**Title:** Urgent Care Surge Pilot Scheme

**Report of the Barking and Dagenham Clinical Commissioning Group**

<table>
<thead>
<tr>
<th>Open Report</th>
<th>For Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wards Affected: ALL</td>
<td>Key Decision: NO</td>
</tr>
<tr>
<td><strong>Report Author:</strong></td>
<td><strong>Contact Details:</strong></td>
</tr>
<tr>
<td>Simi Bhandal, Practice Improvement Lead, Barking and Dagenham CCG</td>
<td>Tel: 020 3644 2379</td>
</tr>
<tr>
<td></td>
<td>E-mail: <a href="mailto:gemma.hughes@barkingdagenhamccg.nhs.uk">gemma.hughes@barkingdagenhamccg.nhs.uk</a></td>
</tr>
</tbody>
</table>

**Accountable Director:**
Sharon Morrow, Chief Operating Officer, Barking and Dagenham CCG

**Summary:**
This report provides an update to the HASSC on the activity to date for the Primary Care Urgent Care Surge pilot scheme which started on 1 October. Monthly activity reports show an overall increase in capacity, however the impact of this on patient experience and activity in other urgent care settings will be evaluated at the end of the pilot. The evaluation report is planned for May 2014.

**Recommendation(s)**

The HASSC is recommended to:

i. Note the update on the pilot scheme

ii. Receive a further report of the evaluation following the end of the pilot in Spring 2014.

**Reason(s)**
This report provides an update to the HASSC on the Urgent Care Surge Scheme that is being piloted in Barking and Dagenham. A further report will be available once the scheme has been evaluated.
1. Introduction and Background

1.1 In response to feedback from stakeholders, Barking and Dagenham CCG has developed a local pilot scheme to deliver additional urgent appointments in primary care and improve access to urgent appointments with GPs. This pilot scheme makes up part of the CCG’s strategy to improving urgent care across the borough.

1.2 NHS England delegated the commissioning of the scheme to the CCG, practices across Barking and Dagenham were invited to take part. The application process for the pilot concluded with 31 successful applicants. Those practices were subsequently commissioned to provide in total 19,278 extra surge appointments over and above their individual “baseline” capacity levels, equating to approximately 3200 additional appointments each month. Baseline levels were derived from activity data submitted by practices for April, May and June 2013 as part of the application process.

The 9 practices that did not apply to take part in the scheme/were unsuccessful in making their application have since been invited to apply in the second wave of applications. It is expected that successful applicants will join the scheme in mid January.

2. Pilot Scheme Criteria

2.1 In order to participate in the pilot, practices had to demonstrate to the CCG that capacity is above that expected to be delivered through their core contract.

2.2 Surge appointments are offered on the day for urgent cases. As part of the application process practices were asked to describe what procedures are in place to identify urgent and emergency cases, enable rapid assessment and ensure patient is seen quickly in line with best practice.

2.3 Consultations should be offered at a time that matches demand for urgent care services. Therefore the scheme does not specify whether surge appointments should be provided in core hours, out of hours or weekends, and timings of these additional appointments may be different at each practice.

2.4 Practices must submit an activity report each month which allows the CCG to identify:
   a) How many practices are meeting their “baseline” capacity levels
   b) How many additional urgent care appointments have been offered
   c) How many additional urgent care appointments have been used

3. Communication

3.1 Practices are using a range of media, such as Jayex boards and prescription scripts, to inform patients of the increased access to urgent appointments. In addition, the CCG has also provided communication materials for practices to use, including posters and graphics for TV content.

3.2 The scheme has been discussed with Patient Participation Groups (PPGs) in practices in order to gain feedback for the practice and CCG. The CCG is
supporting practices to develop their PPGs where they have not been set up or are not very active.

4. **Activity**

4.1 **Current Activity**

2,303 and 2,887 additional appointments were provided in October and November respectively and utilisation rates (number of appointments booked compared to offered) for October and November were 83% and 82%. A breakdown of appointments offered by locality is provided in Appendix A.

At this point, it is not possible to evaluation the impact this additional capacity has had on other urgent care settings as data from those providers is received with a time delay of approximately 2 months.

4.2 **Planned Activity**

Following a decision by the Executive Committee to re-open applications, the 9 practices not currently participating in the scheme have been invited to apply in the second wave.

It is estimated that of the 9 practices that have been invited to apply, some are likely to remain unable/unwilling to participate in the scheme. It was agreed that these practices would be asked to partner up with another practice in the locality so that their patients could also benefit from the scheme. The remainder of the unallocated surge appointments will be redistributed resulting in approximately 5,000 urgent surge appointments across the borough.

5. **Evaluation**

5.1 The pilot scheme will be evaluated in terms of its effectiveness in reducing urgent care attendances at the walk in centres and urgent care centres and its impact on patient satisfaction. Quantitative analysis of activity data will show any increase in capacity in primary care as well as changes in activity in other urgent care settings, while qualitative data, via patient surveys and “mystery shopping”, will allow for evaluation of patient experience.

5.2 An interim evaluation will be completed at the end of March 2014 and the evaluation will be complete 6-8 weeks after the scheme ends with the final evaluation report completed in May 2014. The evaluation will inform the CCG’s ongoing strategy to improve urgent care in Barking and Dagenham.

**List of appendices:**

 Appendix A - distribution of urgent care surge appointments in Barking and Dagenham
## Appendix A  Practices Participating in the Surge Scheme

<table>
<thead>
<tr>
<th>Locality</th>
<th>Practice Name</th>
<th>Locality Population</th>
<th>October</th>
<th>Surge Appts Offered</th>
<th>November</th>
<th>Surge Appts Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Valence MC*, Dr Kashyap &amp; Practice, Lawns Medical Care, Tulasi Medical Practice, Green Lane Surgery, Highgrove Surgery, Dr A Arif</td>
<td>31,256</td>
<td>11053</td>
<td>540</td>
<td>12962</td>
<td>583</td>
</tr>
<tr>
<td>2</td>
<td>Church Elm Lane Medical Practice, Laburnum HC, Dr C Ola, Becontree MC, Heathway MC, Oval Road Surgery</td>
<td>28,997</td>
<td>10678</td>
<td>332</td>
<td>9602</td>
<td>376</td>
</tr>
<tr>
<td>3</td>
<td>Dr. B K Jaiswal, Gables Surgery, Markyte Surgery</td>
<td>11,075</td>
<td>4571</td>
<td>195</td>
<td>3219</td>
<td>100</td>
</tr>
<tr>
<td>4</td>
<td>Dr M Fateh, Hedgemans MC, Dr Pervez*, Dr Mohan &amp; Associates*, Drs Alkaisy &amp; Islam</td>
<td>26,370</td>
<td>5744</td>
<td>83</td>
<td>10423</td>
<td>430</td>
</tr>
<tr>
<td>5</td>
<td>John Smith House, Ripple Road MC, King Edwards Medical Group, Abbey MC, Thames View HC, Porters Avenue</td>
<td>31,748</td>
<td>11983</td>
<td>634</td>
<td>11577</td>
<td>752</td>
</tr>
<tr>
<td>6</td>
<td>Barking Medical Group Practice, Dr Chawla, White House Surgery, Child &amp; Family Centre</td>
<td>24,025</td>
<td>10683</td>
<td>447</td>
<td>10081</td>
<td>519</td>
</tr>
</tbody>
</table>

*started scheme in November

<table>
<thead>
<tr>
<th>Local Population</th>
<th>October</th>
<th>Surge Appts Offered</th>
<th>November</th>
<th>Surge Appts Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>153,471</td>
<td>54,712</td>
<td>2,231</td>
<td>57,864</td>
<td>2,760</td>
</tr>
</tbody>
</table>