk in Service

Date

11 July 2019

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**Urgent Care Developments and
Cricklewood Walk in Service**

Report of

Barnet CCG

Wards

Wards most likely to be impacted Child's Hill, Golders Green, West Hendon and Hendon but the walk in service is available to all patients in the borough and beyond.

Status

Public

Urgent

No

Key

No

Enclosures

Consultation slide pack, Draft Consultation Document (to follow)

Officer Contact Details

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Summary

Cricklewood Health Centre comprises 2 contracts – one for the GP practice and one for the walk in service. Both contracts come to an end in March 2020.

By way of background the GP practice is an Alternative Personal Medical Services (APMS) contract commissioned by NHSE (now North Central London Commissioning and Contracting). As for all APMS contracts there is a standard process for consultation on whether the service is recommissioned or the list dispersed to other local practices. That consultation started on 30 April and runs until 19 July 2019. Decision-making is planned for October and will take into account practice patient views, ability of local practices to absorb activity, population growth, current list size and equalities/quality issues.

However, this paper is focussed on the CCG's strategic direction for urgent care and on the Cricklewood walk in service.

Barnet CCG commission the walk-in service and will be commencing a consultation on whether to decommission the service or not on 29 July to run until 18 October 2019.

During June/July the CCG has been taking views from key stakeholders as part of pre-consultation engagement process. Decision-making is planned for December 2019 and will take into account the outcome of the consultation and decision-making for the APMS practice as well as the factors set out in more detail below. No changes to services are planned until the end March 2020.

There are a number of national developments which need to be taken into account in the development of local urgent care provision in Barnet. The following papers describe the CCG's strategic direction for urgent care, taking into account the changing national context, important local issues.

Officers Recommendations

1. To note proposed consultation on Cricklewood Walk in Service

1. WHY THIS REPORT IS NEEDED

- 1.1 The HOSC is a key stakeholder in respect of local health services. The CCG is planning to consult on the decommissioning of the walk in service based at Cricklewood Health Centre when the contract comes to an end. The consultation will run 29 July to 18 October 2019.
- 1.2 In advance of the consultation period the CCG would like to engage the HOSC on the wider strategic direction for urgent care locally and how this informs the consultation on Cricklewood.

2. REASONS FOR RECOMMENDATIONS

- 2.1 The paper below sets out in summary the reasons for the consultation with further detail in the slide pack. The slide pack sets out the CCG's strategic direction for urgent care, current local urgent care provision, national urgent care developments and the impact of these on walk-in services and specifically on Cricklewood. Barnet CCG is working with Brent CCG on developing the consultation and Brent CCG supports the strategic direction outlined below.
- 2.2 **Urgent Care Strategy** - the CCG's strategic direction for urgent care (informed by views of local residents and professionals) is:
- Care in the right place at the right time – with primary care being central to this
 - Simple and clear ways of accessing urgent care
 - Overall focus on preventing ill health and avoiding unnecessary attendances to reduce the demand for urgent care.
- 2.3 **Investment in primary care capacity** - the CCG has invested in extending capacity in primary care and now provides 48,000 additional appointments from 10 GP hubs operating in the evenings and weekends. Patients' records are available and patients can access the full range of services available in primary care including screening, immunisation and referral to other services.
- 2.4 **Primary Care Networks** - the NHS Long Term Plan and new primary care contract focuses significant additional investment in Primary Care Networks. From April 2020 investment in hub appointments will also be absorbed into Primary Care Networks providing additional opportunities to integrate urgent care provision in local areas integrated around primary care. There are 7 Primary Care Networks in Barnet and they build on the CHIN (Care and Health Integrated Networks) achievements and joint working across services and organisations.
- 2.5 **Urgent Treatment Centres** - from December 2019, all Urgent Care Centres and Walk-in Centres will need to be designated as either an Urgent Treatment Centre or will need to change to become other primary/community health care services. Urgent Treatment Centres (UTCs) are GP-led, open at least 12 hours a day, every day and are part of the national programme to simplify and standardise urgent care services. The plan is for the Urgent Care Centres at Barnet Hospital and Royal Free Hampstead to transition into Urgent Treatment Centres. The CCG is in the process of working with stakeholders to identify the best way of organising walk-in services in the borough in response to local needs and overall strategy direction set out above. Similar processes have taken, or are taking, place across North Central London CCGs. Given the contractual position a decision needs to be made soon as to the future of the walk-in service at Cricklewood Health Centre.
- 2.6 **Cricklewood walk-in service** – The service is open 7 days a week 8am-8pm. In 18/19 the walk in service saw on average 54 walk in attendances per day of which 13 were for patients registered with a Barnet GP.

The service saw a total of 19,785 walk in attendances in 18/19 from all boroughs. The total number of walk in attendances at Cricklewood has reduced year on year since 16/17 by 21% overall.

In 18/19 58% of attendances were by patients registered with a Brent GP and 24% by Barnet GP registered patients – the majority from local practices. The remaining came from Camden and other surrounding boroughs in smaller numbers.

The walk-in service at Cricklewood – unlike the walk in services at Edgware and Finchley Memorial – does not deal with minor injuries and there is no access to x-ray or other diagnostics on site. As such the provision is almost identical to that provided by a GP practice.

However, unlike a practice, it cannot refer or undertake preventive interventions or access patient's records. This means that the clinicians cannot read the patient's records before treatment and cannot update the record after the consultation. GP hub appointments are available from three local practices and provide a more effective response to patients' needs than the walk-in service.

2.7 Barnet CCG is planning to consult on the decommissioning of the walk in service based at Cricklewood Health Centre when the contract comes to an end because:

- For most conditions it is better for patients to access primary care, which has access to individual patient records (including information about the patient's medical history and current medication). In addition, the patient can receive a full range of preventative services, such as screening, routine immunisations and health checks as well as referral to other services.
- This will become even more important as Primary Care Networks are developed as these will have:
 - Further investment as part of the NHS Long Term Plan – including the current funding for extra GP appointments.
 - New primary care network health staff – eg social prescribers and pharmacists
 - Health, care and voluntary services joining up around them to meet patient needs and provide early help to avoid urgent attendances where possible.
- There are alternative urgent and GP services in the borough, all of which provide the same range of services as the Cricklewood walk-in service and more. Barnet CCG has already invested in providing 48,000 extra GP appointments in the evenings and at weekends. These appointments are not fully utilised at present and there is capacity in the other walk in services.
- The number of patients using all walk-in services in the borough has reduced year on year as additional primary care has been made available.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The continuation of the current contract is not an option. The contract comes to an end in March 2020 and cannot be extended any further. Should the CCG on the basis of the consultation decide to retain a walk-in service in this area it would be subject to usual procurement rules and further engagement as to the service model.

4. POST DECISION IMPLEMENTATION

- 4.1 No decision is required from the HOSC. Papers are brought to inform the HOSC as to overall intentions, strategy and consultation materials. If the decision is taken in December to close the walk-in service, then notice would be given to the current provider with the service coming to an end in March 2020.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The consultation proposal and rationale are in line with the corporate priorities set out in the Health and Wellbeing Delivery Plan which includes care closer to home as a key vehicle for the delivery of better outcomes for local people.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 The rationale for the consultation proposal is based on value for money given that the walk-in service duplicates other local services and does not provide as integrated or effective provision of care. The current total cost of the Cricklewood walk in service for all CCGs is £692,000 per annum. Barnet CCG's annual budget is £215,000 for Cricklewood walk in service attendances.

5.3 Social Value

- 5.3.1 Primary care and associated network provision including social prescribers are the key vehicle for population health management as part of an integrated care system.

5.4 Legal and Constitutional References

NHS Act 2006 as amended by S14 of the Health and Social Care Act 2012

5.5 Risk Management

- 5.5.1 Risks associated with the consultation process are focused on ensuring patients using the walk-in service are able to feed in views.

5.6 Equalities and Diversity

- 5.6.1 A full Equalities Impact Assessment is being developed which will be available during the consultation period.

5.7 Corporate Parenting

5.7.1 N/A

5.8 Consultation and Engagement

5.8.1 The draft consultation materials are in development.

5.8 Insight

N/A

6. BACKGROUND PAPERS

6.1 Engagement slide pack