Report to: East Sussex Health Overview and Scrutiny Committee (HOSC)

Date of meeting: 28 June 2018

By: Assistant Chief Executive

Title: Urgent Care Redesign in East Sussex

Purpose: To update HOSC on the redesign of the urgent care system as part of

both the Connecting 4 You and East Sussex Better Together

programmes

RECOMMENDATIONS

The Committee is recommended to:

- 1) consider and comment on the progress of urgent care redesign in the Connecting 4 You and East Sussex Better Together areas.
- 2) suspend the work of the HOSC sub-group considering Urgent Treatment Centre proposals in the East Sussex Better Together area, pending re-submission of the proposals in the autumn.
- 3) request a further report on the progress of urgent care redesign in September 2018.

1 Background

- 1.1 Urgent care is a term that describes the range of services provided for people who require same day health or social care advice, care or treatment. This is different from emergency care provided in accident and emergency departments (A&E), other hospital departments, 999 and ambulances which are set up to respond to serious or life threatening emergencies.
- 1.2 Following a national review in 2014, NHS England set out clear commissioning standards to ensure future urgent and emergency care services are integrated and offer a consistent service. In March 2017, NHS England and NHS Improvement published the *Next Steps on the NHS Five Year Forward View* which highlighted the importance of delivering integrated urgent care services to help address the fragmented nature of out-of-hospital services. There are 10 nationally set key deliverables in relation to urgent and emergency care including:
 - the roll out of standardised new 'Urgent Treatment Centres' (UTCs) which will be open 12 hours a day (minimum), seven days a week, integrated with local urgent care services by December 2019;
 - the commissioning of the nationally mandated increase in Extended Primary Care Access (access to GP appointments outside core hours and at weekends) by October 2018.
 - the re-procurement of NHS 111 to include the ability to book patients into UTCs and to have a Clinical Assessment Service (CAS) that can hear and treat patients over the phone.
- 1.3 UTCs and extended access to GP practices are being developed separately in the Connecting 4 You and East Sussex Better Together (ESBT) place-based plan areas of East Sussex. NHS 111 is being re-procured across the whole of Sussex, led by Coastal West Sussex Clinical Commissioning Group (CCG) on behalf of all the Sussex CCGs.

2. Supporting information

Connecting 4 You

2.1. The Committee considered a general update on the progress of the Connecting 4 You programme in November 2017 which included a section on urgent care. This section included

updates on a number of urgent care developments including the primary care streaming service at the Royal Sussex County Hospital in Brighton and Princess Royal Hospital in Hayward's Heath.

- 2.2. High Weald Lewes Havens (HWLH) CCG has provided a further update (attached as **appendix 1**) on the progress of urgent care redesign in the Connecting 4 You area of East Sussex.
- 2.3. The update report attached as appendix 1 outlines the latest information on specific urgent care developments as well as brief updates on other areas of the Connecting 4 You Programme that the Committee has previously considered and form part of the wider context.

East Sussex Better Together

- 2.4. HOSC considered reports on urgent care redesign in the ESBT area in December 2016, September 2017 and March 2018. At the March meeting HOSC focused on proposals by the Eastbourne, Hailsham and Seaford (EHS) CCG and Hastings and Rother (HR) CCG to develop two UTCs in the ESBT area. These proposals form part of the wider redesign of Urgent Care in the ESBT area of East Sussex in accordance with the specifications set by NHS England's Five Year Forward View.
- 2.5. The proposed approach to establishing these two UTCs was for them to be co-located with the A&E departments at Eastbourne District General Hospital and the Conquest Hospital in Hastings. This would involve the relocation of the walk-in primary care services currently located at Eastbourne and Hastings stations since UTCs will provide a walk-in service as well as bookable appointment slots. The intention was for the UTCs to be operational by April 2019. The existing Walk-In Centres also have a registered patient list and consideration was being given to future general practice provision for these patients.
- 2.6. The Committee agreed in March that the proposed relocation of walk-in services constituted a 'substantial development or variation to services' requiring consultation by the CCGs with the Committee in accordance with health scrutiny legislation.
- 2.7. Alongside the proposal to establish co-located UTCs with the local A&E departments, the ESBT CCGs are required to commission the nationally mandated increase in Extended Primary Care Access (access to primary care appointments outside core hours and at weekends) by October 2018. The preferred model of provision for Extended Primary Care Access will be through the establishment of a number of primary care access hubs, including town centre provision in both Hastings and Eastbourne.
- 2.8. A further update on ESBT urgent care redesign provided by EHS and HR CCGs is attached at **appendix 2**. The report focuses on the impact of changes to the procurement process for the NHS 111/CAS services (outlined below) and indicates that a review of the UTC proposals will be undertaken by the end of July. Following this review, the CCGs plan to re-submit UTC proposals to HOSC in the autumn.
- 2.9. HOSC formed a sub-group to take responsibility for considering the UTC proposals in detail and preparing a response for consideration by the Committee. The sub-group has met twice so far and further details can be found in **appendix 3.** Given the review being undertaken by the CCGs HOSC is recommended to suspend the sub-group's work pending re-submission of proposals to the Committee in the autumn.

NHS 111

- 2.10. The Chair of HOSC was contacted by the 111 Programme Director (Sussex) on 14 June with notification that a decision had been taken to stop the current NHS 111/CAS procurement for Sussex. The organisations who submitted bids to run the new service have been notified of this outcome.
- 2.11. The Chair was informed that the decision was taken by the CCGs' Accountable Officers and Clinical Chairs as it was agreed that they may look to revisit the specification on the basis of changes to the National Integrated Urgent Care model. The CCGs have been in contact with NHS England, which supports the decision to stop the procurement.
- 2.12. The Sussex NHS 111 Transformation Team is pulling together an options and next steps paper that will be taken to all seven CCG Governing Bodies in the coming months.

2.13. The Transformation Team is also working with local CCG colleagues to review the impact this decision will have on the development of UTCs. The CCGs will provide an update at the meeting on the potential impact, and the NHS 111 Programme Director will keep the Chair up-to-date on the next steps over the coming weeks.

3. Conclusion and reasons for recommendations

3.1 This report provides HOSC with an update on developments in relation to urgent care as part of the Connecting 4 You and ESBT programmes, including specific proposals in relation to UTCs. HOSC is recommended to consider and comment on the updates.

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