

Sunderland Urgent Care: Frequently asked questions

What is Urgent care?

We've tried to make it as simple as possible for people to understand what it means and our definition is that urgent care is 'a sudden healthcare problem that needs an appointment within 24 hours with a healthcare professional but is not a life-threatening illness or injury'.

This includes services such as NHS 111, pharmacies, GP services during normal working hours, GP services during evening and weekends, GP services out of normal working hours and the urgent care centres.

Why are you closing the walk-in centres?

We need to do something differently as current set up of services are causing confusion. We have too many services that are providing similar services at the same time and we need to make sure that we are spending money wisely across the NHS system.

Although we are closing the walk-in centres (urgent care centres), they will be replaced with better access to GPs – this is something that you have told us you want.

There will also be an urgent treatment centre located near Sunderland Royal Hospital which is something we need to introduce as part of national policy.

Where will I go to get help?

We're not changing anything yet – this process is about seeking people's views on our plans. If the new system goes ahead, you can either call NHS 111 or speak to your GP about any health problems that you may have.

Where will I get parked? There's not enough parking at Pallion.

Many of these people will be dealt with elsewhere in the system i.e. NHS 111 triage and direction to GP practice or the Sunderland extended access service. This will result in more managed flow which will help parking issues which is being looked at as well.

This is government cuts – what are you going to do about it

Being part of the NHS we have to follow national policy, which is set out by NHS England.

We are proposing this change as we believe it will make the NHS services more sustainable for the future. We're passionate about making sure the NHS is still here for when our children need it.

We need to review our urgent care services by 2020. We need to ensure that care is suitable for people of all ages with physical and mental health problems, that each area has an urgent treatment centre, that there is an improved NHS 111 system, and that GP practices are working together to help improve access to GP appointments

I can never get a GP appointment; I'll just go to A&E

We know that many people face difficulties trying to get a doctor's appointment. This is why we're investing in this area.

Like many areas, we have a shortage of GPs but we're working hard to attract more GPs such as a GP and nurse career start scheme and working with universities to develop training programmes. You might have heard recently that Sunderland University was successful in their bid to open a medical school.

It'll take me xx buses to get there.

As part of this review, we know how people travel to seek NHS help is really important. This is why we are reviewing how these proposed changes could impact this. We have commissioned an independent analyst to look at the travel impact.

Why are you changing?

There are many reasons why we need to change. People have told us they are confused about where to go. Also, the demand for NHS services keeps on growing and we need to do something differently as we can't afford to open any new services.

What does an urgent treatment centre do/mean?

It is a national requirement to provide an urgent treatment centre and we need to introduce this in Sunderland. It will:

- Be led by GPs who oversee a range of primary care health professionals.
- Ideally be located near the emergency department so that people can be transferred between services quickly if needed.
- If someone turns up at the emergency department with a minor injury or illness, the right professionals are close by to help so people are treated by the right healthcare professional and the emergency department can focus on people with life threatening conditions.
- Treat minor illness and injuries including minor head injuries.
- Provide direct access to simple diagnostics such as x-rays, blood tests, emergency contraception and mental health advice/ services.

- Be open 365 days a year, 24/7 (emergency department overnight).
- Offer both pre-booked and 'walk-in' appointments.

What will happen if my injury turns out to be more complex than first thought?

With the urgent treatment centre being next to the hospital, it means that if you need more serious treatment then you will be transferred to the hospital.

Equally if you go to the hospital (emergency department) and, following an assessment, you need urgent but not emergency care then you can be transferred to the urgent treatment centre.

Will the urgent treatment centre have an x-ray department?

Yes. The urgent treatment centres will have access to x-ray facilities

Do I need to make an appointment to go to the urgent treatment centre or can I just turn up?

You will be able to book an appointment via 111 or you will be able to walk in.

What is Sunderland Extended Access? / What does extended GP opening times in hub arrangements mean?

It is a national requirement to provide extended access in GP practices, although this can be provided in hubs rather than in every practice. GP and nurse appointments will be available from 6pm to 8.30pm, Monday to Friday and 9am to 5.30pm on weekends (times vary for weekends and bank holidays).

This means people could access urgent appointments within 24 hours because GP practices would work together to manage these types of appointments. Each hub will be able to access your medical records so they will be able to see your medical history.

Will I be able to see my own GP if I have an appointment at an extended GP hours hub?

In an extended GP hours hub you may not be able to see a doctor from your own practice but he/she will have full access to your medical notes.

Will I be given a choice of where I can attend for a GP appointment if my own surgery is not available – for example if I need to go to one of the extended GP hours hubs?

Yes. People can be seen in the hub which is closest to where they are, not just the one that is closest to where they live. This will help people who work access care more easily.

I've used NHS 111 before and I received [poor service]. I don't want to ring them to get help.

NHS 111 is the national telephone number, run locally by the ambulance service, where healthcare professionals are on hand to provide telephone-based clinical advice, access to out-of-hours doctors and wider medical services when they are needed.

There will be an improved service in place from October 2018 with more healthcare professionals available to answer your calls. This means that more people can call to get health advice without the need to travel to an appointment. This will be known as the 'Integrated Urgent Care Service'.

The new service is designed to ensure that most patients' problems are dealt with on their first call, including a consultation with a clinician where that is needed. Staff will have access to a range of real-time information, including a summary of GP-held patient records, and details of local services such as GP extended hour's schemes and community pharmacies.

What should I do if I feel ill during the night and want to see a doctor?

You should contact NHS 111 who will be able to advise you of the best treatment or course of action.

Will a doctor or nurse answer my call when I ring NHS 111?

Not initially. Your call will be answered by an experienced call handler who will ask you a series of questions. After this assessment, you may be transferred to a doctor, nurse or other health professional who will ask you further questions and make recommendations on what you need to do next.

Does NHS 111 have access to my medical record?

NHS 111 will have access to a summary of your medical record.

Will NHS 111 be able to book an appointment for me to see a GP directly if I need one or will I then have to make another call myself to make an appointment?

Staff will also be able to book appointments with local GPs, send prescriptions directly to a convenient pharmacy or dispatch an ambulance where that is necessary.

Will NHS 111 direct me to a GP appointment every time?

Not necessarily. You may just be given advice which meets your need or directed to another more appropriate service, e.g. a pharmacist, a falls service, a district nursing service, a minor injury unit or A&E. The new NHS 111 service is designed to ensure that most patients' problems are dealt with on their first call, including a consultation with a clinician where that is needed.

Does this mean that every time I want to make an appointment with my GP, I have to ring NHS 111 first?

No. If you want an appointment with your GP, you should contact your practice direct to make an appointment. You should only call NHS 111 if you have an urgent care need which is a sudden healthcare problem that needs an appointment within 24 hours with a healthcare professional but is not a life-threatening illness or injury'.

There are not enough GPs to fulfil the pressures. I don't understand how you will staff?

We have done a lot of work over the past year. It is not a contractual requirement but SEAS is already fully staffed with GPs. The problem is over the past 6/7 years, we don't have enough GPs to staff all our current services. We want to use the resources we have but sustainably.

There are lots of things going in Sunderland to retain the GP and nurse resource. We hope that GP will be able to pass over some visits to home visiting service in order to increase GP capacity. We have a GP scheme to get more DRs to stay in Sunderland as a GP.

People do not know about the Sunderland extended access service?

We have not advertised this, because it is not a walk in. We are doing work with practices to increase the awareness and opportunity within practices.

What does a clinical person include?

A registered range of health and clinical professionals e.g. Nurses, GP's, Palliative Care, Health Specialists, includes mental Health nurses etc.

What work has been done for mental health patients?

NTW have been at the development of these proposals.

How much work have you done with regards to travel transport?

We have held 2 travel and transport events to discuss the travel impacts. The Travel impact has been done by an independent analyst.

Why do people not know about the SEAS?

The system is currently in place and is fully up and running. We have not advertised this, because it is not a walk in. We are working with practices to increase the awareness and opportunity in practices.

NHS111 can book appointments now and will continue. Some urgent appointments are taken by people who those NHS 111 will assess don't need people to make sure people who need an appointment, gets one.

The home visiting will free up GPs appointments. This means extra 1-3 appointments per patient per day. NHS 111 holds information about what pharmacies are open to tell patients which are open.

How does the data sharing work between the Urgent treatment centre and the GP?

GP records will be shared - i.e. summary care record. Only those who need access to your records will have it to help with your care.

If you've already made changes such as 111 and SEAS why do you have to the Urgent treatment centre?

Not everyone is using the three systems correctly to get the right treatment.

Why are you closing the buildings?

Buildings are not closing, all other services which are delivered from these buildings, will remain the same. You may even see new services delivered from there in the future.

Access to urgent care closer to home – people said they wanted this. The SEAS will be accessible until 8PM, what about after this?

As part of the consultation, we are asking the public what times people think these should close. If someone is so ill that they need to be seen immediately, then this is an emergency and not urgent care.

Will people be told if they're in the wrong place?

There is a big national campaign before 111 starts. We might have to commission a service to make sure we are talking to people. We would want to set up something that will allow people to be guided. Once they get clinical advice it's giving them the tools to know where to go.

What about data protection sharing?

All GP's at the moment are on the same information system. Work is being undertaken at the moment/. We will not do anything illegal, we follow all medical and legal regulations.

Will travel costs be reimbursed for people having to travel to Pallion?

This has been raised as part of the consultation, and is something we will look into.

Can you give assurance to the public that this is not just about saving money?

The consultation has been 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.

Does Pallion have the capacity to deal with additional patients?

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.