



Sunderland
Clinical Commissioning Group

Sunderland Urgent Care Consultation

Coalfields locality event

8 August 2018, 6 - 8pm

Date	8	August	2018	Time	6 – 8pm
Event	Coalfields				
Venue	Hetton Centre, Hetton le hole.				
No. people		Males		Females	
Room facilitator	Helen Fox				
Scribe	Lauren Robinson / Angela Farrell				

Attendance and reach

Total number of people who attended in total: 18

- Public – 4
- VCSO – 0
- Other organisation – 5
- Sunderland CCG –
- Sunderland City Council –
- NECS –
- Did not identify a group –
- Registered but did not attend -

Discussion:

Proposals for Urgent Care

Like

- Is there capacity to meet demand?
- Near an A&E department.
- Could special support come from hospital to Pallion UTC, rather than people having to move to ED?
- Option a – Yellow box is fabulous for GP access.
-

Missing

- Lack of qualitative data and patient stories. Travel and transport refers to the 2011 census. There has been growth since then.
- Concerns in going to local pharmacy, need to deliver.
- RAH - Excellent, people will like this.

Other comments / questions

- Who is vulnerable? What would you class as vulnerable?
- Access concern, are appointments in extended access going to be given to you near to where you live?
- Time it takes you to get through to GP practices.
- Carers don't always have time to travel across city or funds. Worried people who have injuries will not be seen because it's too far away.
- Concern about how GPs will cover all of the appointment.
- Older people still want to see their own GP.
- Concerns in the distance and travel time and change in peoples conditions
- Concerns about the increase use of ambulances
- Communications of new services is a worry
- The parking problem
- Older people in small villages - for them getting to Houghton is easier
- Could we have two? One in Houghton and one in Pallion?
- Distance for public transport, parking and the extended access.
- Can we not offer a walk in GP service for people who work? This would stop them using a UCC / UTC.

-

Should the services be joined up?

Thoughts for no

- Found it is better separate, but depends how busy UTC will be.

- Access at Pallion isn't great, parking is poor.
- Transport links to Pallion are poor.
- Harder for people who live further out.
- People from Coalfields will not travel.
- Causes more confusion about where to go.
- Breaking up minor illness and in injury.
- Isn't joined up anyway.
- Keep it separate and have it at Grindon, the parking there is better.

Other comments

-

Location of the Sunderland Extended Access Service

Which locations are good and why

- Houghton is good, its middle of the coalfields area.
- Transport to Houghton is good.
- Houghton PCC – Nice space, lighter. Houghton can be scary and dark, this one is well lit.
- Easier on public transport.
- Central to high St.
- Plenty of car parking
- Will there be access to x ray facilities?
- Hetton and Shiney row have two.

Which locations are not good and why

- No parking at Southwick and Riverview.
- Can't dismiss Seaham.
- Big gap for Sunderland East
- Look at public transport links for each location and how easy and quick people can get there.
- Houghton health Centre – dark and not well lit. Parking is ok at night.
- Buses stop near there
- People don't like it.

Opening hours

SEAS

- When can you book? In advance? Will they fill up quickly? Fill up quickly; back long, some situations you've got now.
- Don't think the hours will work, won't be sufficient appointments.
- Earlier on morning as well outside of GP core hours.

UTC

- Times sound good. Appointment weekend, bank holidays, evening appointments. If can meet demand.
- 24 hrs would be ideal
- 7:30 to 10pm every day

Key principles

- Nothing wrong with principles but concerned about delivery and capacity and meeting demand.
- Patient care needs to be at the forefront. Should be standardised across the city.
- Agree with the principles
- Like number 2 – ensure as close to home as possible as worried about the journey
- Concerned about older people.
- Older people not comfortable taking paracetamol
- Access to NHS 111 can be an issue as not everyone has technology.
- Self-care - younger people don't have extended family there
- Triage is important – needs to be an appropriate clinical person for safety. They need experience and knowledge.
- General agreement that the principles are good.

Travel and Transport

Final comments

- Reporting symptoms is as important as presenting symptoms.
- Why are GP practices not standardised across the city?
- How will you identify vulnerable people if there's no standardisation or list?
- A lot of demand on GPs, MDTs as well as additional appointments capacity issue.
- GPs won't come to SUNDERLAND how will you get additional appointments?
- People who this will affect won't be online.
- Some people won't book appointments online.
- Rationale / data isn't convincing for delivery.
- Can't meet GP demand at the moment.
- Make better use of existing structure.
- What happens in winter with increasing demand and difficult travel?
- Q: Can you give assurance to the public that it's not just about saving money?
- A: Driven by lots of things: finance, duplications of resources, but main driver is confusion of services for public. We are trying to make it easier to navigate by improved 111. In addition make best use of staff available as there is a national shortage of skilled staff especially for GPs.
- Q: How do you propose to deliver extra appointments when lack of GPs is a national problem?
- A: Making better use of the GP and nurses to cover extra appointments.

- Q: Does Pallion have the capacity to deal with additional patients? I.e. car park, staff.
- A: Many of these will be dealt with elsewhere in the system i.e. 111 triage and direction to GP practice / SEAS. This will result in more managed flow which will help parking issues which is being look at as well.
- Q: confused where to go...to get an appointment in GP Practice you can't get in for 2 weeks. That's why [people use the walk in.
- A: Current system is taking away staff from practices, the new system will free up space.
- Q: Urgent or emergency - both mean the same. Clarify the terms.
- A: Terminology is confusing so talk before you walk will help decision making for both patients and staff.
- Q: will all GP practices offer 8am – 8:30pm appointments?
- A: Seas will cover those times although you may not see your own GP.
- Q: Is the GP practice promoting the extended access service?
- A: the system is currently in place but is not well publicised as of yet. There is work to be done.
- Q: A lot of GPs work part time? How can this cover the services?
- A: lots of people work part time, many GPS have families and choose to work part time as they can't do full time. Many gps condense long working hours into a shorter number of days.
- Q: Are people who live further away from UTC going to suffer?
- A: GP practices work still available in these areas when Grindon is closed. But the majority of people self-cared rather than use other services.
- C: People who have minor injury are not accessing services because they live further away.
- Q: Can you get clinical records from QE, Freeman? Don't understand the data sharing between the UTC and GP. You should have sent a letter to inform patients about the record sharing.
- A: GP records will be shared - i.e. summary care record. Only those who need access will have it to help with your care.
- Q: Will you ever change public behavior on how they access services? Some GPs doing 10 – 12 mins appointments, why not 2 mins like in the past?
- A: simplified access will help ensure the right access to services. 2 numbers necessary NHS 111 and your GP.
- Q: Do Pallion use same services as adults?
- A: Children will also use the same service - again talk before you walk is safest.
- Q: How do you overcome GP reception staff trying to diagnose before you get an appointment?
- A: Everybody who needs an appointment will get one. Unifying the systems across the areas for triage.
- Q: Will all GP practices open at 8am?
- A: 8AM opening will be covered by SEAS.
- Q: We don't say how we will progress?
- A: We can't service everything we use, and we see this as the best way forward.
- Q: Is this a done deal, not a proposal?
- A: 111 are national and a done deal. Seas is also in place. Urgent care needs to be reorganised to make it better.

- Q: If you've already made changes such as 111 and SEAS why do you have to change the UTC?
- A: Not everyone is using the 3 systems correctly to get the right treatment.
- Q: more confused than when I started. Isn't it already GP, 111, 999 phone numbers?
- A: changing the system without communication will lead to more confusion. We are trying to advise people to correctly use a simplified service.
- Q: will there be triage system in place at Pallion?
- A: We would re vision and re visit to make sure the CCG is doing the job correctly.
- Q: What will you do with the space at Houghton?
- A: No conclusions as of yet to use the site at Houghton Looking to make best use of the buildings.
-