

**Wirral CCG  
Urgent Care Consultation**

**Frequently Asked Questions**

	QUESTION	ANSWER
1.	<b>What is the consultation about?</b>	<p>This consultation is about proposing improvements to Urgent Care Services in Wirral. We want to improve access for people and for them to have clearer choices when they need to use urgent care services.</p> <p>We also need to make some changes to local services to fit in with NHS England’s changes to urgent care including the introduction of an Urgent Treatment Centre for Wirral.</p>
2.	<b>Is this consultation simply as a result of the NHS England national mandate?</b>	<p>No. Our public and stakeholder engagement regarding urgent care services in Wirral actually dates back to 2009 which pre-dates the national mandate from NHS England. Prior to this mandate, we were already engaging with the public and asking them for views on existing urgent care services in Wirral.</p> <p>We engaged with stakeholders in 2016 when we held workshops looking at how we could improve urgent care in Wirral. The options we have gone out to consultation are broadly based on the outcomes of these workshops. However as these workshops were prior to the NHS England mandate, the options do differ in some aspects.</p> <p>The national service improvement priorities that NHS England has identified (for example, urgent and emergency care) have been identified because they need addressing nationally. Wirral is no different. These issues do need addressing and we want to take this opportunity to make urgent care the best it can be for the people of Wirral.</p>
3.	<b>Are you closing all Walk in Centres?</b>	<p>We are <b>not</b> proposing to close the buildings, including Victoria Central Hospital and the Eastham Clinic, where walk-in services are housed, and we are <b>not</b> proposing to close the other services that these buildings provide, such as blood tests, sexual health clinics, district nursing and outpatient clinics.</p> <p>What we are proposing is to replace Wirral’s current walk in services with bookable urgent appointments within 24 hours (usually on the same day) with a GP or nurse in local areas.</p> <p>We believe that more urgent appointments will mean people don’t have to move between services and we want people to be directed to the</p>

		<p>right place first time.</p> <p>We are already providing an extra 720 appointments per week (which is a 2.87% increase) with GPs and our proposal will mean that people can get urgent appointments with a GP or nurse when they need them.</p> <p>We want to ensure that each of the four areas of Wirral (West Wirral/South Wirral/Birkenhead/Wallasey) will have an appropriate number of appointments to suit need and population size.</p> <p>Under our proposals, there would still be a walk in service at the Urgent Treatment Centre at Arrowe Park Hospital. The Urgent Treatment Centre is a national requirement, which will be developed on the current Arrow Park Walk-In Centre site.</p> <p>We are also proposing a walk in urgent service for children and a bookable wound care/dressings service in four locations around Wirral.</p> <p>We need people’s views on where we locate these.</p>
<p>4.</p>	<p><b>Why are you intending to locate the UTC at Arrowe Park?</b></p>	<p>In February 2018, the Governing Body of the CCG met in public to discuss the delivery of a UTC in Wirral by December 2019. Following consideration of a range of factors the GB members supported the intention to progress work to locate the UTC at Arrowe Park Hospital. The decision to locate the UTC at the Arrowe Park site was taken largely to achieve the best clinical care for patients. Should a patient present to the UTC very ill or deteriorate rapidly, they can be transferred immediately to A&amp;E for emergency interventions. This rationale and decision was included in the Urgent Care Listening Exercise during February 2018.</p> <p>Many serious conditions such as stroke and heart attacks require rapid assessment and treatment to achieve the best outcomes for patients.</p> <p>Having the UTC at the Arrowe Park site means that patients can benefit from the full range of diagnostic facilities including MRI and CT scanning. These facilities are not available at other sites.</p> <p><b>Alternative Walk in Centres and Minor Injury Units were discounted for the location of the Urgent Treatment Centre.</b></p> <p><b>The reasons why these options were discounted were that they:</b></p> <ul style="list-style-type: none"> <li>▪ Do not provide access to the <b>full suite of acute level diagnostic services</b> required for rapid access. The alternative locations only offer a very minimal level of diagnostic services (if any) which do not support the clinical benefits of co-locating an Urgent Treatment Centre with an Emergency Department. Clinically the co-located Urgent Treatment Centre would enable an improved patient pathway – we will reduce the risk of potentially having to transfer patients from an off-site location to the Emergency Department. This could be in the event of a rapid deterioration</li> </ul>

		<p>of a patient whereby reliance on an already strained ambulance service could result in unnecessary delays and risk to patient safety. Alternatively a patient presenting at the Urgent Treatment Centre may require additional diagnostics or services that are only available at an acute site, meaning delays in patient care, longer waits and visiting multiple locations (having to either be transferred to the acute site or present themselves). This is not an efficient patient pathway and does not support positive patient experience.</p> <ul style="list-style-type: none"> <li>▪ Do not provide means to improve on local A&amp;E performance access targets. One of the NHS’ main national service improvement priorities is to focus on <b>improving national A&amp;E performance</b>. This cannot be achieved locally if the Urgent Treatment Centre is based elsewhere (somewhere other than the acute site at Arrowe Park Hospital). The co-location of the Emergency Department and the Urgent Treatment Centre will provide consistent support to the Emergency Department, which will help improve against and maintain the national 4-hour target. Public behaviour is not likely to change with any degree of rapidness and as such, if the Urgent Treatment Centre is located elsewhere we will likely see the same behavioural pattern of patients continuing to present to the Emergency Department, which will not enable us to support the national service improvement priority.</li> <li>▪ Do not provide a <b>single front door with effective clinical streaming</b>. These are recognised as key elements to helping sustain a viable Emergency Department service; by receiving patients via one single front door, they can be clinically assessed and determined if they are appropriate for the Emergency Department. This will reduce the footfall which will have a positive impact on not only the 4-hour target but also the efficiency of the Emergency Department by ensuring those patients in need of emergency care receive it in a timely manner by enabling staff to focus on only the acutely unwell.</li> <li>▪ Do not maximise benefits to <b>patient safety</b>. They do not address concerns regarding a lack of Emergency services available if required. As highlighted above, those patients that either present critically ill or injured or those who rapidly deteriorate will be reliant upon the ambulance service to transport them to the correct facility (Emergency Department). This is placing additional strain on an already stretched service. We recognise that delays in patient care, which in an acute or emergency situation could potentially have life threatening implications.</li> <li>▪ Do not provide the <b>quickest and most efficient transport links</b> (Based on time, duration, frequency and ease; Arrowe Park Hospital has the most efficient transport links from all other</li> </ul>
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		<p>areas of Wirral) and is in a centralised location. The centralised location also supports continuity of access times for urgent patients accessing via the North West Ambulance Service route.</p> <ul style="list-style-type: none"> <li>▪ <b>Risk aversion</b> – potential of an Urgent Treatment Centre based elsewhere in the community to divert a higher proportion of patients to the acute site to cover all eventualities.</li> <li>▪ Did not maximise the opportunities for workforce. By co-locating the Urgent Treatment Centre next to the Emergency Department we have the opportunity to build a <b>flexible, sustainable and future proof workforce</b> allowing us to flex our capacity between both the Emergency Department and the Urgent Treatment Centre to appropriately meet demand. Additionally we can up skill and skill mix staff to enable them to cross cover and enhance the variation of their work, leading to a greater feeling of job satisfaction as well as overall system benefits to a more generic workforce. An Urgent Treatment Centre based elsewhere other than Arrowe Park site will not support this model and will not allow us to begin to match capacity with the current level of demand.</li> <li>▪ Did not maximise the opportunity to improve <b>system resilience</b>. The development of a co-located Urgent Treatment Centre would also enhance system resilience in the event of a major incident. During a major incident, the vast majority of footfall will be focused at the acute site – increasing the demand significantly. By having the Urgent Treatment Centre next door to the Emergency Department we will have the additional staff on hand to support major incidents, all focused on the acute site where the demand will be the highest. To base the Urgent Treatment Centre elsewhere will not enable this.</li> </ul>
5.	<p><b>What do you mean when you say the UTC will be GP-Led?</b></p>	<p>The UTC will be GP led, supported by nursing staff. Exactly how the centre will be staffed in terms of numbers is undetermined and is an ongoing piece of work that is running parallel with the consultation.</p>
6.	<p><b>When the UTC is at Arrowe Park, will there be more people going to the Arrowe Park site as a result?</b></p> <p><b>What about parking and public transport?</b></p> <p><b>What about transport from Eastham to Arrowe Park?</b></p>	<p>We are proposing more local appointments with a GP or nurse, an urgent care service for children (walk-in and bookable) and bookable dressings (wound care) service in four local areas (West Wirral/South Wirral/Birkenhead and Wallasey).</p> <p>We will also be promoting self-care and pharmacy options. This would mean that more people could be treated closer to home, and may not necessarily need to go to the Arrowe Park site (however, depending on clinical need, some people will still need to go to the UTC).</p> <p>We expect that of those being seen at the UTC, this would include people who would have gone to A&amp;E on the Arrowe Park site anyway.</p> <p>Arrowe Park Hospital is a centralised location with the quickest and</p>

		<p>most efficient transport links (based on time/frequency/ease).</p> <p>Our proposed community model and improved access to GP appointments means that you will be able to get a local appointment within 24 hours. However the UTC is also available as a walk in facility.</p> <p>We have set up a transport working group, which includes Merseytravel, Wirral Council and local councillors, to look at transport to Arrowe Park.</p> <p>Wirral University Teaching Hospital is also actively engaging with suppliers (independent of the urgent care consultation) to increase capacity at Arrowe Park. Car parking will also feature as part of the urgent care estates working group.</p> <p>There is also a 'Carpark Strategy' that is reviewing the parking issues at Arrowe Park Hospital and this work is being undertaken in parallel with the consultation.</p> <p>We recognise that there are concerns regarding the bus routes from Eastham to Arrowe Park and we can confirm that there are bus services that serve this route. For further information and detailed routes, you can visit the Merseytravel website on <a href="http://www.merseytravel.gov.uk">www.merseytravel.gov.uk</a></p>												
<p>7.</p>	<p><b>Why can't we have the current offering plus the Urgent Treatment Centre?</b></p>	<p>This proposal is not about saving money, and we won't be spending any less on Urgent Care. We are proposing a new model of care to get you the treatment you need when you need it, and give the people of Wirral the best value for money.</p> <p>We want to deliver more local services based on your needs, ensuring you receive the care, support and treatment that matters to you. The current urgent care system costs £20.7 million per year.</p> <p>The cost per patient seen at the Walk-in Centres and Minor Injuries Units are as follows:</p> <table border="1" data-bbox="635 1534 1501 1758"> <tr> <td>Arrowe Park Walk in Centre</td> <td>£32 per person</td> </tr> <tr> <td>VCH Walk-in Centre</td> <td>£62 per person</td> </tr> <tr> <td>Eastham Walk-in Centre</td> <td>£17 per person</td> </tr> <tr> <td>Miriam Minor Injuries Unit</td> <td>£15 per person</td> </tr> <tr> <td>Parkfield Minor Injuries Unit</td> <td>£17 per person</td> </tr> <tr> <td>Moreton Minor Injuries Unit</td> <td>£23 per person</td> </tr> </table> <p><b>It is not possible to directly compare the cost per person in each of the above services as these have different opening hours and provide different services.</b></p> <p>To have the current urgent care offering plus the new mandated urgent treatment centre would cost an additional:</p>	Arrowe Park Walk in Centre	£32 per person	VCH Walk-in Centre	£62 per person	Eastham Walk-in Centre	£17 per person	Miriam Minor Injuries Unit	£15 per person	Parkfield Minor Injuries Unit	£17 per person	Moreton Minor Injuries Unit	£23 per person
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		<ul style="list-style-type: none"> <li>• <b>£2.3m per year for Option 1 where the UTC is open 24hrs or</b></li> <li>• <b>£1.6m per year for Option 2 where the UTC is open 15 hrs</b></li> </ul> <p>There are <b>no additional monies available</b> to fund this mandated development so we are putting forward alternatives to allow us to provide residents with the best clinical options.</p>
<p><b>8.</b></p>	<p><b>Why are there only 2 options?</b></p>	<p>Following feedback from the public and stakeholder engagement dating back to 2009, a number of options were developed. Each of which offered a different level of service. All options were reviewed against certain criteria and standards that we have to meet. As a result of this, a number of the options were discounted to leave us with 3 final options. We then narrowed them down further based on a number of issues such as patient safety, clinical efficiency, affordability which resulted in one of the options (option 3) being discounted.</p> <p>The reasons why Option 3 was discounted were that it:</p> <ul style="list-style-type: none"> <li>▪ Only provided the minimum mandated requirement – it did not meet patient need</li> <li>▪ Would add another layer of confusion onto existing urgent care services</li> <li>▪ Would provide less than existing Walk in Centre offer</li> <li>▪ Does not support the delivery of the 4-hour A&amp;E standard</li> <li>▪ Does not provide consistent support to the Emergency Department – all minor injuries and ailments would need to present to the Emergency Department overnight (outside of Urgent Treatment Centre hours)</li> <li>▪ At 15-hours, potentially over-provides in the community</li> </ul> <p>The rejection of option 3 was less about the affordability (all 3 of them fitted the budget) it was more to do with practicality.</p> <p>For the 15hr clinics we would have been supplying far too many appointments in the community. (Especially considering that we have limited the community offer to paediatrics and wound/dressing care).</p> <p>If the community offer in option 3 was fully utilised then the numbers going through the UTC would be minimal (negating the need for it).</p>
<p><b>9.</b></p>	<p><b>How have you made this consultation meaningful?</b></p>	<p>Our public and stakeholder engagement started in 2009 which actually pre-dates the national mandate from NHS England. We have recognised that there are issues with urgent care across Wirral that need addressing and we want to take this one opportunity to design services that are accessible, patient centred, fit for purpose and future proof for the benefits of Wirral residents. We have listened to feedback from the public and stakeholders and used this to inform and shape our proposals. We have been open and transparent in providing the public with a variety of information to help them make an informed decision.</p>
<p><b>10.</b></p>	<p><b>If people are confused about urgent care, why are they still accessing the services?</b></p>	<p>The public are using the existing urgent care services in Wirral however this doesn't stop them being confused about them. National feedback tells us that patients in general are confused by an inconsistent urgent</p>

		care offer. Wirral is no different. Feedback from Wirral residents supports the national view. However confused about the services people are, if they need urgent care, they will still use these services. What we are proposing is a way to make these services easier to access and less confusing.
11.	<b>Will there be any improvements to NHS 111?</b>	Yes, a redesign of this service will bring improvements such as the ability to book an appointment online, have an appointment booked for you at a GP practice or at the UTC, or speak to a health professional for a clinical assessment.
12.	<b>What will happen to A&amp;E and Children's A&amp;E?</b>	There are no changes being made to Wirral's only A&E or Childrens A&E at Arrowe Park Hospital.
13.	<b>What other services are currently provided at the Walk in Centres that will not be affected?</b>	<p><b>Eastham</b> District Nursing Phlebotomy Sexual Health</p> <p><b>VCH</b> Phlebotomy Dental Sexual Health</p>
14.	<b>Where do I go for x-ray?</b>	<p>You can attend the UTC as a walk-in patient (or via a bookable appointment through your GP Practice or NHS 111) for an X-ray.</p> <p>You will need to have received a referral from your GP Practice to attend the walk in service from one of the X-ray services (for plain film x-ray film) below:</p> <ul style="list-style-type: none"> <li>• Arrowe Park Hospital</li> <li>• Clatterbridge Hospital</li> <li>• St Catherine's Hospital</li> <li>• Victoria Central Health Centre</li> </ul> <p>Monday – Friday 8.30am-4.45pm</p> <p>If you require an X-Ray outside of the hours mentioned above, you can contact 0151 604 7067 between the hours of 8.30am and 5pm Monday to Friday to arrange an appointment.</p> <p><b>These services are not changing as a result of this consultation.</b></p>
15.	<b>What are the specific urgent care services for children?</b>	The urgent care service proposed for children is specifically designed for the care of children 0 - 19 years with minor injuries and minor ailments, and is available via bookable appointments by your GP Practice or NHS 111 or rapid access via a walk in option (this is a specific walk in facility

		<p>for children).</p> <p>The types of conditions the children’s service will treat include illnesses like minor infections, rashes, stomach upsets, small cuts and bruises, strains and sprains, coughs, colds and flu-like symptoms and more.</p> <p>If the child cannot be treated at through the service, they may be referred to the Children’s A&amp;E department at Arrowe Park Hospital, their own GP practice, self-care depending on the best way to treat the condition.</p> <p>These services will be delivered from the 4 local areas.</p>
16.	<b>What are the dressing and wound care services?</b>	<p>We are proposing to make pre-bookable dressing and wound care appointments available in your local area. For example, if you have a cut or laceration that is urgent but not an emergency, you can access this service via your own GP or NHS 111.</p> <p>You can also use this service for redressing of a wound as part of a follow up care pathway. Follow up appointments will be available locally, with the option to book these yourself.</p>
17.	<b>Why have you proposed services in the community for children aged 0-19 and dressings and wound care?</b>	<p>Using an evidence based approach we have looked at who currently uses urgent care services the most. 2 of the highest cohorts of people using these services are parents with children and people for routine dressings and wound care. Therefore, we have proposed to keep these services in the community.</p>
18.	<b>Have you considered those elderly, frail or vulnerable patients who would struggle to get to Arrowe Park?</b>	<p>Our proposals to bring care closer to home means that hopefully those patients who are elderly, frail or vulnerable will be able to access urgent care services locally.</p>
19.	<b>Have you thought about technology and integration throughout this consultation?</b>	<p>Yes, we recognise that technology plays a vital role in developing healthcare and as such we have a working group set up to review issues around technology and how we can best utilise advancements in technology alongside healthcare.</p>
20.	<b>The consultation document talks about visiting your local pharmacist for minor ailments – how can my pharmacist help me?</b>	<p>There are currently 91 pharmacies located in Wirral.</p> <p>Your local pharmacists are trained in helping people with less serious illnesses and injuries. They can assess symptoms and recommend the best course of treatment or simply provide reassurance - for instance, when a less serious illness will get better on its own with a few days’ rest. And if symptoms suggest it’s something more serious, they have the right clinical training to ensure you get the help you need. By using our pharmacists, more people can receive advice and treatment in their own community, and we can help keep A&amp;E free for the most serious cases.</p> <p>You can find more information on the NHS website:</p>

		<a href="https://www.nhs.uk/using-the-nhs/nhs-services/pharmacies/what-to-expect-from-your-pharmacy-team/">https://www.nhs.uk/using-the-nhs/nhs-services/pharmacies/what-to-expect-from-your-pharmacy-team/</a>
21.	<b>Do the CCG have patient representatives?</b>	Yes, as part of our core structure we have patient representatives (Lay People) that sit on key groups to provide advice and guidance. We also have a 'Patient and Public Advisory Group' which is made up of lay people.
22.	<b>Do these proposals mean the privatisation of the NHS?</b>	No. The CCG is fulfilling its role to review and redesign services to meet the needs of patients and our proposal is about simplifying our local system to help people make the right choice.
23.	<b>How will older people be supported better to stay well and avoid having to go to hospital?</b>	At the moment many older people attend the Accident and Emergency department with acute illnesses and injuries, and they will continue to be treated this way. We hope that our proposals will help ease the pressure on A&E, so that the most vulnerable and poorly people in Wirral get the care they need when they need it, and won't have to experience long waits. Our wider aim is to help older people stay well in their local communities by offering more tailored support according to people's needs. This includes more local GP appointments, more home visits by GP's and helping older people with their wider social needs. Our expectation is that this will reduce the number of older people having to go to Arrowe Park Hospital over time.
24.	<b>Do you have enough GP's and nurses to offer the extended 8am-8pm appointments?</b>	GP practices across Wirral provide the vast majority of healthcare for people, and we are not proposing to change the way in which people access a GP.  However, we recognise that for many people, their GP is their first contact point when they feel unwell, so we've thought about how we can make more urgent appointments available to people who need them.  We are currently providing 720 extra GP appointments per week, via our two federations (October 18-March 19). This is a 2.87% increase on what we had previously.  Currently, patients registered with a GP Practice in Wirral can now access appointments outside of core hours at various locations between Monday-Friday 6.30pm-8.00pm and Saturday and Sunday 8am-8pm. Patients who are registered with a Wirral GP practice will be given an appointment at the most convenient location for them. Extended hours appointments can be booked up to one week in advance.  The number of extra appointments available will be revisited at the end of this period (October 18-March 19) to look at uptake and to ensure that we are continuing to meet need within each local area.  NHS England has a national strategy to attract more doctors into general practice. Wirral is also developing a local workforce strategy to

		ensure we have the right number of staff of all types with the right skills to meet the needs of our health and care system in the future.
25.	<b>Don't some areas, such as Birkenhead, need more than one health and wellbeing centre/place for children's urgent appointments/dressings?</b>	<p>At this point we are asking for people's views on where we should locate the children's urgent appointments/dressings (wound care) service.</p> <p>When we have received all of the feedback, we will use this, alongside facts and figures such as population size/deprivation etc., to inform our modelling of future services.</p> <p>We aim to be flexible in how we allocate our resources in the community, to get the right outcome for the health of the people of Wirral, and to meet the needs of individual areas.</p>
26.	<b>Different local areas have different needs. How will you accommodate this?</b>	<p>We are thinking about how we can make more services relevant to the places where people live in Wirral as the needs of local communities may be very different. We call this approach 'Place Based Care,' and we have divided Wirral into nine 'neighbourhoods'. The idea is that we can look at the needs of people in these areas and staff would work together in neighbourhood teams to help people. This would include NHS staff as well as colleagues from social care, therapies and the teams would have links with charitable and voluntary organisations.</p> <p>This work will start in the next year by looking at how we can help support frail elderly people better to keep them well in their own homes and to try and prevent them from becoming very unwell and needing to be admitted to hospital.</p>
27.	<b>Would the proposed changes mean job losses?</b>	<p>The consultation and redesign of urgent care services is not about job losses. Depending on the outcome, it could involve a change in working location or opportunities for training and upskilling. We are looking at what the staffing requirements are for the new Urgent Treatment Centre as this is a requirement of NHS England. This work is progressing at the moment.</p>
28.	<b>Are you getting any independent advice or review during the consultation?</b>	<p>Yes, we recognise that independent review is a key part of this process. We have invited the NHS England Clinical Senate to review our process and proposals and this will take place in parallel with the consultation.</p> <p>Clinical Senates have been established to be a source of independent, strategic advice and guidance to commissioners and other stakeholders to assist them to make the best decisions about healthcare for the populations they represent.</p>