Walk-in centres in Barking and Dagenham

A consultation on proposals to close the walk-in service at Broad Street, Dagenham, and improve urgent primary care services in the borough

All comments must be received by 5pm on 21 May 2013
For most people, using the NHS means a visit to their family doctor (GP). GPs have always had a say in developing local health services, but now, as part of the NHS reforms, they are taking on much greater responsibility to commission (which means to plan, buy and monitor) NHS services. To do this, they have joined together as a new group called Barking and Dagenham Clinical Commissioning Group (CCG). From April 2013, the CCG will commission most local health services, from cancer care to mental health, hospital operations to prescriptions. All GP practices in the borough are part of this CCG.

Barking and Dagenham CCG recognises the very real challenges it faces in terms of necessary improvements to the health of the local population. It is no secret that we have high rates of poor health locally – not unusually for a London borough with corresponding rates of deprivation. Despite this, we are determined to tackle these challenges head on and to work together to improve the health of our residents and patients.

The CCG has been reviewing access to urgent care services in Barking and Dagenham in response to patient feedback on the current system, which is difficult to navigate and faces increasing demand. We recognise that urgent care services in the borough are not meeting the needs of local people.

In recent months across England, NHS walk-in services – where people simply walk in off the street and ask for help - have been increasingly under the spotlight. Clinicians have become concerned that rather than easing pressure on other services, such as A&E, they are simply creating extra demand and bypassing existing services such as GPs, pharmacists, out of hours services and sensible self-care. As a result, many walk-in services have closed.

### Priorities

The Clinical Commissioning Group has five priorities:

1. Commission safe, sustainable, high quality services for the local population
2. Integrate care
3. Redesign urgent and emergency care services: Ensuring patients and the public having access to convenient, high quality, timely and cost effective urgent and emergency care services and know how to access these services effectively
4. Staying healthy
5. Increasing productivity

Barking and Dagenham Primary Care Trust, who the CCG will replace, has a contract with Care UK, the provider of the Walk in Centre at Broad Street, which is coming to an end. To help decide if the CCG should invest in this service in the future, a review of the walk-in services has been carried out. This included an independent audit to see who was using these services and why. We have two walk-in
centres at the moment – one at Broad Street in Dagenham and the other in Upney Lane, Barking, at Barking Community Hospital.

The audit showed that a third of people attending them needed no treatment at all. We also found that many people were using the service to simply get a second opinion, to save them from waiting to see their own GP, because they didn’t have a GP or because they didn’t know where else to go. This concerns us greatly because we know that a GP doesn’t just treat your obvious problem – he or she has your records, knows what medicines or treatment you have had previously and can treat the whole person. Increasingly we help people manage long term conditions effectively; something a walk-in service just can’t do.

The review did not give us the evidence we think we need to justify investing our limited resources in the service at Broad Street, based on the needs of the whole of the borough. As a result, we have developed proposals to close the walk-in service at Broad Street, Dagenham.

The challenge for us, then, is to make it easier for people in Barking and Dagenham to get high quality urgent care when they do need it, and to make sure they know where they can get it. We believe that those people who are using Broad Street walk-in service at the moment can be cared for by other, existing services.

We are now asking the public and stakeholders for their views. The project is led by Dr Richard Burack, Clinical Lead for Urgent Care, supported by Dr Jagen John. Both are local GPs with additional clinical leadership responsibilities in the CCG. Dr Burack works at the Lawns Medical Centre and Dr John at King Edwards Medical Centre.

We would like to know what you think. Please take a look at the information in this document and send us your thoughts. We look forward to hearing your views.

Dr Waseem Mohi, Clinical Director and Chair
Dr Richard Burack, Clinical Lead, Urgent Care
Dr Gurkirit Kalkat, Clinical Lead, Primary Care
Dr Jagan John, Deputy Clinical Lead, Urgent Care
Dr Arun Sharma, Clinical Lead, Locality Model

“Urgent care is the range of responses that health and social care services provide to people who require (or perceive the need for) urgent advice, care, treatment or diagnosis.”

Direction of Travel for Urgent Care, Department of Health
## Our current walk-in services

<table>
<thead>
<tr>
<th></th>
<th>Broad Street Medical Practice and Walk-in Centre</th>
<th>Barking Community Hospital Walk-in Centre</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Opening times</strong></td>
<td>Mon-Fri 7am-10pm  Sat-Sun 10am-6pm</td>
<td>Mon-Fri 7am-10pm  Sat-Sun 9am-10pm</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td>Morland Road, Dagenham, RM10 9HU</td>
<td>Barking Community Hospital  Upney Lane, Barking IG11 9 LX</td>
</tr>
<tr>
<td><strong>Activity</strong></td>
<td>Approximately 80 patients a day or 560 patients a week</td>
<td>Approximately 80 patients a day or 560 patients a week</td>
</tr>
<tr>
<td><strong>Service type</strong></td>
<td>Minor ailments and minor injuries</td>
<td>Minor ailments and minor injuries</td>
</tr>
<tr>
<td></td>
<td>Nurse led with health care assistants and a doctor available at co-located health centre</td>
<td>Nurse led with emergency care practitioners and a doctor available</td>
</tr>
<tr>
<td><strong>Other related services</strong></td>
<td>There is a GP practice on site which also provides complex care to residents of Park View Care Home</td>
<td>Located at Barking Community Hospital</td>
</tr>
<tr>
<td><strong>Diagnostics</strong></td>
<td>No diagnostic equipment</td>
<td>X-ray equipment</td>
</tr>
<tr>
<td><strong>Exclusions</strong></td>
<td>Children under 2 years</td>
<td>None</td>
</tr>
</tbody>
</table>

A survey of the use of walk-in centres showed the majority of people attended for minor injuries and ailments, with the most common complaints for both walk-in centres being:

1. **Injuries (including cuts, fractures and dressings)** 31%
2. **Respiratory conditions** 22%
3. **Skin related ailments (including infections)** 13%
4. **Reproductive and urinary** 10%
5. **Ears and eye related ailments** 7%

Whilst some of the fracture care and more complex injuries might require further training in core GP practice, almost all other cases seen at the centre could be seen in a local GP surgery. In fact many conditions would be better seen by a GP as there would be a high proportion of patients needing follow ups and reviews.
Walk-in services do not encourage better health. The easy availability of walk-in appointments is discouraging residents from visiting or registering with a GP. The walk-in staff often see patients who wouldn’t need urgent services if their condition was properly managed by a GP. One third of people attending them needed no treatment at all.

A&Es, urgent care centres and walk-in centres do not provide the best care for many conditions. A busy A&E or walk-in centre is not necessarily the best place for many people (for instance people with a mental health problem) to receive care. GPs can and do provide this service. A GP can also ensure patients receive the full range of preventative and other health services, such as immunisations and health checks.

GPs and nurses tell us there are too many people visiting walk-in centres who are not managing (or being helped to manage) their long term condition, so they end up seeking urgent help later on.

The system is complicated. Patients often do not understand where they need to go and can get passed from one service to another.

The urgent care system (A&Es, GP urgent appointments, GP out of hours service, walk in centres and urgent care centres) is expensive to manage and run. If a patient goes to two or three places to seek advice or care – the NHS can pay from two to five times the cost compared with simply booking an urgent appointment with a GP.

We need a simpler, better system so that local people can get the urgent care they need.

On page 9 we talk about our plans for other urgent care services in the borough.
The CCG proposes to close the walk-in service at Broad Street. The centre would continue to house a GP practice. This would:

- Encourage people to use their GP as their first point of contact. This is essential if we are to help patients keep healthier and better manage long-term conditions
- Help us to achieve the savings we know we will need to protect other health services in the borough
- Improve the likelihood of residents registering with, and accessing, health services (including urgent care) through their GP practice
- Make the system more efficient by removing duplication
- Mean all patients who require an urgent ‘walk-in’ appointment and who cannot be seen by their GP would still be able to attend the walk-in services at Barking Community Hospital, Loxford or the urgent care centres attached to Queen’s, King George or Newham hospitals.

If the walk-in service at Broad St was closed:

- More people would be encouraged to register with, or visit, their GP.
- The NHS would make savings of around £530,000 a year which would safeguard other valuable health services and contribute to meeting the whole of the borough’s health needs. The Broad Street site would remain as a health facility with a GP based there.
So where would people go if Broad Street walk-in service closed?

Their own GP
Nurses and staff at the walk-in centres told us they regularly treat patients for conditions that would be better managed by a GP. In fact 12% of patients attending the walk-in centres would have been better off going to their GP – and would have been treated first time.

The audit showed another 12% of people visiting the centres were asking for a second opinion. That’s duplication that we simply can’t afford.

Most of the people using the walk-in centre are registered with a local GP. We need to make sure they can get the service they need from their own GP.

One way that the CCG is looking to improve things is by getting GPs to work more closely together in groups of GP practices to provide more, and better services closer to people’s homes. This way GPs can share expertise and appointment slots to help patients.

Ask your GP for an urgent appointment
Many people say they are unable to book an urgent appointment when they need one with a GP – especially at weekends and in the evenings. And yet over 70% of people visited the walk-in centre whilst their own GP surgery was open. In addition, the Out of Hours GP service is not as widely known as it used to be.

Register with a GP
Barking and Dagenham has a highly mobile population – people often come to the borough to live and to work for short spells and then move on. This means that many of them don’t bother to register with a GP. When they get ill or injured, they are likely to go straight to A&E or to a walk-in service despite the fact that in many cases, their condition could easily be dealt with by a GP. We estimate that around 10% of patients using walk-in services are not registered.

Case study: The benefits – Abbas

Now
Abbas is generally feeling unwell. He has a sore throat, a headache and is coughing a lot. He visits the walk-in centre (which is some distance from his home). Abbas is told he has a cold and is advised to go home, drink plenty of fluids, rest, and take painkillers if required.

The future
Abbas rings his GP who can give the same advice as he would get with a visit to the walk-in centre but Abbas doesn’t have to leave the house or pay for travel. He doesn’t use up an urgent appointment at the GP surgery and he doesn’t infect anyone whilst he is there.
Case study: The benefits – Kay

Kay has a problem breathing – a common condition for people attending the walk-in centres – but the principles apply to many other illnesses.

Now
Kay is having difficulty in breathing at home. She goes to the walk-in centre (which is some distance from her home) in some discomfort, where she has to explain her previous medical history for the nurse to make a considered diagnosis. Kay can’t remember all the medication she is on so the nurse cannot prescribe more or different drugs and sends Kay home. The condition worsens in the night and Kay goes to A&E. The doctors there stabilise her and admit her. The next day Kay is discharged and is advised to get an urgent appointment with her GP. Kay has difficulty in getting an appointment, but does get one at which the GP changes her prescription.

The future
Kay rings up the GP who brings up her medical history. With this information the GP does a diagnosis on the phone and suggests a change in drugs. Kay can walk the short distance to the GP surgery and picks up the prescription.

- One short journey
- No trip to A&E
- Better care so that the patient is in less pain for a shorter time
- A better patient experience
- Less cost

Call 111
The new NHS 111 service is now available in Barking and Dagenham 24 hours a day, 7 days a week. Local residents can call 111 when they need urgent medical help or advice, but when it isn’t a 999 emergency. Callers will have their symptoms assessed, be given advice and directed straightaway to the local service that can help them best.

Talk to your pharmacist
Local managers have told us that our walk-in centres often encourage people to ask for advice regarding minor issues that are better dealt with at home or at a pharmacist.

Self care
Many people who attend our walk-in centres don’t need to be treated by a nurse or doctor (they could have treated themselves or gone to a pharmacy).
Our plans for urgent primary care in Barking and Dagenham

Everyone should be able to know how, and be able, to register with a GP so they can access high-quality primary care. Making sure this happens is a priority for the CCG.

We think that their GP surgery should be the first port of call for people needing urgent care. People should be able to:

- ‘Phone before they go’ – to get good information from their GP surgery before having to travel to see one, make an appointment or go to another urgent care service
- Be seen quickly at a local GP surgery if they have an urgent care need which needs a personal visit
- Get all their primary care at a local GP surgery during week days as a minimum – ideally at their own GP’s practice but if not, another practice nearby, in their area.
- In order to improve access to high-quality primary care during the day, GP practices in the borough have organised themselves into six groups (localities). This means they can share facilities and equipment, specialist staff, knowledge, and better manage demand for urgent care at peak times – for instance you may be offered advice or appointments at a neighbouring GP practice. Older people are already benefiting from this type of service.

In the evenings and at weekends we think people should be able to access urgent care just as easily as during the day. We think people should be able to:

- Phone 111 for advice or to make an urgent appointment with their GP
- Get an urgent appointment at their GP
- Where appropriate, be referred to the out of hours service
- Visit an urgent care centre during the night (for instance at a hospital or a walk-in centre) when GP practices are closed.

Developing the service at Barking Community Hospital
We want to build on the successes of the walk-in centre at Barking Community Hospital by using the facilities available there to support our plans. Over the next year we plan to develop the services we offer at the hospital; such as the new X-ray equipment used by the minor injuries unit, to ensure we can accommodate any extra patients from Broad Street.
Frequently Asked Questions:

Q: Are you proposing to close the Broad St GP surgery?
A: No, current GP services at Broad St would continue under our proposals. Patients registered there would continue to see their GP.

Q: What would happen if everyone who used to go to Broad St goes to Barking Community Hospital?
A: We think that the vast majority of people who live around Broad Street would phone or visit their GP, visit a pharmacist or decide to care for themselves. But if some people decided to go to the walk-in centre at Upney Lane, Barking Community Hospital, there is room for them.

Q: Why are you proposing to close the walk-in services at Broad St and not at Barking Community Hospital?
A: We have looked at:

- The buildings and facilities. Whilst Broad St is in satisfactory condition, the building at Barking Community Hospital is new and purpose built and is being developed as the borough’s community hospital. There are other health facilities and services at the hospital which could mean more convenient access for some patients to other services. For example, direct access to X-ray.

- Barking Community Hospital could absorb any increase in attendances from people who used to go to Broad St walk-in centre – whilst Broad St would struggle with more patients if we closed Barking Community Hospital walk-in centre.

- We need more good quality facilities for GP practices in Dagenham. If we were to close the walk-in centre in Broad St, we could use the space that would become available for an extra GP practice.

- Access to Barking Community Hospital is better than Broad Street. There is ample parking at Barking and the hospital is a two minute walk from the nearest train station.

Q: Why aren’t you proposing to close both walk-in centres?
A: We have looked carefully at options to close both. This would save more money and would encourage more people to register with a GP, where they would get more consistent care to look after their long term health. However, on balance, we think that some patients still benefit from having access to an urgent care facility at Barking Community Hospital at the moment and that the services at the hospital could be modified to fit with the plans for improving primary care.

Q: You say that local residents will get better healthcare this way, but what happens to people who don’t, or can’t, register with a GP?
A: It is very important that we get as many people to register with a GP as possible. However if someone can’t or hasn’t registered, the walk-in centre at Barking Community Hospital, or Loxford or the urgent care facilities at Queen’s Hospital, King George Hospital, Newham and will be able to treat anyone – and the new 111 service will respond to anyone in need.

Q: Is this not just about cutting back on services and saving money?
A: We do need to make efficiency savings and we’ve been very open about that. By reducing duplication where possible, we can manage the expected increase in demand for other health services locally. There would be some savings from not paying for a service at Broad Street (estimated at £538,000 a full year).
Q: Will people only be able to get urgent care at Loxford, Queen’s, Newham or King George Hospitals in future?
A: No. If people are registered with a GP they can request an urgent appointment with their GP. But our research shows that a great many patients using walk-in centres just need advice. So people can ring their GP surgery including during out of hours or the new 111 telephone number, or visit a pharmacy. In our proposals, there would also still be urgent care services at Barking Community Hospital.

Q: If people are already finding it hard to get to see their GP, won’t closing the walk-in centre make this even harder as they will be even busier?
A: We know that we need to improve access to GPs as people can’t always get through to their practice and we are looking at ways of doing this. But we are not talking about more people needing to see their GP than now, rather about helping the same number of people manage their urgent health needs better.

Q: Won’t more people just go to A&E – which we know is already too busy?
A: By making sure that we improve access to GPs locally, through putting the 111 number in place and by continuing to provide walk-in services at Barking Community Hospital we think that there should not be any more people needing to go to A&E than do at present. And for those that do go there the Urgent Care Centres at the front of our local A&E services have been set up to deal with people who need primary care only.
What do you think?

We want to know what you think. Whether you are a service user, carer, staff member, representative group, community organisation or local resident, you can write to us or fill in the questionnaire at the back of this document and post it free of charge to:

Barking and Dagenham CCG, FREEPOST I Y 426, ILFORD IG1 2BR

Alternatively, you can email your comments to: WIC.consultation@onel.nhs.uk

For further information about the consultation process or to read the background documents, including the business case and the walk-in audit, please take a look at our website at: www.barkingdagenhamccg.nhs.uk

We also plan to have two public drop-in events where you can come along, ask questions of the experts, share your opinions and find out more. These will take place at the following places:

**19 March, 2-7pm**
Barking Learning Centre
2 Town Square
Barking IG11 7NB

**23 April, 3-7pm**
Dagenham Library
1 Church Elm Lane
Dagenham RM10 9QS
Questionnaire

We welcome any feedback or ideas you have, but we are particularly interested in your answers to the following questions. You do NOT have to answer all questions and please use extra paper if necessary.

**Question 1.** Are you providing this response:
☐ In a personal capacity
☐ As a representative of a group

**The case for change (see page 5)**

**Question 2.** Do you think we need to change the current way of providing urgent primary care services?
☐ Yes
☐ No
☐ Don’t know

We are keen to know why you made this choice – please write below...

**Question 3.** What do you think about our plans for urgent primary care? For instance more appointments at GP surgeries – especially in the evenings and weekends; more telephone advice; and more services being made available in local GP surgeries.

**Question 4.** Please tick the three services shown below that you think would most improve care in the borough. (There is no need to rank services if you don’t think they would make a positive difference).

☐ Phone advice from local GPs who are able to access local information
☐ GPs to open earlier for bookable appointments for registered patients
☐ GPs to open later for bookable appointments for registered patients
☐ GPs to open at weekends for bookable appointments for registered patients
☐ A wider range of services in community pharmacies
☐ Improve GP premises
☐ Increase the number of urgent appointments at GP surgeries
☐ Access to urgent appointments with a neighbouring GP

**Question 5.** Are there new services that should be developed at Barking Community Hospital?
Our proposal (see page 6)

Question 6. We are proposing to close the walk-in service at Broad Street. Do you think we should discontinue the walk-in service at:

- Broad Street
  - Yes
  - No
  - Don’t know
- Barking Community Hospital
  - Yes
  - No
  - Don’t know
- Both Broad St and Barking Community Hospital
  - Yes
  - No
  - Don’t know

Please explain why you made these choices.

Question 7. Are there other any suggestions you have to improve urgent care in the borough?

Please tell us a little about yourself (this section is NOT compulsory). If you wish to remain anonymous, your views will still be taken into account, however we would be grateful if you would fill in other data so that we can assess how representative respondents are and whether there are differences to the answers given by different groups of people.

a) Name

The borough you live in...

b) Would you like to be kept up to date with information about the NHS (including this programme)?

- Yes
- No

If so, please give us your email or postal address.

c) Are you... (Circle all that apply)

- Male
- Female
- Prefer not to say

Responding as a

- Service user
- Carer
- Local resident
- Other
- Prefer not to say

Employed by the NHS?

- Yes
- No
- Prefer not to say

Aged....

- Under 16
- 16-25
- 26-40
- 41-65
- 65+
- Prefer not to say
d) Ethnic background (please tick all boxes that refer to you)

<table>
<thead>
<tr>
<th>White</th>
<th>Asian</th>
<th>Mixed</th>
</tr>
</thead>
<tbody>
<tr>
<td>British</td>
<td>Asian British</td>
<td>White and Black Caribbean</td>
</tr>
<tr>
<td>Irish</td>
<td>Indian</td>
<td>White and Black African</td>
</tr>
<tr>
<td>Any other White background</td>
<td>Bangladeshi</td>
<td>White and Asian</td>
</tr>
<tr>
<td>Black</td>
<td>Pakistani</td>
<td></td>
</tr>
<tr>
<td>Black British</td>
<td>Chinese</td>
<td>Any other ethnic group</td>
</tr>
<tr>
<td>Black Caribbean</td>
<td>Any other Asian background</td>
<td>Prefer not to say</td>
</tr>
<tr>
<td>Black African</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any other Black background</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

e) Which belief or religion, if any, do you most identify with?

<table>
<thead>
<tr>
<th>Agnostic</th>
<th>Atheism</th>
<th>Buddhism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Islam</td>
<td>Judaism</td>
<td>Sikhism</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Christianity</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hinduism</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prefer not to say</td>
</tr>
</tbody>
</table>

f) Do you consider yourself to have a disability?

- Yes
- No
- Prefer not to say

Please send your questionnaire, free of charge to: FREEPOST I Y 426, ILFORD IG1 2BR
Or email your comments to WIC.consultation@onel.nhs.uk or fill in the questionnaire on our website at: www.barkinganddagenhamccg.nhs.uk
All comments must be received by 5pm on 21 May 2013

Confidentiality

If you are responding on behalf of an organisation or you are representative of service users / the public e.g. an MP or councillor your response may be made available for public scrutiny.

If you are responding in a personal capacity:

- and you would like to be kept informed of our work then please insert your name and address on the questionnaire.
- your response (but not your personal details) will be shared with decision-makers to enable them to consider your views fully.
- whether or not you provide your name and contact details, your response will not be published but unidentifiable quotes may be used to illustrate comments made.
Tell us what you think

There are a number of ways in which you can give your views:

- Complete the questionnaire on our website: www.barkinganddagenhamccg.nhs.uk
- Complete the questionnaire in this document, take it out and send to: Barking and Dagenham CCG, FREEPOST 1 Y 426, ILFORD IG1 2BR
- Write a letter to Barking and Dagenham CCG, FREEPOST 1 Y 426, ILFORD IG1 2BR
- Email: WIC.consultation@onel.nhs.uk

All comments must be received by 5pm on 21 May 2013