



## Royal Sussex County Hospital Urgent Treatment Centre

This paper refers to the development of the Urgent Care Centre, co-located at the Royal Sussex County Hospital A&E department, to meet national Urgent Treatment Centre standards.

### Improving Urgent Care for Patients

Urgent care is a term used to describe the range of services people access who require same day health or social care, advice and/or treatment. Emergency care describes services which respond to serious or life threatening illness or injury like A&E and 999.

Across the country, people have fed back that the number of different NHS services available to them is confusing, particularly when they need urgent care. This is understandable as there are many services that do similar things but have different opening times and have different names such as urgent care centres, walk-in centres, minor injuries units and GP health centres.

This confusion means some people are not clear where to go to get the help they need, often ending up in A&E as it is a well-known and trusted service, when they could have been treated quicker and easier elsewhere. This can put A&E under additional strain, leading to sick patients waiting longer to be treated than they should and hospital staff being put under more pressure.

As well as being confusing for the public, having lots of different services all working in different ways means the care being provided is sometimes not as seamless as it could be. This can mean some patients do not get the right care they need, where and when they need it. For some patients, particularly the elderly and frail, this can mean they don't get help until they reach crisis point and then end up in A&E. They might even end up being admitted to hospital when there are better, more appropriate, ways that they can be treated.

### Integrated Urgent Care

The nationally mandated Integrated Urgent Care (IUC) Service Specification sets out a series of principles and standards for the future of urgent care which commissioners and providers are required to meet. Central to these new models of care will be the enhanced NHS111-IUC Clinical Assessment Service (CAS). This is an integrated 24/7 urgent clinical advice and treatment service.

'Face-to-face' services will vary according to local commissioning and patient need but

will offer consistency, improved access to community and primary care services and include Urgent Treatment Centres (UTCs). UTCs are required also to meet a standard service specification. UTCs will be established either as:

- Integrated community and primary care services including improved access and direct booking of appointments; or
- Co-located on A&E sites, open for at least 12 hours a day, seven days a week and including direct booking of appointments. This will give access to urgent primary care and where necessary to emergency departments.

## Sussex and East Surrey Sustainability and Transformation Partnership

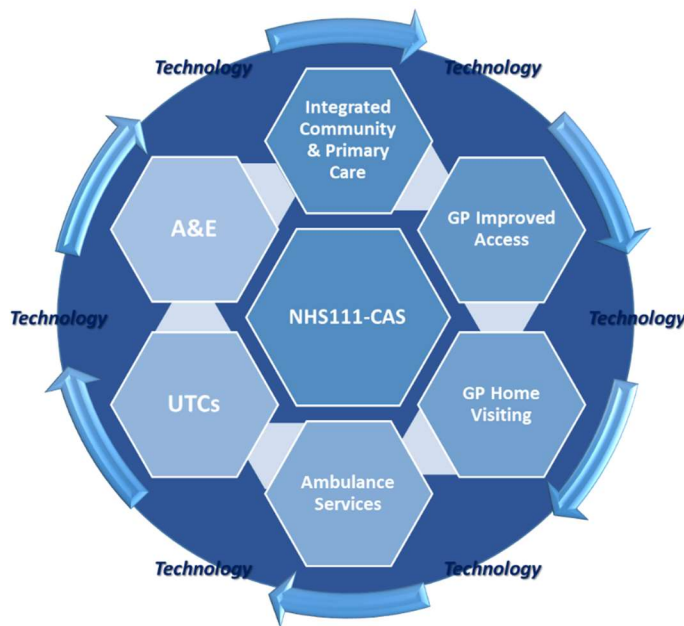
In Sussex and East Surrey, our Sustainability and Transformation Partnership (STP) has 24 partners, including local authorities, providers and clinical commissioning groups (CCGs), all working collaboratively to meet the changing needs of the people who live in our area.

The STP has four 'places', Coastal Care, Alliance South, Alliance North and East Sussex Better Together, the geography of each "place" is built around the local hospital trust and has local plans to integrate services with the respective local authority. Whilst these "place" based plans are at differing levels of development, the overarching strategy is consistent across the STP.



The STP is looking at how key areas can be improved and delivered more effectively and urgent and emergency care is one of our priorities.

## The Sussex and East Surrey Urgent Care Model



Across the Sussex and East Surrey STP we have followed the principles and standards described above to develop a strategic networked model for urgent care. This will deliver the optimum model to meet the urgent care needs of our population. It will also make the best use of local service commissioning models and focus on blending and integrating our workforce and services.

We recognise that our services have become fragmented across community, acute and primary care providers. The ability to deliver consistent pathways is further impacted by commissioning group boundaries, which do not always reflect the way patients access services and which have become unsustainable both financially and for our workforce.

Critical to our networked model for urgent care is the principle that our services will be standardised so that our patients understand what is available and how and where to access services when they are needed. We recognise that one size does not fit all so there will be local evidence based nuances to services to ensure specific needs can continue to be supported.

### Urgent Treatment Centres (UTCs)

UTCs are community and primary care facilities that provide access to urgent care services for the local population. It is recognised that there are advantages to such facilities being co-located and integrated with primary care services but there are also advantages to being co-located with hospital A&E departments with decisions being determined by geographic distribution of urgent care sites and patient flow.

These services will be available at least 12 hours every day and staffed by GPs, nurses and other clinicians. They will be equipped to diagnose and treat many of the most common ailments that people often go to A&E for, and will provide both a walk-in service and bookable same day appointments.

UTCs will focus urgent care provision where it is most needed and for Sussex and East Surrey, the best places for these UTCs have been determined as being a combination of sites that are either:

- Co-located with our existing A&E departments, integrated with A&E work force and services; or

- At existing community hospitals that will be integrated with community and primary care services.

In deciding upon these locations, we have reviewed all of our urgent care sites and it has become clear that many of them are underutilised and not set up to meet the ever changing needs of our patient population. This was further supported when we looked at what type and how often services are accessed. It is clear that in many cases our patients would be better supported by enhancing primary and community services. As UTCs are established patients will also see primary and community services being developed so that the right services are available where and when they are needed.

### **Royal Sussex County Hospital UTC**

The UTC at RSCH will be part of the integrated urgent care solution across the South Place and in the wider STP, which aligns NHS111 including the Clinical Advice Service, Improved Access to Primary Care, GP out of hours and primary care streaming within the A&E. The RSCH UTC will replace the current Urgent Care Centre (UCC) co-located with the RSCH A&E. Co-location with A&E is recommended as the preferred service model as it allows for the flexing of workforce, access to diagnostics, and the opportunity to enhance streaming within the A&E department.

The scope of the Brighton and Hove UTC follows the 27 National UTC Standards, of which the current UCC already meets the majority of standards. The current opening hours for the service will remain 24/7 and will remain accessible on a walk-in basis with the addition of booked appointments. The RSCH UTC will be designated by December 2019, although, some work arounds will be in place while building works continue at the RSCH site and until the new NHS111 contract commences (April 2020). The CCG is working closely with the provider trust to identify interim solutions to direct booking from NHS111 into the UTC and finalising estates and workforce modelling.

A streamlined campaign under the single banner of 'Improving Care for You' will be run across the whole Sussex and East Surrey STP to promote awareness and access to Integrated Urgent Care Services (IUC) for the benefit of local communities. This will allow CCGs to share aligned key messages in a cost effective and accessible way for local populations. This will ensure consistent messaging for patients and the public across the region. In addition, engagement activities will be conducted at a local level and communications will be tailored to our local communities. The STP wide IUC communications plan will cover the following:

- NHS111; including Clinical Assessment Service and NHS111 Online
- Improved Access to Primary Care
- Urgent Treatment Centres
- Integrated Primary Urgent Care Service

There are four high level aims and objectives of this plan, which are to:

- Set out a strategic, consistent and coordinated approach to communications for the roll out of Urgent Treatment Centres
- Provide consistency with STP and national messaging
- Set out how different stakeholders and audiences will be communicated with and engaged in the roll out and launch of Urgent Treatment Centres
- Provide reassurance to the project steering groups and NHS England that a robust and effective approach to communications is in place and appropriate advertising has been planned in relation to the roll out of Urgent Treatment Centres

The following public engagement has already taken place:

- Brighton and Hove Big Health Conversation: 04/07/2017
- Brighton and Hove evening patient & public focus group: 04/10/2017
- Brighton and Hove Commissioning Intentions Event: 11/11/2017
- Brighton and Hove Young People's Big Conversation: 12/12/2017
- Brighton and Hove Big Health Conversation: 28/02/2018
- Urgent Care Patient and Stakeholder Event: 19/09/2018
- Patient Participation Group Network: 24/10/2018
- Brighton and Hove Big Health Conversation: 09/11/2018
- Engagement with Council and Health Organisations (ECHO): 26/03/2019
- Patient Participation Group Network: 24/04/2019
- Engagement with Council and Health Organisations (ECHO): 25/06/2019

An Equality Impact Assessment (EIA) has been completed for the RSCH UTC development which will be used to inform the communication and engagement strategy. The EIA results suggest further engagement with the following local communities:

- People with Disabilities
- Older people
- People from the BAME community with English as a second language
- Individuals with no fixed abode
- Individuals from areas of higher deprivation
- Young males

As the national vision aims to simplify and streamline urgent care it does not include Walk-in Centres or Minor Injury Units; instead these services will either need to be developed to meet UTC standards or form part of the Integrated Primary Urgent Care offer. The Integrated Primary Urgent Care provision is currently being reviewed across Brighton and Hove, which includes the walk-in centre, and this will be subject to a separate paper presented to HOSC at a later date.

