

Public conversations – Urgent Care



Working together to deliver excellent and sustainable healthcare

Introduction

- A conversation with local people **not** a public consultation.
- We will undertake a formal consultation with options if we need to after we have heard what people have to say
- Consultation Institute has advised on best practice
 - Process
 - documentation
- Focus on urgent care
- Service models not estate

The decisions we will have to take

- The type and location of urgent care services in the future
- Agree the service models that will serve our population in the future and how community buildings can best meet these needs

What do we mean by urgent care?

- A condition or illness needing attention the same day, but that is not life-threatening or changing.
- Urgent care is NOT emergency care. Emergency care is suitable for people whose life is at immediate risk from severe illness, injury or serious worsening of a condition.

East Berkshire CCG will spend c. £10.44m on urgent care, out of hours care and primary care enhanced access in 2018-19.

What we want to understand

- Why people choose a particular urgent care service
- What is important to people about who they see for their urgent care needs
- What people would do if they were told an issue was not urgent
- What is important in terms of location of services and would there be support for co-location of services
- What is good about and what can be improved in current services
- Would the use of technology be supported
- What is important when people have urgent mental health issues

What we've done so far

- We have spoken to over 300 people via:
 - 6 public meetings during the day in Sandhurst; Slough; Bracknell; Maidenhead; Sunninghill; Windsor;
 - Evening meeting in Slough and one is coming up in Bracknell on 19 July
 - 2 online 'Cover It Live' sessions
- Held a provider event
- Visited a number of community groups to understand the views of groups generally and of those who use urgent care more than average, these include Parent and toddler group Great Hollands, Bracknell; Sandhurst Nepalese Society, Polish Saturday School Bracknell, Carers group in Bracknell, Asian women's group in Slough; Slough Youth Parliament attended by young people
- Had face-to-face conversations with our three Patient Groups
- Took the conversation to Community Partnership Forum (CPF)
- Launched the 2nd phase of the 'Big Conversation' via our online survey (10 July – 6 August)

Flavour of early themes

The insights below are a flavour of some of the things we have heard so far but may change as we have more conversations

- Default to urgent care services if cannot access general practice (experience variable)
- People need to understand more about what is available – they don't know where to go
- Everyone has a different view of urgent care
- Technology is better if it has a personal interface e.g. live chat
- Some people like the idea of using more technology

- Travel considerations are important
- Support for some services being together if they are local, there is parking and good public transport
- Confusion about the roles of extended teams
- Mental health important
- Variable experience of NHS 111

Process



East Berkshire
Clinical Commissioning Group

Phase	Purpose	Dates
Conversation (pre-engagement)	<p>To understand what matters to people about urgent care and their experiences of having used it in the past.</p> <p>To understand the views of people in groups that are over represented and who we do not often engage with.</p> <p>To have conversations with local people that will inform the development of options</p>	29 May – 19 July
Survey	<p>To gain a wider reach of people who will not engage through meetings. Particularly to include the working age population and people with caring commitments</p>	10 July – 6 August
Engagement report	<p>To bring together in one place the full picture of who we have had conversations with and what they have told us.</p>	Completed 15 August

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Stakeholder Panel	<p>To consider the outcomes of the engagement and agree ‘desirable’ criteria for checking options against. This will use the ‘Issues Paper’ as a framework</p> <p>Consider the possible options for consultation</p>	<p>w/c 27/ August</p>
Options development	<p>Should public consultation be required development of options</p>	<p>16 August – 3 October</p>
Stakeholder Panel	<p>Panel to be involved in reviewing the options against desirable criteria</p>	<p>w/c/ 17 September</p>
Governing Body	<p>Governing Body to review options and case for change</p>	<p>10 October</p>
Consultation if required	<p>To consult with local people on the options that have been developed</p>	<p>15 October – 7 December</p>