

Hayes Walk in Centre - Consultation Report

August 2012

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1.0 Executive Summary

In February 2012 The Hillingdon Public Health team prepared a report on the Hayes Town Medical Centre (HTMC) Walk in Centre (WIC) looking at current usage. With the launch of the Hillingdon 111 service and the procurement of an enhanced Urgent Care Centre, the HCCG at the Board endorsed the recommendation that the Hillingdon PCT Board should consider decommissioning the Walk in Service in Hayes.

NHS Hillingdon launched a 12 week public consultation asking members of the public for their views on proposals to decommission the walk in service in the Hayes 'Hesa' centre and improve services and access to the Urgent Care Centre (UCC) at the Hillingdon Hospital. The consultation ran from May 2nd 2012 – July 26th 2012.

The full consultation consisted of an online and paper based survey, and 3 focus groups. In total 92 people completed the survey and 12 members of the public attended one of 3 focus groups.

An equality impact assessment has also been conducted; this is located in Annex G.

In view of the feedback and responses received, it is clear that the walk in service is well used and in the majority of cases, it is seen as a valuable resource in the local community.

However, there is evidence to suggest that the majority of patients who use the service are already registered with a local practice and use the service during core GP opening hours because they are unable to get a routine GP appointment with their own practice.

This report has taken into account the views of members of the public, local MP, Overview and Scrutiny and an Equity Impact Assessment and has concluded that the Walk in Centre should not fully decommission.

This report concludes that the Walk in Centre is not decommissioned; instead it is recommended:

- The Walk in Centre ceases during core opening hours (From Wednesday October 3rd 2012)
- PCC and PCT review the Extended Hours DES (Directed Enhanced Service) to ensure provision of additional routine appointments is in line with local demand
- More support is given to patients who are not registered with a local GP
- Practices that close for a half day midweek will be encouraged to remain open
- Support GP practices to further raise awareness of the impacts of missed appointments
- Review the impact of the Walk in Centre's reduced service in six months

To support the above it is recommended that a concentrated media and communications plan is drafted to support all of the above.

2.0 Key themes from the consultation report

The main themes from the consultation can be summarised in headlines as follows:

- **Theme 1: Patients value quick access to the Walk in Centre and consider the extended opening times to be of benefit.** Patients felt assured by the accessibility to a local GP through the walk in centre. The convenience of longer opening times and weekend access means that they are able to fit their appointments around their schedule and needs.
- **Theme 2: Patients find it hard to get an appointment with their own GP.** Many patients do approach their GP as their first point of contact, but experience difficulty in getting an appointment with some experiencing waits of up to 7 days. There was a general concern that this would intensify if the Walk in Service closed.
- **Theme 3: Concerns about patients who experience barriers to access.** This included patients whose first language is not English, meaning that alternative services such as NHS 111 would pose further barriers.
- **Theme 4: Added distance of travel to the UCC.** Patients, especially elderly, those with children, carers and patients with limited finances would not be able to afford the costs associated with travelling to and/or parking at the Hillingdon Hospital.
- **Theme 5: Misconception that the decommissioning of the walk in centre extended to the two GP practices.** Despite all promotional materials stating that the Orchard Practice and Hayes Town Medical Centre practice would remain open, patients continued to think that these services would also close.
- **Theme 6: Concerns about impact of closure on other urgent services.** The focus group raised concerns that additional demand would add pressure to UCC and A&E services resulting in even longer waiting times.

3.0 Background

“Healthcare for London: A Framework for Action” proposed improving access to primary care services by developing GP-led health centres to supplement existing services. In this 2007 report, it was envisaged that Primary Care Trusts would ensure that these centres opened from 8am to 8pm, 365 days a year, and that they opened to any member of the public, so that people could walk in regardless of which local GP service they were registered with. Following this report, under the Equitable Access Programme, all PCTs were required to commission a GP-led health centre under a time-limited contract to improve the patient experience. The walk-in centre at the Hayes Town Medical Centre (HTMC) was established in autumn 2009 under this initiative. It was created alongside a new GP practice following the death of a single-handed GP.

In February 2011, the Department of Health wrote to all PCT Chief Executives setting out CCG’s future responsibilities for contracts under the Equitable Access Programme covering services for non-registered patients. The letter advised that CCGs should review and decide whether to decommission the open access element of the service upon contract expiry.

Due to planned improvements to Hillingdon’s unscheduled care services, namely the introduction of NHS 111, the development of the A&E and UCC departments on the Hillingdon Hospital site, and the introduction of a new model of care at the Hillingdon UCC, Hillingdon PCT considered it timely to review services provided by the Hayes Walk In Centre.

In February 2012 The Hillingdon Public Health team prepared a report on the Hayes Town Medical Centre (HTMC) Walk in Centre (WIC) and the HCCG reviewed the findings from this report on 9th March. The HCCG endorsed the recommendation that the Hillingdon PCT Board should consider decommissioning the Walk in Service in Hayes.

With regard to this, the Board agreed:

- Public Health Team to review available data to determine the number of patients who subsequently attend UCC or A&E within 7 days to allow commissioners to manage the flow of patients into alternative health care services and build assumptions into the UCC redesign
- Public Health Team to undertake full Equality Impact Assessment
- PCT to inform Hillingdon External Services Scrutiny Committee of its intentions
- PCT to undertake a public and stakeholder consultation exercise
- PCT to prepare final report for consideration by the Board.

Following the Boards agreement, HCCG Communications and NHS Ealing Public Health colleagues carried out a full 12-week public consultation from May 2nd 2012 – July 26th 2012. Alongside the consultation the team conducted three focus groups where information gathered has been used to conduct an Equality Impact Assessment.

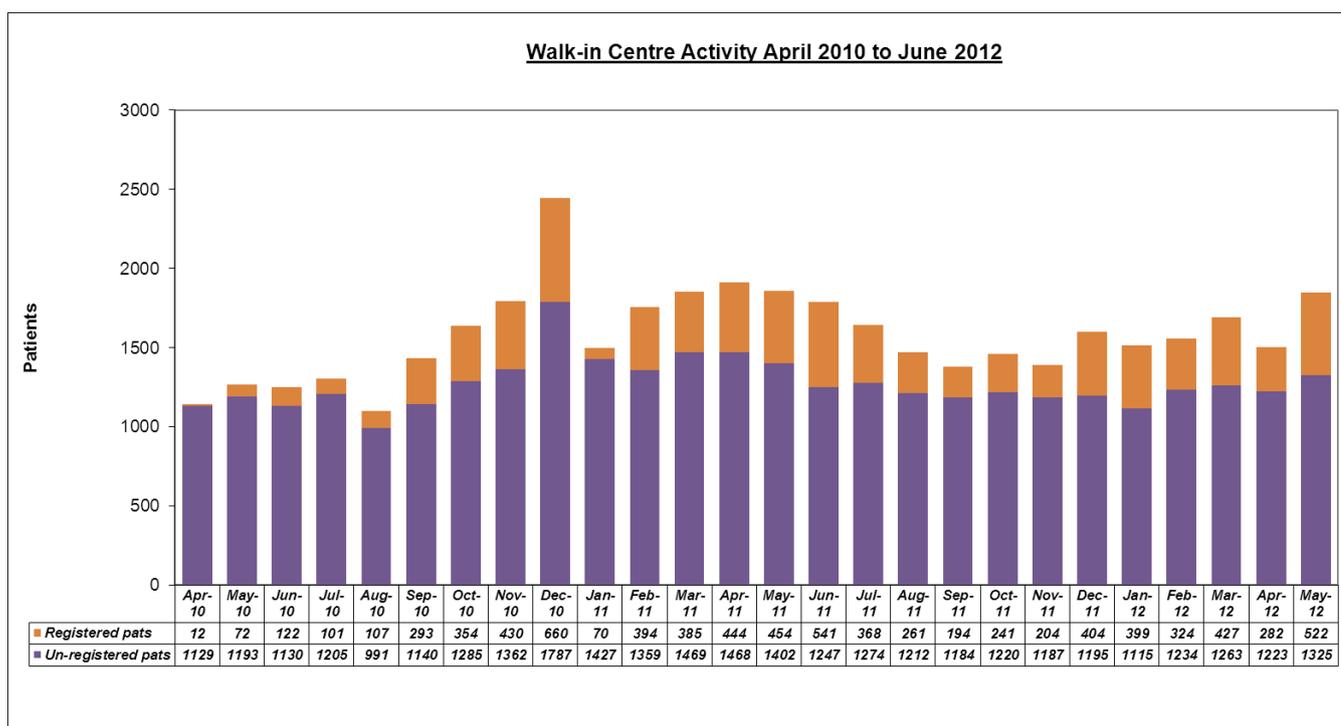
This report combines the results and a view of members of the public obtained during the 12 week consultation and presents the Equality Impact Assessment as Annex H.

4.0 About the Hayes Walk in Centre

There are ~ 5400 patients registered with the Hayes Town Medical Centre, the practice that also operates the walk in service from the same premises in the Hesa Centre in Hayes. Registered patients are able to book appointments with the practice but are also able to use the walk-in centre facility. Registered patients can get any GP-provided services in their walk-in appointments but unregistered patients can only get services from a reduced list.

4.1 Hayes Walk in Centre Usage

The walk in centre shows a consistent year on year increase in use:



- Between 1.10.10 and 30.9.11, 16,422 patients attended the WIC. On average there are 42 visits per day with the highest recorded attendance for one day being 105 on 28th December 2010.
- Patterns of attendance mirror those in other urgent care settings: Saturdays, Sundays and Mondays being the busiest days.
- Peak time to visit is 1pm on weekends and 6pm-8pm weekdays.
- From the available data, 81% of attendances at the WIC were by Hillingdon PCT responsible patients.
- From the available data, the GP practices with the highest rates of attendance at the WIC are those in closest proximity to it.
- The largest number of attendances are from children under 5 years (approx. 20%), this compares with under 5's attendances at UCC (15%) and A&E (10%).
- Second highest age range is young female adults 20-24 years.

- Where ethnicity has been recorded on the patient record, White British, followed by Indian or British Indian and then Black or Black British African were the most frequent users of the WIC.
- 15% of all attendances were registered patients from one of the two practices who occupy the Hesa Centre alongside the Walk In Centre.
- From the top 25 presenting conditions, nearly 50% were due to upper respiratory tract infections, dermatology or gastroenterology (D&V).

5.0 Engaging patients, public and stakeholders in the consultation and focus groups

There has been speculation that the consultation and the focus groups were not adequately publicised and some residents expressed concern that not all those affected by the changes have been given the opportunity to express their views.

HCCGs approach to patient and public involvement (PPI) is to create and sustain an on-going dialogue. This is to ensure local residents are aware of Hillingdon's commissioning intentions, and are given the opportunity to shape the design.

5.1 HCCG Engagement

To encourage engagement HCCG Communications advertised the consultation through the following channels:

- To all Hillingdon PCT and HCH staff
- To all Hillingdon GP practices
- Online through the PCT website
- Online through NHS alerts
- On the Hillingdon Council website
- Through the Council's Hayes and Harlington community engagement officers (this covers tower blocks and resident associations)
- Uxbridge Gazette (3 articles)
- Through Bondcare (providers of the WIC)
- DASH
- AGE UK
- Hillingdon Twitter account

In addition to this, letters were sent to Hillingdon External Services Scrutiny Committee and to John McDonnell, MP.

In addition to cascading the appropriate materials to all GPs, a letter to the Managing Director of Bondcare was sent ahead of the start of the consultation and again at the beginning of the consultation to ensure they were aware of the process and able to advertise the consultation with their patients.

5.2 Focus group engagement materials

- Improving
- A poster detailing the focus group and inviting members of the public to the focus groups was distributed. (Annex H)
- To clarify at the focus groups the proposals a Frequently Asked Questions Document that was cascaded to members in the focus group (Annex I)

5.3 Hillingdon LINK engagement

Hillingdon LINK has provided support throughout the consultation. This included commenting on the consultation questions before publishing and advertising the consultation survey and focus groups to the following:

- Sahan Centre
- Tageero (Hayes)
- Hayes Town Partnership
- Age UK Hillingdon
- Hillingdon Carers
- Hillingdon Alliance of Residents Associations (HARA)
- The Voluntary Sector Health and Social Care Forum,

- Organisations and individuals on the LINks database covering UB3 and UB4
- Councillors with wards in the above postcodes.

5.4 Additional engagement

Despite this effort to communicate and engage with residents, uptake to the consultation was low and the first focus group attracted no attendees. Another communication was therefore resent to all of the above, and also distributed to:

- Refugees in Effective and Active Partnership (REAP - a link to the consultation was sent to all their contacts
- Inter Faith Network
- Emailed all attendees from the 2nd focus group to attend the additional focus group and / or inform their groups
- HCCG Communications (with permission from Bondcare) distributed paper surveys to patients in the Walk in Centre over a 2 day period and also visited cafes in the surrounding area and handed out and waited for the return of completed questionnaires.
- A written update to the July Overview and Scrutiny Board – no formal response has been received

6.0 Key Findings

This section includes results from:

- Online survey (**Annex A**)
- Feedback from focus groups (**Annex B**)

This report also benefited from engagement and responses from:

- Hillingdon LINK (**Annex E**)
- John McDonnell MP (**Annex F**)
- Individual who attended the focus group (**Annex C**)
- Feedback from Bondcare (verbal)

The following results combine responses from the online / paper survey, focus groups and Hillingdon LINK response.

- There was a general consensus that due to the accessibility and locality of the walk in centre, residents in Hayes and Harlington would be at a disadvantage if the proposals to decommission the walk in service go ahead
- There was a majority concern that closure of the walk in centre service would further reduce patient access to a GP. Participants at the focus group said they were currently waiting up to 7 days to see a GP
- From the online survey and paper surveys 67% of respondents objected to the proposal to close the walk in service at the Hesa. 12% supported the proposal
- When asked which service members of the public accessed in the last 12 months between 8am – 8pm the top 2 services were their local GP (51%) and the Walk in Centre (49%)
- Outside of these hours both the UCC and Harmoni-out of hours services were used by 12% of respondents
- 30% of respondents felt they had good access to their GP for urgent appointments, although 33% found access to be poor
- 9% felt that access to an out of hours GP was good opposed to 35% who found this service to be poor
- There was a general support to decommission the walk in centre if Hillingdon GPs opening hours would be extended alongside the opening of the extra services at the UCC
- 64% of respondents to the survey supported plans to improve services at the UCC. 12% objected to plans, 21% did not know
- Both survey responses and responses from the focus groups expressed a need to understand what services would be available at the UCC – this would need to go hand in hand with what services would remain available at the GP practices
- Survey results showed that respondents felt NHS 111 could be used to filter out non-urgent cases and freeing up emergency services, however when asked for patients views on the service there was a lack of knowledge on what the service offered patients

- 48% of respondents to the survey stated that the proposals to decommission the Walk in Centre service would result in a change to their current travel arrangements. These included driving, taking buses and parking charges
- The focus group and LINK report raised concerns that travel to the UCC would disadvantage many groups of people: parents with small children would struggle to get their pushchairs on the buses required to get to the UCC, the elderly, frail and disabled would also struggle to access public transport and those with a car would find parking both difficult and expensive.
- The online survey asked respondents to rank what was most important to them, the top three, in order were:
 - I can access a GP 24 hours a day within 4 hours (42%)
 - I am able to get advice over the phone (24 hours a day) (34%)
 - My GP records are available (with permission) at the Urgent Care Centre (28%)
- One response from Hillingdon LINK states that views expressed that the walk in centre was over-utilised leading to long waiting times and a reduction in the quality of services provided.

7.0 Recommendations

In view of the feedback and responses received, it is clear that the walk in service is well used and in the majority of cases, it is seen as a valuable resource in the local community.

However, there is evidence to suggest that the majority of patients who use the service are already registered with a local practice and use the service during core GP opening hours because they are unable to get a routine GP appointment with their own practice. This means that the PCT is duplicating the commissioning of primary care services during core GP opening hours.

Recommendations follow and are based on responding to the themes identified by this consultation process but also take into consideration the need for commissioners to ensure that services represent value for money.

Recommendation 1: Walk in centre service ceases during core GP opening hours

This report has demonstrated a need for flexible access to primary care, in particular between the recognised peak times: 6pm and 8pm, and weekends. It is therefore recommended from **Wednesday October 3rd 2012** a reduced service operates as follows:

- Only patients registered at Hayes Town Medical Centre will be seen by clinicians during core hours
- Walk in centre service is maintained weekday evenings between 6pm and 8pm
- Walk in centre service is maintained weekends and bank holidays, but offering reduced hours (10am to 4pm) instead of 8am to 8pm

Recommendation 2: PCC and PCT review Extended Hours Directed Enhanced Service (DES) to ensure provision of additional routine appointments is in line with local demand

Feedback from respondents has shown that patients are waiting up to 7 days to see a GP for a routine appointment. A review of the Extended Hours DES will ensure that the Walk in Centre's reduced service (recommendation 1) will not increase waiting times for routine appointments.

Recommendation 3: More support is given to patients who are not registered with a local GP.

Unregistered patients who access the Walk in Service can only receive services from a reduced list. Ensuring all patients are registered will allow those requiring the Walk in Centre at the new recommended hours of operation will benefit from the full list of services.

Recommendation 4: Practices that close for a half day midweek will be encouraged to remain open

This aims to support the extra appointments that will be expected as a result of the reduced hours operating in the Walk in Centre and assist with bridging the gap between waits for a non-urgent appointment.

Recommendation 5: Support GP Practices to further raise awareness of the impacts of missed appointments. GP practices currently display the number of missed appointments. It is a known fact that missed appointments cause delays and is a contributing factor to the long waits patients experience when booking a non-urgent appointment. This report recommends that a budget is made available to develop a leaflet that practices can hand out to patients, further highlighting the consequences of missed appointments. This recommendation also supports recommendations 2 and 4.

Recommendation 6: Review the impact of the Walk in Centre's reduced service in six months. An impact assessment should be carried out in six months this should include input from members of the public and GP practices in the Hayes and Harlington locality.

Recommendation 7: Concentrated media and communications plan is drafted and implemented to support all of the above recommendations. Patients using the walk in service should not be feel that they have no means access to local healthcare as a result of the reduction in operating hours at the Walk in Centre. A robust media and communications plan should be drafted and implemented from mid-September to raise awareness of the changes, how and when to access healthcare in Hayes and Harlington, and encourage patients to submit their experiences to the PCT and HCCG and to get involved in the impact assessment in 2013.

7.1 Benefits

If the above recommendations are approved Hillingdon PCT, HCCG, Patients and Public will benefit in the following ways:

Patients and Public:

- The Walk in Centre Service will continue to provide out of hours support at the busiest times
- Patients will experience shorter waits for non-urgent appointments
- Access to urgent healthcare will be simplified (through robust media and communications)
- More patients will be registered with a GP
- More patients needing the Walk in Centre will be able to access the full range of services
- Patients and members of the public will have the opportunity to voice their experiences of the new arrangements and suggest improvements

PCT / HCCG

- The proposals support future strategic direction for unscheduled care services
- Reduces cost and resource duplication with other services
- Limits service change while service transformation is underway

8.0 Conclusion

Following the board's recommendation a 12 week public consultation was undertaken to look at the impact of commissioning the Walk in Centre. The consultation has shown it is clear that the walk in service is well used and in the majority of cases, it is seen as a valuable resource in the local community.

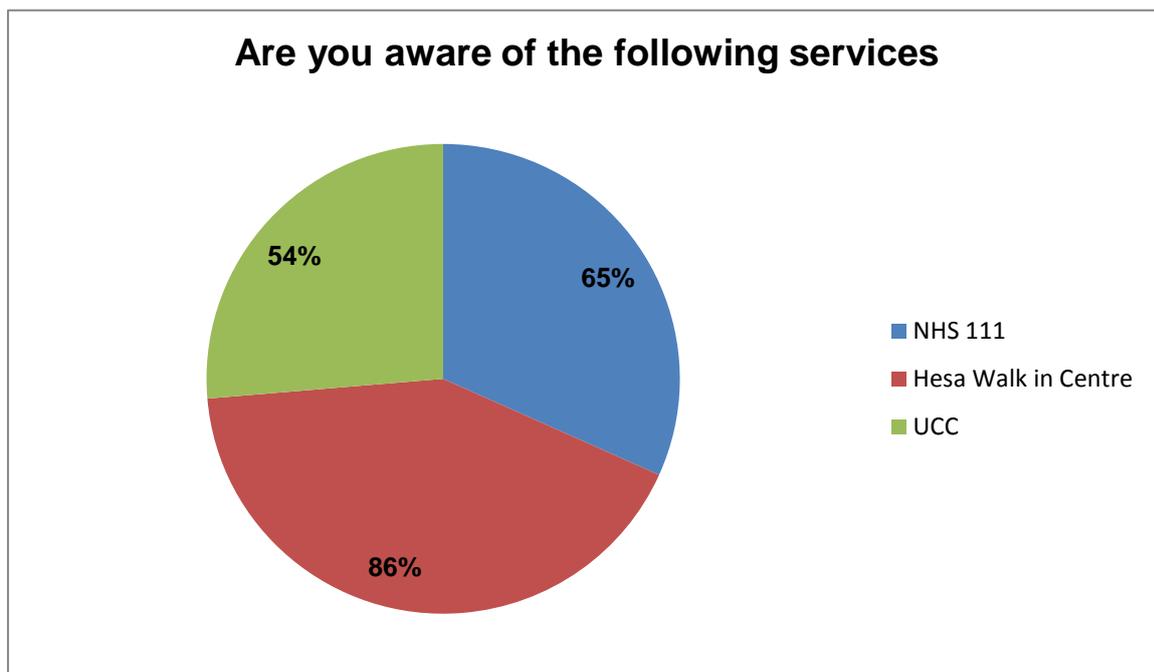
Themes throughout this report has also shown that travel to the UCC would pose issues within this community and that decommissioning the service fully would place extra strain on access to non-urgent appointments.

This report has therefore set recommendations for the HCCG board to approve and review the impact of these recommendations after six months.

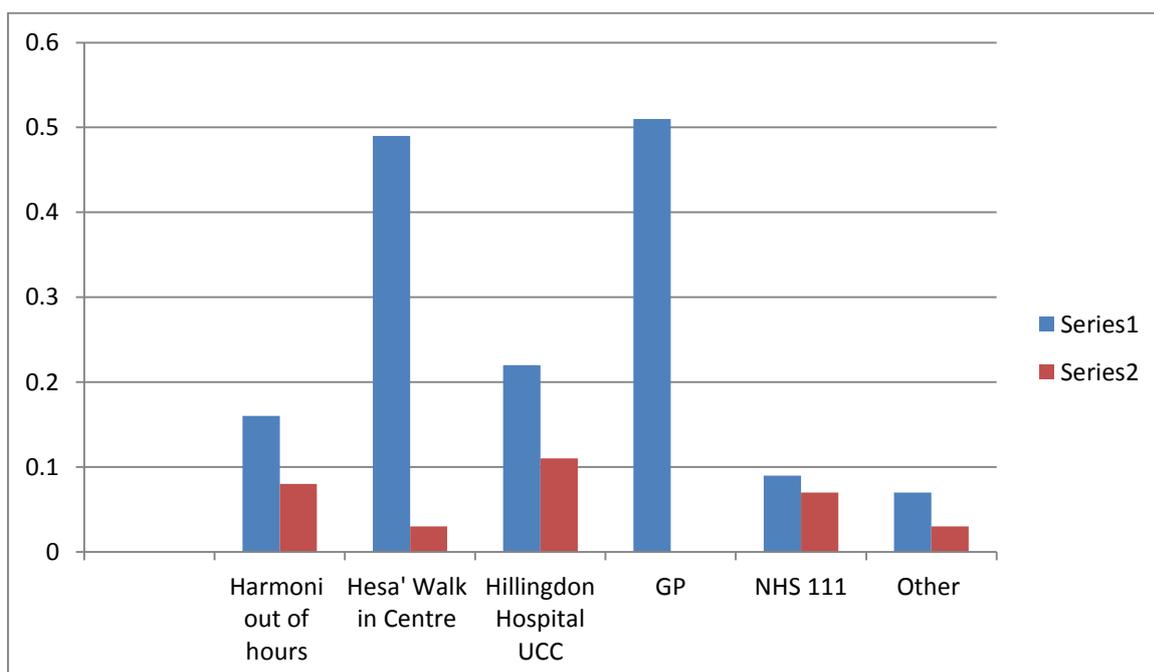
Annex A: Online Survey results

Hayes Walk in Centre consultation results

Total number of responses 92 ~ online survey – 45 ~paper survey – 47



When unwell, which of the following services have you accessed in the last 12 months?



If you answered yes to any of the above, please state what reason

- Chlamydia
- Children not being well
- General illness
- Any medical conditions
- Illness
- Nearest Hayes centre
- GP – blood pressure, rheumatoid arthritis, diabetic check
- Clinic – to check out my left foot
- When unable to get appointment from GP if myself or kids are not well. Also used Walk-in Centre out of hours
- Flu
- Children's illnesses, ward's disability and needs
- To see nurse or doctor
- Childs not well, family not well
- Chest infection, fractured wrist
- To see my GP and Practice Nurse
- Fever, cold
- Kids and injured arm
- Daughters had skin & mouth infection, GP couldn't give appointment, then HESA helped me
- Visited HESA Walk-in Centre on a Saturday a.m. for eye problem. Worse next day so went to Hillingdon hospital and from there was referred to Western Eye Hospital
- Infected gums (can't eat) GP surgery closed Wed pm
- Illness, injury
- Advice on medical condition, what medication to take or whether to go to hospital
- If we have any emergency we can make application on phone and see the doctor
- Had fall and had knee injury
- Because after 8pm the Walk-in Centre is closed

- Throat infection, ear infection, babies unwell
- Because it's so convenient
- Minor injury
- Close proximity
- To see my GP
- Cold, Hay-fever
- Couldn't go to see my doctor for over a week
- It's easier than the long waiting in the hospital
- Children with high fever and short breath
- Both of my children had a non-urgent health need, and I booked routine GP appts both times.
- returned from holiday, had a swollen leg after flight, advised to see a HCP immediately
- dizziness and asthmatic conditions
- Complications post discharge from hospital
- Do not ask stupid questions, I had a medical issue that needed sorting out. also the hesa does not operate after 8pm,
- NHS DIRECT
- Medication interaction
- Stomach pain sore throat and ear
- Unwell and my GP is never open
- sudden illness
- Went to Urgent Care at Ealing Hospital on advice of Occupational Health Dept at work
- Infections
- Non-emergency appointment required so used usual GP service
- blood pressure, thyroid and blood tests
- walk in centre in Hayes, Hesa is horrible experience, staff are rude, the blonde dr was totally panic and ?if she was on drugs/ ask me what i wanted and too speed up as she has so many patients to be seen and she is tired! I was totally scared as i was there to see her and was totally in her room to be butchered?? I was told later whereby she gave a patient the wrong medication on way out as a elderly patient was at the reception arguing re the dosage and wrong medication given to him. Dr about was asked to come out to deal with the situation, whereby he called the patient in to his room. I don't know what happen after that. I will never go back there.
- breast lump
- Unable to get an appointment with GP, had spoken to NHS direct who had then advised to seek medical attention

- for medical care
- child unwell
- General check-up GP, Injury Walk in
- was taken ill during last December with severe vertigo
- EALING UCC
- for non-emergency.
- Knew where Urgent Care centre was and was a Sunday; suitable GP appt available other occasion
- non urgent, so waited approx a week for a GP appointment
- I am aware of the 111 Service as I have seen jobs advertised. Other than that I have limited knowledge of this facility and whether it is effective.
- Have regular blood tests at Hesa clinic instead of going to Hillingdon hospital.
- Hesa centre to access semi-urgent healthcare at short notice due to GP lack of appointments

What are your views on our plans to improve services available in the Urgent Care Centre at The Hillingdon Hospital?

Strongly support	Support	do not know	Object	Strongly object
32%	33%	21%	6%	7%

Why?

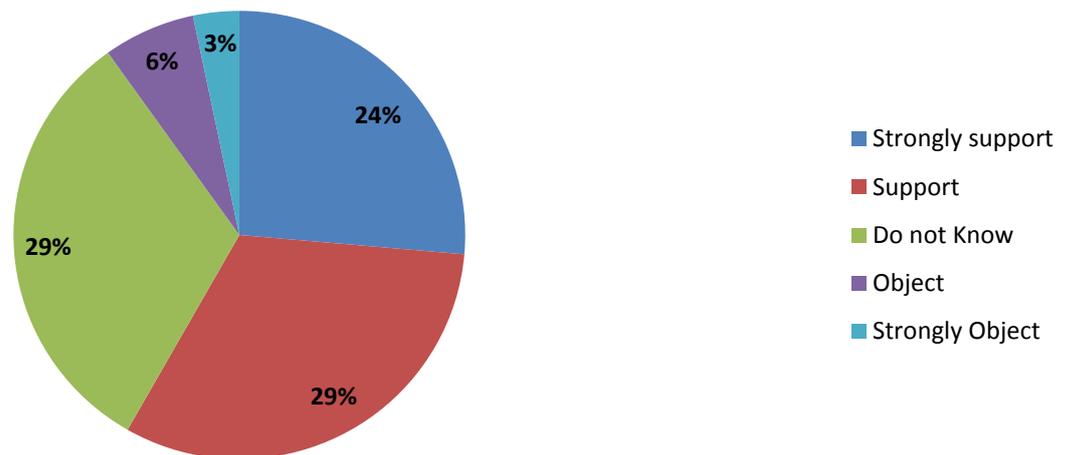
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- Better service than Walk-in Centre
- Mount Vernon minor injuries offers an excellent service, it would be great to introduce this service to Hillingdon.
- Because waiting for and travelling to the hospital
- Additional access when I need it, when it is not an emergency but I am concerned enough not to wait until the next day
- Will allow speedy services

- Will allow speedy services
- People turn up at Hillingdon Hospital anyway
- Assuming it delivers improved services like diagnostics, but local gps will also need to offer extended hours
if the walk in centre is shut otherwise the UCC will get clogged up.
- ANYTHING THAT IMPROVES A SERVICE IS WELCOME
- If the Hesa clinic is not being used enough, then it makes sense, also Hillingdon is nearer for me
- Walk in centre is not a good service long wait and no GP
- any improvement welcome
- Hospital waiting times are terrible. At the HESA centre you are seen within an hour
- limited GP access
- Not used it
- People are confused and so go to A&E causing long delays
- To take some strain away from A&E and so patients can be treated in the most appropriate centre
- Centralised 24/7 services can offer a better service
- Don't know enough about the service to give a clear opinion
- Any plans to improve health services in the area should be supported, especially with doubt over the future
of Ealing
- better health providing of patients
- May make it easier for patients to know where to attend
- Not easy to get to as a non car user based in Hayes Town
- Was unaware of the UCC
- This is not improving services to patients; we have no idea if the new UCC will deliver the services promised.
- Hillingdon hospital is already too busy
- But would like to keep the Hesa clinic open
- any expansion of a strained service is always welcomed
- Improving services at the UCC are recommended however the HESA Walk In Centre is convenient and
should not be closed!
- It needs improving, but if they are going to take on the added extra pt from Hesa surely they will need more doctors etc to manage demand

- never get good service.
- Is clear and easy to know where to go - makes sense to be near A&E and other facilities
- more efficient, hopefully quicker, easier to get to - more bus links. I know where the hospital is, but would have to research location and how to get there for Hesa
- Mainly as it a 24/7service
- We need to be informed of exactly what would be available at the UCC. For example will x-rays be available, will pain relief be available, etc? There have been many media discussions this week on the radio which lead people to believe that the UCCs will be ineffective. Clear information needs to be made available and publicity about this and other consultations is extremely poor. Why aren't the LBH Community Noticeboards used as an additional resource to convey information to residents and local residents association contacted?
- Any improvements to a health centre are welcome but not at the expense of the Hesa clinic.
- I am opposed to the closure of Hayes Walk In Centre
- Because they come at the cost of the closure of Hesa Centre - unacceptable

What are your views on the availability of the 111 service as a 24 hour single point of access to non-emergency healthcare?



Why?

Copied and pasted from survey responses

- Open to abuse – when I called for advice for child's sore eye, was told to go to A&E. went to chemist who prescribed for me
- Quite often my anxiety could be helped by speaking with a medical professional first.
- One can get medical advice without travelling to hospital
- Too early to assess the outcome as the full range of services are not offered. when I called from my mobile and answered the location questions I was put thru to Blackpool 111, THEY SAID THIS HAPPENS ALL THE TIME
- AS LONG AS IT WORKS
- depends on quality of advice - talking to a doctor is best
- What is this
- It should filter out non-urgent cases freeing up A&E for urgent cases.
- especially in case of children and elderly
- Probably as useless as NHS Direct. It is NHS Direct by another name,
- avoids confusion
- Too many contact numbers are confusing and up until now it has been confusing about who to access out of GP hours if you need medical attention so it makes it a one-stop-shop for the patient
- Presumably it has more local knowledge than NHS Direct
- sounds a good idea as not all out of hours problems require hospital or emergency care. But as I am yet to use the service I cannot tell for certain if the idea works.
- Hillingdon is already overstretched.
- does not function and causes more confusion
- Help should be available 24/7
- This system is full of clinical flaws and elderly/young will get worse care than before. Phones must be manned by medically qualified staff and not by "trained" call handlers - there is too much risk of mistakes occurring which put patients at risk. But I presume it is cheaper for the GPs?
- not confident in this as a reliable/trust-inspiring service
- Aware of the facility; but have not used it. Over the phone advice is limited

- I haven't had to use this facility so can't comment
- it will be quicker, faster.
- Clear to have one number to access all services
- its an extended and improved facility for patients.
- Signposting becomes less meaningful if potential avenues to Healthcare become closed

What are your views on the closure of the Hayes Walk in Centre?

Strongly support	Support	do not know	Object	Strongly object
3%	9%	17%	23%	45%

Why?

Copied and pasted from survey responses

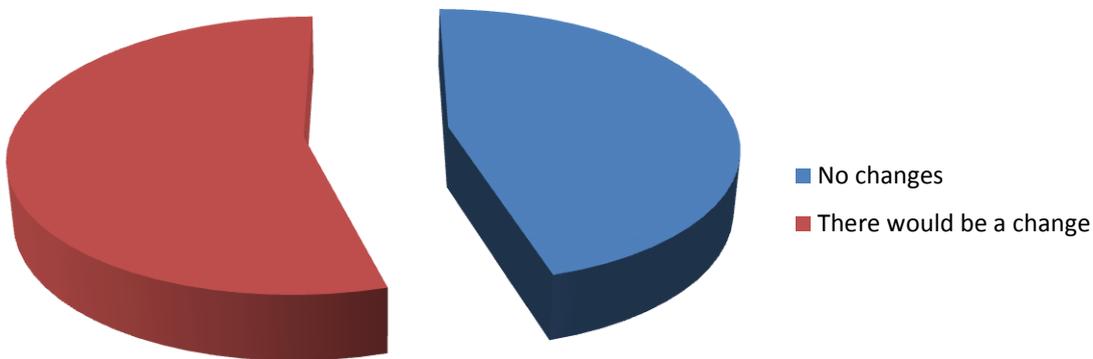
- Close by and don't wait as long hospital wait is too long
- Need somewhere local with nice staff and lines don't take ages to see someone local
- It's my clinic and walk in centre
- Close and good – don't like hospital
- It helps a lot
- Useful when own GP can't see you
- In emergency I can come and they do support
- Some things you really need
- Many people from abroad not GP registered
- Give access without appointment
- Good service, no close
- It's closer and a relief that we can come to HESA in case of emergency
- Many people do not need come all the way there to hospital
- This service is rubbish – long waiting time then told to go to A&E. One weekend there was no GP

- The Walk-in Centre is a vital resource for the local community and had better customer care & services than Hillingdon hospital
- It's too good to close, don't close!
- It's a very useful centre for emergencies and urgent people
- Because it's so close for me
- Sometimes it is really hard to get appointment with the GP
- Because of good care and service
- Keep it open
- It's too important to be closed
- Stay open
- Accessibility
- It's local and easy to travel to and parking is easy
- It is in easy reach of most bus routes and car parks
- It's useful
- I go there all of times
- Walk-in Centre to lessen load of Hillingdon hospital A&E, which will be even more necessary
- Have never used this service as it is too far for me to travel from North Hillingdon.
- Might some communities find it harder to access Hillingdon Hospital?
- Only SUPPORT IF ALTERNATE ARRANGEMENTS FOR EXTENDED GP ACCESS ARE PUT IN PLACE
- Its the only place that can get blood out of me. Forget Hillingdon Hospital - I end up badly bruised
- Poor service
- cost saving wrapped up as service improvement
- This service provides a suitable service for local residents
- Never used it
- accessible to people in Hayes
- I have never used this centre so I am not aware of the service they provide or the impact the closure will have
- Less convenient for people near Hesa Centre but centralised UCC offers a better service

- it would put my 80 year old mother to far too much stress and inconvenience travelling so far, and for a service that should be carried out at a GP. Another case of ignorant people making decisions that just put the public to more inconvenience and treats them less like patients and more and more like cattle every day.
- rude staff, panic/overworked gp, inexperienced nurse and overcrowded /dirty/smelly reception. no ecg,or x-ray facility- waste of time
- Not everyone can easily get to Hillingdon: bus stop too far from entrances, parking too restricted, not everyone can afford taxis
- it is bad centre with long waiting times and bad care from the doctors/nurses and waste of money
- No evidenced benefit although use of hospital services may have increased more if walk in was not available
- GP appointments are days ahead and Walk in Centre is local
- Unsure of the impact it would have. Unsure what impact it currently has.
- The actual improvements have not been clearly defined. The savings made are not set out. Will it cost more to treat the same number of patients in the UCC than using current system? Is this really the best cost-effective change? Without the figures which were not provided it is difficult to make a clear, evidence-based judgement that the new proposals would be cost effective and provide better healthcare.
- no experience of how good the service is now. The narrative could mean that it is being closed purely to save money because there has not been a reduction in attendance at A&E as anticipated reduction
- it is a very good service
- Older people find the Hesa a convenient Clinic to visit
- A great facility for Hayes and from my own experience a great service from staff. Hillingdon hospital is already too busy.
- Used by many people, provides respite for the hospital. Residents find it useful. if services are becoming strained then surely this would alleviate pressure...to close this one and expand the other seems futile, what will happen when that one is taking too much strain.
- It's convenient, and they are helpful! They still see walk ins so the A&E and UCC will be looking at a further increase in patients
-

- It is extremely busy at the HESA centre, so where will everyone go?? to the UCC?? Which will create backlog there
- its much locally.
- Only useful to that area - hard to find for some. Not sure when open
- If the UCC provided the same service and more then the Hesa is redundant.
- As it is very near to us and has been very helpful for us rather than taking children to a hospital
- very good services
- At this stage I do not feel that I can comment.
- its ideally located, its helpful for elderly patients and it relives the burden on Hillingdon hospital
- Although this privatised service that has failed to live up to its promise, relocating this service to Hillingdon hospital defeats the objective of devolving care into the community
- A vital local service that helps many people

How would your travel arrangements change from travelling to the Walk in centre to now travelling to the Urgent Care Centre at The Hillingdon Hospital?



Change incurred - Copied and pasted from survey responses

- Bus.
- Bus.
- Drive or take more buses. Takes longer & costs more (don't have money to waste just to wait at Hillingdon when HESA is better anyway).

- Long bus journey. Same bus journey, but slightly longer.
- Car park at Hillingdon always seems to be full and not a lot of parking outside of the hospital.
- I have to ask for lift or take the bus.
- I have to travel by public transport.
- More buses to hospital.
- I have to take bus or taxi to get there.
- Paying for parking and petrol costs.
- Take bus to Hillingdon.
- Would have to pay extra for either parking or bus fare.
- Longer drive and cannot walk to hospital but you can walk to HESA.
- Too far bus, too many money.
- Longer journey.
- More expensive car park.
- Bus.
- Bus.
- I would need to get a cab because of the restricted parking - never spaces when you need them.
- I live in the North of the borough so Hillingdon hospital would be nearer for me.
- Longer Journey.
- As stated above, it would be much more of an inconvenience. Currently my 80 year old mother is prepared to get the E6 to the walk in centre, but then to make another bus trip to the hospital would be unfamiliar and stressful to her. She has no access to a car, but still likes the independence of getting about by herself. This idea shows a total lack of thought of the elderly and as I have already said to my MP, she has said she will not travel all the way to Hillingdon Hospital and if her health suffers because of this decision I will be asking some awkward questions.
- I can easily walk, drive or catch a bus to Hesa, Would need public transport as no car and taxi too expensive. It would
- be easier for me to get to UCC as I live by the hospital car plus parking charges.
- would have to drive
- Difficulty in parking more buses go into Hayes

- I would drive
- I would drive
- I will need to catch a bus or cab which will be more costly.
- I live locally.
- Wider choice of bus routes
- As I am unsure about parking facilities in the hospital as they are usually chargeable
- I live in the Heathrow Villages and the Walk-in Centre is not easy for me to access.
- I would be able to get one bus to Hillingdon Hospital or, depending on my condition, and time of day, I would drive.
- its farther to travel and the queues would be inevitable if Hesa is closed
- I would have to use the irregular bus or pay expensive car park charges

Based on your experience, please tell us what you think about the following local services?

	Good	Average	Poor	Do not Know
Access to your GP for urgent appointments	30%	28%	33%	6%
Access to GP outside normal opening hours	9%	13%	35%	35%
A&E at The Hillingdon Hospital	22%	29%	22%	20%
UCC at The Hillingdon Hospital	12%	12%	14%	54%
Out of Hours GP Service	7%	16%	18%	43%
Walk-in centre at Hayes	40%	18%	8%	27%
Pharmacists	61%	20%	2%	10%
NHS 111	14%	8%	4%	64%

Looking at the following options, please rank them according to how important they are to you?

(1 = most important → 5 = least important)

	1	2	3	4	5
I can access a GP 24 hours a day within 4 hours	39	21%	10%	3%	2%
My GP records are available (with permission) at the Urgent Care Centre	28%	20%	14%	3%	12%
I am able to have a consultation, in a private room, at my local pharmacy	12%	15%	15%	11%	21%
I am able to get help and advice over the phone (24 hours a day)	34%	15%	13%	3%	11%
An appointment to see my GP can be arranged by the NHS 111 service or Urgent Care Centre	22%	16%	13%	9%	17%
The Urgent Care Centre can help register me with a local GP surgery of my choice	11%	4%	13%	7%	34%
I am able to get help and advice from a health professional [other than my GP] who can access my records 24 hours a day	22%	13%	14%	12%	15%

Do you know how to contact your GP service when the surgery is closed?

Yes, call my GP on their usual number and listen to the instructions	49%
I know the out of hours number	11%
I do not know how to access my GP when the surgery is closed	23%
I assume it is difficult to get hold of a GP	10%

If we go ahead with the closure of the Walk in Centre, what do you think we could do to direct people to their GPs, 111 or the Urgent Care Centre?

Copied and pasted from survey responses

- Advertise in local paper, posters and through local channels, etc.
- For me, a leaflet drop through my door - as per the 111 leaflet. But, I can read English so that works for me; I am not so sure this would work for other people who can't read English (or even their own language).
- I don't access health care services particularly often, so tend not to read the posters/leaflets at my surgery.
Direct to my door is best
- personal letter to each resident
- Local residents don't need YET another location to now get to. the HESA walk in should remain open
but longer opening hours
- No Comments
- Put adverts in the local newspapers/on local news websites instructing people, do mail-outs/leaflet drops
where possible.
- Put information up in GP surgeries/libraries/council buildings etc.
- Put an article into Hillingdon People which goes to every household
- Make sure GPs provide more services that are currently sent elsewhere such as blood tests that could easily
be carried out in a matter of minutes at a GP appointment.
- explain/local paper/news
- Costly, massive advertising campaign - money that could go in improving services 'on the ground.
- Just ask patients own GP to open longer hours!
- Publicise in local paper / libraries / surgeries
- Letter giving the options
- Advertise the closure and alert people to the changes.
- Provide better GP services and access to more appointments locally. the proposed changes do not address
these issues.
- Don't close it

- The walk in centre provides a service to many local people who may find difficult to travel outside of Hayes. Many people walk there, they find the ease of access to the service, appointment system amazing. One only hears good things about the Hesa centre....and how much its helped people due to the ease of use.
- It will not happen! There should be more smaller walk in centres to send people to and to give them convenient choices.
- There should not be fewer but bigger centres such as the UCC.
- Its about changing people's attitudes (I'm not too sure how?? which doesn't help much) but people's attitudes nowadays are terrible, they expect everything for nothing,
- no points sending to GP, it will be closes out of time.
- Use local community groups and schools to communicate changes
- Information stickers on prescriptions and flu letters
- Update information on NHS Direct
- Voice recording on GP answerphones, voice message on 111 while waiting to speak to operator.
- Posters on noticeboards - healthcare settings, schools, council/community.
- Give plenty of information through local GP. Post to homes
- There is little point in directing people to their GPs if their services are not improved. It is my opinion that this is the key to the problems we experience which puts pressure on A&E departments.
- If this ever happens then there should be better publicity and communication with residents. Use community centres, community meeting places ie residents associations, community and church halls, Council community noticeboards, social networking, e-mail distribution lists etc.
- The closure would be well publicised in the media, local paper especially.
- Don't close it please

Please provide us with your general comments about the proposals

- Excellent proposal – UCC is/has always proved to be the better service
- It makes sense to merge the service at the hospital, so if more urgent can be transferred more quickly – parking could be a major problem.
- The closure of the Walk in Centre does not affect me much because I live far away from it

- It is important that people feel we are gaining something rather than losing a service
- Why shut something that works efficiently. The last time I went to Hillingdon Hospital for a blood test I waited for 3 hours, My time is valuable.
- I agree with the closure based on the evidence provided. If it freed up appointments at the GP surgery it would be helpful.
- Agree close the walk in centre
- not impressed. Nothing is better than access to your own doctor.
- Money spent on setting up the Walk in Centre will now be wasted. This is typical of the way the NHS wastes money i.e. on changes rather than improvements.
- If it was easier to get GP appointments then fewer people would go to A and E or UCC.
- Sensible in the current NHS climate
- This is a copy of the email I have sent to my MP, I think it gives a clear view of my opinion.....
Hello Mr McDonnell, just emailing to express my disgust at the probable closure of the Hesa Clinic in Hayes Town as reported in the Uxbridge Gazette. My 80 year old mother attends the clinic occasionally for blood tests that the GP surgery on our door step insists on. She makes her own way there as she is still very mobile for her age, and is prepared to just get the E6 bus straight there. Now this new clinic would mean her having to then get a further bus to Hillingdon hospital on a much more unfamiliar route for her. Whoever has come up with this idea has shown again a total ignorance of the care of elderly people. Unsurprisingly my mother's attitude is that she will not go to all the trouble of travelling to the hospital and then having to wait longer and getting more stressed waiting at the hospital for a blood test that could quiet easily, quickly and less stressfully be carried out at the GP surgery. I support her in this and I too would tell my GP to forget it if he/she was too try to have me go out of my way to have blood tests that should be carried out at a GP surgery, and in my opinion it is pure laziness why this is not done. It is about time GP surgeries and ignorant decision makers like the person deciding to close the clinic started treating people like patients and not like cattle as is becoming the case more and more. I will be asking some very awkward questions if my mother's health would suffer because she is forced to refuse blood tests through these decisions. I was pleased to read that you oppose the decision to close the clinics hope common sense win out.
- fantastic- about time as that company is only interested in money
- Hillingdon Hospital is already too busy - and could get busier with threat to Ealing. Facilities need improving
- there in general: some wards way outdated (eg Pinewood, Churchill, etc) - what has happened to the
- proposed rebuild?
- Seems crazy to close a facility in an area where housing developments are springing up all the time: where
- are these people meant to go?

- Provide better GP services and access to more appointments locally. the proposed changes do not address
- these issues.
- I use the Hessa clinic regularly for blood tests when booking the list is always full.
- I believe this is a popular service at the Hessa and should be maintained taking the pressure of Hillingdon
- blood test service which is so crowded an hour wait is not unusual.
- The walk in centre has become a great benefit to Hayes. The number of people living in Hayes town is
- increasing with the Highpoint development nearing completion and the planned developments to the
- EMI site. I believe this is a vital resource for Hayes residents when Hillingdon hospital is already under
- pressure and this is likely to worsen.
- The walk in centre has become a great benefit to Hayes. The number of people living in Hayes town is
- increasing with the Highpoint development nearing completion and the planned developments to the EMI
- site. I believe this is a vital resource for Hayes residents when Hillingdon hospital is already under pressure
- and this is likely to worsen.
- Proposals seem short sighted to me, expand one for sure if stretched but dont close one to expand the
- other due to numbers increasing. they are going to keep increasing, stats locally show that, i can't believe
- you have not looked at this and if you have then you are not informing everyone of the facts.....
- If its cut backs then say cut backs and don't behind your hair brain proposal which shows a lack of
- vision and is so short term.
- Against the closure of the Walk In Centre.
- I think the gps are under a lot of pressure at the moment, with cuts etc, maybe limit what pt are seen for,
- why waste an app on hay fever, cough colds??? when med for these things are easily available over the counter?
- App at gps also need to be more available, currently my gp i WILL BE WAITING 10 DAYS???

- Maybe the pharmacy needs to have a facility where they can have consultation with pt for minor things?
- Maybe charge for some things, people would not want things if they have to pay
- it should remain as it is.
- I think this will be a better solution - when people are unsure what to do they gravitate towards the hospital
- anyway so why not make that a really good service
- They seem sensible. I am not clear whether you would simply drop into the UCC, or whether you have
- to call 111 before going there. I could see advantages to either approach.
- Measures to improve access to GP services would solve many of the problems. Extended surgery times
- and weekend opening would make a huge difference and surely be cheaper than the current proposals.
- This morning I phoned to make an appointment see one of the 3 GPs in my practice. I only go to my GP
- when I absolutely need to but, that does not mean it is an 'emergency'; so I would be happy
- to wait a day or two. GP Choice No1 - I have to phone again on Monday to get an appointment mid
- August. GP Choice No 2 - initially told August but when I was assertive and said its no wonder
- people go to A&E I got an appointment for next week. GP Choice No 3 - I would not want to see.
- Some of us in the south of the borough are with GPs outside Hillingdon, ie Cranford etc and this is not
- acknowledged in the Consultation.
- The Hesa clinic is new its ideal as a point of contact for minor medical matters, I used to go to Hillingdon
- hospital for blood tests and the queues were literally so long and its so time consuming, the poor nurses
- working flat out to see literally hundreds of patients a day, I think is ridiculous, and to go back to that
- is frankly for the sake of saving money just something i dont want to think about.
- I am very concerned about this proposal as it runs counter to the idea of caring services in the community

- Very much opposed.

About you – result out 92

Please tick one box below that best represents your ethnic Background

White:	
British	26
Irish	5
Other white background (please specify) <ul style="list-style-type: none">• Polish	6
Mixed:	11
White and Black Caribbean	0
White and Black African	6
White and Asian	4
Other Mixed Background (please specify)	0
Chinese	1
Other (please specify)	0
Asian or Asian British:	
Indian	17
Pakistani	5
Bangladeshi	1
Other Asian (please specify) <ul style="list-style-type: none">• Nepalese• Sri Lankan	5
Black or Black British:	
Black African	8

Black Caribbean	0
Prefer not to answer	4

Male	15
Female	28
Transgender	0
Prefer not to answer	1

Sexual Orientation	
Bisexual	1
Gay	2
Heterosexual	18
Prefer not to answer	6

Age range

15 – 25	10
26 – 35	19
36 – 45	14
46 – 55	10
56 and over	16

What is the first part of your postcode?

HA4 – 6	HA6 – 3
HA5 = 1	UB10 – 3
HA9 = 1	UB8 – 8

UB3 = 33

UB4 = 13

UB7 – 3

What is the name of your GP practice?

- Orchard – 4
- HESA – 4
- Wandsworth Medical Centre – 1
- Kincora – 2
- Wembley Park Drive – 1
- Shakespeare Avenue – 1
- Hayes Town Medical Centre – 9
- Kingsway Surgery – 2
- Wood Lane – 1
- The Warren Medical Centre – 2
- North Hyde Practice – 1
- Cedar Brook Practice – 1
- Glendale Medical Centre – 3
- Yeading court Surgery – 1
- Botwell Lane – 1
- Mountwood – 3
- Eastcoat – 1
- Cowley Church Road – 2
- Green Medical Centre – 1
- Uxbridge Medical Centre – 6
- Swakeleys – 1
- Willow Tree – 1
- Townfield – 2
- Aylesham Drive Medical Centre – 1

- Belmont Practice – 2
- Old Station Road – 2
- Cranford – 1

Annex B: Feedback from focus groups

Hayes WIC Focus Group

Hayes and Harlington Community Centre

5th July 2012

MOP – Member of Public

HD – Helen Delaitre

LINK – Graham

MOP – I would like to see statistics on the number of patients who have attended the WIC and the running costs for the centre over the last few years

LINK – Perhaps more access is needed to GPs in the evenings and at the weekend as a resolution

HD – There is a demand every Saturday morning for GP advice and sometimes in the afternoon, the CCG are aware of this and that the public want them to get the access right

MOP – Perhaps one option would be to keep the current space but rotate the GPs who are there and use a wider group of GPs

HD – The option is also there to be seen by a GP at the Primary Care Centre at Hillingdon Hospital if out of hours care is needed

MOP – One problem with the hospital is the car parking but also the problem for people who don't have cars

MOP – The population of Hayes is different from the rest of Hillingdon, there are non-English speakers and asylum seekers, the 111 service wouldn't be any good for them

HD – We need to encourage people to register with a GP, continuing to use the walk-in service doesn't offer the best care. 96% of Hillingdon residents are registered with a GP. The Urgent Care Centre encourage and can assist with registration

MOP – The priority should be young children and the care that they need.

MOP – You can wait up to 7 days to see your own GP

HD – Perhaps an alternative would be to have sit and wait appointments for example in the afternoon and scheduled appointments in the morning

MOP – Plans need to be in place in advance of the closure

MOP – The diversity of Hayes is fundamental, communities must be looked at on different levels. The fastest growing community in Hayes is Somalian

MOP – Hayes does have a community engagement group which includes Somalians

LINK – The Orchard does have a Somalian speaking GP and Practice Manager

HD – We propose that the PCT could sit in the WIC for a week and talk to the patients. We will send someone who is CRB checked. There are no organisations for the Polish community in Hayes but the GPs do have a patient leaflet that they update every year in regards to available services/OOH

MOP – Data needs to be done to find out where the UCC patients are coming from and how many of those within the catchment area of the WIC are going to the Hillingdon Hospital. So this data would need to exclude people from other areas such as Northwood and Ruislip that wouldn't go to the WIC in the first place

HD – Need for provision of more 'normal' GP services as opposed to walk in services. There are more people registered with Hillingdon GPs than there are people that live in Hillingdon Borough.

MOP – Perhaps you need to do a media statement re-emphasising that this closure applies to the walk-in centre, not the HESA centre to prevent confusion

Annex C: Feedback from individual who attended the focus group

Thank you for your continuing efforts to make the consultation wide ranging and meaningful. I would be like to be kept informed about the next steps after the consultation, please.

I wanted to make some written comments as my contribution to the consultation.

1. The proposal to close the Hesa walk in centre is based upon the growing number of visitors to both the walk in centre and Hillingdon Hospital Urgent Care Centre and A&E. The con doc explains that the walk in centre was aimed originally at taking pressure off Hillingdon Hospital A&E and the Urgent Care Centre.
2. The PCT needs to find out whether this is a result of an overall gross increase in demand for health services in the Hayes area. The area has seen a large rise in recent immigrants and total population, and it is entirely possible that there is simply more overall demand for Health Services
3. I am also concerned that the PCT seeks to attribute all of the increase in Hillingdon Hospital visitors to Hayes residents who might be expected to use instead the Hesa centre or consult GPs. I cannot believe that at least some of the rise in Hillingdon Hospital visitors is not due to people from Uxbridge, Hillingdon etc who would never in normal circumstances be the target client base for the Hesa centre.
4. The PCT is apparently concerned that a proportion of visitors to Hesa centre are those registered with the Orchard practice etc and who ought to seek GP help in the first instance. Maybe so, but to close the Hesa centre because of the mis-signposting etc of a few is disproportionate. If the Orchard etc GP practice cannot respond to demand, then surely, in these times of GP fund holding, its should be expected to contribute to the cost of its patients who choose the services of Hesa centre?
5. At the meeting I attended, some ideas were floated about local GPs possibly covering the closure of Hesa centre by some sort of rota / late opening.
6. Firstly, such a 'sticking plaster' will never replicate the ease of access and use of the Hesa centre.
7. Secondly, and more significantly, I don't think this has been thought through and consulted with GPs to ensure that this is in place in time for the closure of Hesa Centre. I can foresee that the Centre could close and all we would have would be promises of extended GP services at some time in the future.
8. GP services are very overstretched in Hayes, and people go to Hesa because they do not want to / cannot visit the hospital. The poor coverage by GPs is not mentioned in the con doc and is a root cause of people choosing other means to access health.
9. The con doc attempts to contrast improvements at Hillingdon to the closure at Hesa. For people in Hayes, a remote improvement is worse then a nearby closure. Meanwhile people in Uxbridge and Hillingdon get an absolute improvement in local health coverage through improvements at Hillingdon
10. And some of the improvements simply do not make up for the closure of Hesa. Eg more coverage at the Urgent Care Centre from 12pm-9am: great, but Hesa closes at 8pm anyway, so after 8pm healthcare seekers wouldn't go to Hesa anyway.
11. Hayes is the locus of great social and health inequalities by comparison to areas where you are seeking to improve coverage. Your proposals will worsen this and I think the EQIA should take into accounts how this discriminates against and worsens the life chances of people with protected characteristics.

Annex D: Audit on attendances at the Hayes Walk in Centre (WIC) and the Urgent Care Centre (UCC)

During 6 months to June 2012:

Total Attendances

UCC	15351
WIC	<u>7517</u>
	<u>22868</u>

Attendances at both units on same day	35
Attended UCC then WIC within 1-3 days	35
Attended UCC then WIC within 4-7 days	24
Attended WIC then UCC within 1-3 days	78
Attended WIC then UCC within 4-7 days	<u>39</u>
	<u>211</u>

of which:

UCC to WIC	65
WIC to UCC	146



Report Title:	Formal Response to the Hesa Centre Consultation July 2012
Contact:	Graham Hawkes (graham.hawkes@hillingdonlink.org.uk)
Date:	26 th July 2012
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Introduction

Hillingdon LINK would like to thank NHS Hillingdon for giving us the opportunity to present our formal response to the proposal to close (decommission) the Walk-in Service provided at Hesa Centre, Hayes.

Hillingdon LINK is an independent Local Involvement Network that is bringing together individuals, organisations and groups from every community across the borough of Hillingdon, who are passionate about influencing, improving and shaping local health and social care services.

We consider the recommendations made within this consultation response to be formal LINK requests for information under the Local Government and Public Involvement in Health Act, 2007 (Section 224) and request a response accordingly.

A summary of the current proposal put out to public consultation by NHS Hillingdon:

- (a) To close just the Walk-In Service provided at the Hesa Centre, Hayes; this operates 8am - 8pm, 7 days a week, 365 days/year.
- (b) The two GP practices operating at the Hesa centre will remain and continue to offer core GP services.
- (c) An upgraded Urgent Care Centre (UCC) at Hillingdon Hospital will offer a replacement service and the UCC be fully operational (24 hours/day, 365 days/year) prior to closure of the Walk-in Service.

Hillingdon LINK has sought the views of the local community & voluntary sector organisations (eg. by communicating with the local community & by undertaking our own consultation). Hillingdon LINK also

attended the 3 public events organised by NHS Hillingdon in Hayes to discuss these proposals and noted the issues raised by members of the local community that attended the meetings.

Summary of Community Concerns

Based on this intelligence Hillingdon LINK would like to summarise the main issues & concerns of the local community with regards to the proposals put forward for consultation:

- (1)** The majority of the local community which engaged with us on this issue were not in favour of the current NHS Hillingdon's proposal to close the Walk-in Service provided at the Hesa Centre.
- (2)** The vast majority of the issues raised by the local community revolve around the access to GP services. Many of the local residents find it difficult to get appointments to see their local GP within a reasonable timeframe. Therefore, they rely on and highly value the fact that they can see a GP at their local Walk-in service at the Hesa Centre.
- (3)** They also value the fact that the Walk-in service is open at times which are much more convenient to them and fits around their work/family commitments. For example, they are able to access GP care after work until 8pm and at the weekends throughout the year.
- (4)** There is much concern that removal of the Walk-in component of the services offered at the Hesa Centre would dramatically reduce their access to GP care, treatment, detection and prevention.
- (5)** There is particular concern that, under the current proposal to shift this service to the Urgent Care Centre at Hillingdon Hospital, the elderly, disabled and mothers with young children would find it difficult to travel to Hillingdon Hospital by public transport. There is also concern that car parking capacity at the Hospital is limited and expensive. These factors were viewed as prohibitive barriers to accessing Out-of-hours GP care at the Urgent Care Centre in the Hillingdon Hospital.
- (6)** There has also been views expressed that the Walk-in Service at the Hesa Centre is over-utilised leading to long waiting times and a reduction in the quality of service provided. Additionally, it has been questioned whether the Walk-in service actually offers a good value-for money service.
- (7)** There was also wide-spread concern expressed by the local community that the consultation and events were not sufficiently publicised and therefore not all those affected by the changes would have been given the opportunity to express their views. Hillingdon LINK was disappointed that these proposals were not prominently displayed at the Hesa centre.

Formal Recommendations

Therefore, in light of this information Hillingdon LINK recommends that:

- (1) There is a clear need for much greater access to local GP practices. This is viewed as an essential pre-requisite for any proposals that seeks to remove the Walk-in Service at the Hesa centre. The proposed service provision at the Urgent Care Centre is not viewed as been an adequate replacement/substitute for improved local GP access.

Hillingdon LINK therefore recommends that NHS Hillingdon firstly seeks to address the need for much greater local GP access (increased GP face-to-face consultations in the evening & weekend) prior to closure of the Walk-in Service at the Hesa Centre.

- (2) There is also a clear need to address local concerns that the proposed upgraded Urgent Care Centre is fully operational prior to any decision been made to close the Walk-in Service at the Hesa Centre.

Therefore, Hillingdon LINK recommends that any decision to close the Walk-in Service at the Hesa Centre is only made after the upgraded Urgent Care Centre at Hillingdon Hospital is fully operational and a review has been carried out to ensure that it would have sufficient capacity to be able to meet any increased demand that would occur from the removal of the Walk-in Service.

- (3) That NHS Hillingdon develops a fully prepared decommissioning plan if the Walk-In Service is closed. This plan should include a phased process and information/sign posting of the service change so that patients are kept fully informed of the changes. We also recommend an increased level of publicity/awareness-raising of the NHS 111 service, particularly in Hayes, as part of the phased implementation process.

- (4) A review of the consultation process is undertaken by NHS NWL/NHS Hillingdon in light of the comments received concerning the lack of sufficient local engagement/information regarding these proposed service changes. This review will help inform on the future development of more effective patient & public engagement processes in Hillingdon. Hillingdon LINK would welcome the opportunity to contribute to this lesson-learning process.



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30th July 2012

John McDonnell MP
Constituency Office
Pump Lane
Hayes
Middx UB3 3NB

Dear Mr McDonnell

Thank you for your letter dated 24th July 2012 concerning the consultation on the proposed closure of the Walk In Centre, based in the Hesa Centre in Hayes.

Your letter refers to the proposed closure of the Hesa Centre and I must reassure you that the consultation is only reviewing the Walk In Centre service based at the Hesa, all other services are not affected by the proposal.

The 12-week consultation period closed on 26th July and a full report is now being prepared, together with an Equality Impact Assessment, for review by the Hillingdon Clinical Commissioning Group on 10th August. The report, together with the CCG's recommendations will be taken to the PCT on 7th September 2012.

We shall send you a copy of the report once completed and keep you fully informed of the outcome of this consultation.

Yours sincerely

Paul Wood

Acting Borough Director

Annex G Equity Impact Assessment Executive Summary

An equity impact assessment has been made of the proposed changes to the Hayes Walk-In Centre. This has been a mainly desk based exercise with input from NHS Hillingdon staff. In addition, three focus groups have been held for members of the public.

The assessment shows that

- The provision of new facilities at Hillingdon Hospital's the Urgent Care Centre, together with the introduction of a 111 service and extended GP facilities, would significantly ameliorate any adverse effects of closing the Hayes Walk-In Centre and would offer opportunities for better care.
- This, however, is dependent on better communication with members of the public about what services are available and how they can be used appropriately.
- The Hayes area is unique within the borough and there are particular challenges around reaching some of the local population groups and ensuring good access to services for them.

It should be noted that attendance at the focus groups was disappointing. This suggests either that there is little public interest in the proposed changes or that we were unsuccessful in engaging effectively with local communities likely to be affected by the proposals. Evidence from Hillingdon LINK suggests that the latter may be the case. It is therefore strongly recommended that further work needs to be done to promote more proactive engagement as the proposals are developed.



Hillingdon Clinical Commissioning Group

Improving healthcare services in Hillingdon

Have your say

Get involved and improve health services in Hillingdon

Hayes and Harlington Community Centre

Tuesday 3rd July ~ 1pm – 3pm

Or

Thursday 5th July ~ 5:30pm – 7:30 pm

Since May 2012 NHS Hillingdon has been seeking your views on the proposals to improve the services available at the Hillingdon Hospital Urgent Care Centre (UCC) and decommission the Walk in Centre in Hayes*.

You are now invited to take part in a focus group so we can meet with you to discuss in greater detail how these proposals will affect you.

Hayes Walk in Centre / Urgent Care Centre Focus Group

Have your saybook your place today and help Hillingdon improve the way healthcare is delivered

To book your place at either of the focus groups please contact Diana Garanito on:
01895 488 188 or by email at diana.garanito@nhs.net

* The planned proposals will not affect services provided at the Orchard Practice or Hayes Town Medical Centre.

Together we will improve Hillingdon Health Services

Tuesday July 3rd – 1pm – 3pm or Thursday 5th July ~ 5:30pm – 7:30 pm

Hayes and Harlington Community Centre, Albert Road, UB3 4HR

Improving healthcare services in Hillingdon – Have your say

Please complete by Friday XX July 2012

Our proposals to improve Hillingdon's urgent care services have been developed by local GPs, senior hospital doctors and staff. The proposals include:

- Improvements to the services available at the Urgent Care Centre at Hillingdon Hospital
- Closure of the walk in service at the Hesa Centre, Hayes. Both GP practices at the Hesa Centre will remain open.

As a patient and a member of the public you are invited to comment on these proposals.

Urgent Care is needed when you have had a minor injury and you think you need help or advice from a health professional, or you are feeling unwell and do not think it will wait until the next available GP appointment.

Emergency Care is needed if you have had a major accident, heart attack or stroke, when you will be taken by ambulance to the closest A&E or specialist centre.

Why we want to change

When the 'HESA' walk in centre in Hayes opened in 2009, it was envisaged that by providing a service that is open 365 days a year from 8am – 8pm it would reduce the number of people attending the Urgent Care Centre (UCC) and Hillingdon A&E. However, a recent review has found that this is not the case and that attendances at the UCC and A&E continue to rise year on year.

Patient surveys also indicate that Hillingdon residents are not clear where they should go when they have an unexpected or urgent healthcare need. In addition to this Hillingdon's range of services mean that services are duplicated in other settings which can cause delays in patients receiving the right care at the right time.

Proposals to improve health services in Hillingdon

Making healthcare accessible to all our residents is important to NHS Hillingdon and that is why we launched the NHS 111 service. The new phone service provides residents with a free, fast and easy way to get medical advice, at any time, day or night. The 111 phone service is free from a landline or a mobile, and offers immediate advice from trained advisers.

Hillingdon residents will see further benefits through improving the services at the Hillingdon Hospital Urgent Care Centre (UCC) and closing the 'Hesa' Walk in Centre. The 2 GP practices located in the Hesa Centre will remain open. The proposal is for the expanded UCC to be fully operational before the Hesa Walk in Centre is closed so that there are no gaps in the service provided.

These proposals, currently up for public consultation, intend to:

- **Reduce delays by increasing the services provided by the Urgent Care Centre (UCC)**
The UCC at Hillingdon Hospital currently offers a limited range of services, for example, if you need an X-ray or a blood test, you would need to be seen again by staff in the A&E department. This can cause a delay in you receiving the right treatment. Under the new proposals the UCC will be open 24 / 7, and will offer a wider range of services, by a broader range of professionals from consultants and GPs to healthcare assistants
- **Increase access to local urgent health services**
The new services available at the UCC will be available 24/7, 365 days a year. The UCC will provide high quality urgent care for minor injuries and illnesses to all patients. UCCs do not replace routine care provided by your own GP.
- **Simplify health services available to Hillingdon residents**
Under the new proposals the UCC will be able to offer all patients an individual assessment of the urgency of their needs and where appropriate provide treatment, transfer to A&E/Hospital for further treatment, book the patient an appointment with their own GP or help register patients with a GP.

Have your say - Survey Questions

How to make your views known. This is your chance to have your say about health services in Hillingdon. We would like your feedback on what you think of our proposals. We have set out the specific questions we would like you to comment on. At the end of this engagement process, NHS Hillingdon will give full consideration to the comments it has received.

We are also keen to invite people to a focus group to discuss the proposals in more

detail, if you are interested in finding out more please leave your contact details at the end of the consultation.

Have your say

All comments and questionnaires must be received by XX 2012

Confidentiality

Responses from individuals will be shared with GPs who are commissioning the new improvements, but otherwise will be kept confidential. Your name will be kept confidential and will not be disclosed except as may be required by law.

Your response to the consultation

NHS Hillingdon will take responses into account along with a range of other information such as the views of clinical working groups, council scrutiny committees and technical assessments of the impact of changes on groups most affected by the proposals, on travel times and the environment.

Have your say on the improvements to health services in Hillingdon

1. Are you aware of the following services?

	Yes	No
NHS 111 Service	<input type="checkbox"/>	<input type="checkbox"/>
'Hesa' Walk in centre in Hayes	<input type="checkbox"/>	<input type="checkbox"/>
Hillingdon Hospital Urgent Care Centre	<input type="checkbox"/>	<input type="checkbox"/>

2. When unwell, which of the following services have you accessed in the last 12 months?

	Between 8am- 8pm		Outside these hours	
	Yes	No	Yes	No
Harmoni Out-of-hours GP Service				
'Hesa' Walk in centre in Hayes				
Hillingdon Hospital Urgent Care Centre				
GP				
NHS 11 service				
Other - Please specify				
None				

2.a If you answered yes to any of the above, can you please state for what reason?

[Text box here]

3. What are your views on our plans to improve services available in the Urgent Care Centre at The Hillingdon Hospital?

Strongly support – support – do not know – object - strongly object

Why? [insert text box]

4. What are your views on the availability of the 111 service as a 24 hour single point of access to non-emergency healthcare?

Strongly support – support – do not know – object - strongly object

Why? [insert text box]

5. What are your views on the closure of the Hayes Walk in Centre?

Strongly support – support – do not know – object - strongly object

Why? [insert text box]

6. How would your travel arrangements change from travelling to the Walk in centre to now travelling to the Urgent Care Centre at The Hillingdon Hospital?

- No changes I would use same means of transport
- There would be a change – please specify [text box here]

7. Based on your experience, please tell us what you think about the following local services?

Options for each answer are:

Good – Average – Poor - Do not know

- Access to your GP for urgent appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Access to your GP outside their normal opening hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- A&E at The Hillingdon Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- UCC at The Hillingdon Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Out of Hours GP Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Walk-in centre at Hayes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Pharmacists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- NHS 111 Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Looking at the following options, please rank them according to how important they are to you (1 = most important → 5 = least important)

- I can access a GP 24 hours a day within 4 hours

- My GP records are available (with permission) at the Urgent Care Centre
- I am able to have a consultation, in a private room, at my local pharmacy
- I am able to get help and advice over the phone (24 hours a day)
- An appointment to see my GP can be arranged by the NHS 111 service or Urgent Care Centre
- The Urgent Care Centre can help register me with a local GP surgery of my choice
- I am able to get help and advice from a health professional [other than my GP] who can access my records 24 hours a day

9. Do you know how to contact your GP service when the surgery is closed?

- Yes, call my GP on their usual number and listen to the instructions
- I know the out of hours number
- I do not know how to access my GP when the surgery is closed
- I assume it is difficult to get hold of a GP
- Other (please state)

10. If we go ahead with the closure of the Walk in Centre, what do you think we could do to direct people to their GPs, 111 or the Urgent Care Centre?

[text box here]

11. Please provide us with your general comments about the proposals

[Text box here]

About you

Please tell us if you are – Tick all that apply

- Parent/carer with school aged children
- Parent/carer with pre-school aged children
- Carer of an elderly relative
- Hillingdon resident
- Healthcare professional
- Other (please specify)

Please tick one box below that best represents your ethnic Background

White:

British

Irish

Other white background (please specify)

Mixed:

White and Black Caribbean

White and Black African

White and Asian

Other Mixed Background (please specify)

Chinese

Other (please specify)

Asian or Asian British:

Indian

Pakistani

Bangladeshi

Other Asian (please specify)

Black or Black British:

Black African

Black Caribbean

Other Black (please specify)

Prefer not to answer

Male

Female

Transgender

Prefer not to answer

Sexual Orientation

Bisexual

Gay

Heterosexual

Prefer not to say

What is your age?

What is the first part of your postcode (e.g. TW4)?

What is the name of your GP practice?

If you are interested in attending the focus group please provide us with your contact details

Name –

Address –

Email

What is your preferred way of us contacting you? -----



Hillingdon Clinical Commissioning Group

Improving Health Services in Hillingdon

Frequently Asked Questions

Why we are proposing these changes?

When the 'HESA' walk in centre in Hayes opened in 2009, it was envisaged that by providing a service that is open 365 days a year from 8am – 8pm it would reduce the number of people attending the Urgent Care Centre (UCC) and Hillingdon A&E. However, a recent review has found that this is not the case and that attendances at the UCC and A&E continue to rise year on year.

Patient surveys also indicate that Hillingdon residents are not clear where they should go when they have an unexpected or urgent healthcare need. In addition to this Hillingdon's range of services mean that services are duplicated which can cause delays in patients receiving the right care at the right time.

How long does the consultation last?

We have been running a 12 week consultation that ends on 26th July 2012.

Won't this just create pressure on other services?

We are planning to increase services at the Hillingdon Hospital site which will be open 24/7.

How these changes may affect you?

If the Walk in Centre at the Hesa were to close:

If you are a patient registered with Hayes Town Medical Centre (the practice that runs the walk in centre) you will remain registered with the practice and will be able to see a GP Monday to Friday between 8am and 6.30pm. If you are not registered with Hayes Town Medical Centre but use the Walk In Centre, you will not be seen by a GP at the practice. Instead you will be redirected either to your own GP or to the Urgent Care Centre at Hillingdon Hospital. Patients who are registered with the Orchard Practice, who also occupy the Hesa Centre in Hayes are not affected by this proposal. Services will continue without change.

Will my practice be open longer?

Depending on the feedback we receive during the consultation exercise, we will consider whether it is necessary to ask local practices to offer longer opening hours.

What are the alternatives?

Hillingdon is one of the first areas in London to introduce the NHS 111 service. This was launched in March this year and means that if you need urgent care and you are not sure where to go, if you call 111 (which is a free call from land lines and mobiles) that you will be assessed and directed to the most appropriate service to meet your health care needs. This could be your GP, a pharmacy, the Urgent Care Centre or A&E. If you are assessed as needing an ambulance, this will also be arranged for you. So the only number you need to remember is 111.

If you are accustomed to using the Walk in Centre when you need medical help, we would also like to make sure that you are registered with a practice of your choice. Being registered with a practice gives patients continuity of care, particularly when patients have long term conditions such as diabetes. If you are already registered with a local GP, then alternatives available to you would be to see your GP, use their out of hours service or attend the Urgent Care Centre at Hillingdon Hospital.

When will these changes start?

No date has been set as a decision on the proposed changes has not been made yet. However, to minimise the impact on users of the Walk In Centre, a phased approach will be discussed with Hayes Town Medical Centre.

What will happen if patients still turn up?

If the decision is made to close the Walk In Centre we shall give plenty of notice and therefore regular users of the Walk In Centre will be aware of any changes in service delivery. If patients turn up when the service has been closed, then they will be redirected to the Urgent Care Centre.

What services will be affected at The Hesa Centre?

The only service that will be affected at the Hesa Centre is the Walk In Service which is currently open 8am to 8pm 365 days of the year. All the following services will continue unchanged:

- Services to registered patients at the Hayes Town Medical Centre (8am to 6.30pm Monday to Friday)
- Services to registered patients of the Orchard Practice (8am to 6.00pm Monday to Friday)
- Tissue Viability (wound care clinic)
- Podiatry
- Diabetes Nurses
- Diabetic Retinopathy
- Family Planning and Sexual Health
- Speech and Language Therapy
- Phlebotomy

Plans are also in place to move the 2 GP practices to the ground floor with more accommodation providing better treatment and consultation facilities.

What services will be available at the Urgent Care Centre, Hillingdon Hospital?

The Urgent Care Centre at Hillingdon Hospital is being improved so that it will open 24 hours a day, 365 days a year – they currently open 9am to midnight, 7 days a week. As well as GPs, the new UCC will be staffed by nurses with expertise in urgent care, A&E consultants and health care assistants so that patients are seen by staff with skills appropriate to meet the patients' needs. The UCC will also be able to take bloods and arrange X-rays and diagnostic tests which currently have to be done in A&E. This means that patients should receive a faster, more efficient service.

What about transport to Hillingdon Hospital?

The Hesa Centre enjoys good transport links, and so does Hillingdon Hospital. The following buses run a regular service past the hospital.

- U1: (Ruislip - Uxbridge Station - *Hillingdon Hospital*)
- U2: (Uxbridge Station - Hillingdon Station - *Hillingdon Hospital*)
- U3: (Uxbridge Station - *Hillingdon Hospital* - West Drayton - Heathrow)
- U4: (Uxbridge Station - *Hillingdon Hospital* - Hayes)
- U5: (Uxbridge Station - Cowley Road - *Hillingdon Hospital* - West Drayton - Hayes)
- U7: (Uxbridge Station - *Hillingdon Hospital* - Hayes End)

The location of the Urgent Care Centre at Hillingdon Hospital means that more local people from across the borough will be able to access the service.

What about parking?

Free parking at the Hesa Centre and also Hillingdon Hospital is very limited. Hillingdon Hospital has an extensive car park, although charges do apply.

What happens next?

We want to hear your views on the proposed changes and how they affect you. Once the consultation phase is over, we shall be completing an Equality Impact Assessment and a report detailing all the responses to the consultation process. This report will then be presented to the Hillingdon Clinical Commissioning Group and the Outer North West London Board later in the year. If you would like to receive any updates on this process, please email Diana Garanito with your contact details.

Diana.garanito@nhs.net