

Date	Wednesday, 15 January 2020			
Title of paper	Future of the Soho Walk-in Centre			
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Confidential	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Items are only confidential if it is in the public interest for them to be so			

The Governing Body is asked to:

- **Note** the position of the Soho WiC in relation to the national guidance and the need for a service change in order for the service to be compliant with the guidance.
- **Note** the work that has been done to date to review the current activity and utilisation as a way of informing a future recommendation to the Governing Body on the service change required.
- **Note** the work that is due to start in February to engage with local stakeholders to help inform that recommendation to the Governing Body on the service change required.
- **Note** the work that is on-going with commissioner and provider groups to help shape the future recommendation to the Governing Body on the service change required.
- **Agree** that following the outcome of the engagement work and discussions between commissioners and providers that a business case should be presented to the Governing Body, setting out the options and a recommendation for the way forward.

Summary of purpose and scope of report

This paper sets out recent progressions on the CCG's plans for the future of the Soho Walk in Centre (WiC) service. It provides:

1. Background and history of the service, including current utilisation and service activity profile.
2. A summary of national guidance and policy for urgent and emergency care.
3. A summary on the development of options for the service change and engagement activity plans and process moving forward.

Context

In September 2019, NHS England wrote to CCGs to reiterate the need for local areas to

implement the national guidelines as outlined in *Principles and Standards for Urgent and Emergency Care July 2017*¹, and *Urgent and Emergency Care Facilities and System Specifications, November 2017*², published further to Professor Keogh's Review (2013). This guidance stipulates that WiCs should no longer be recognised as a commissioned service model, and existing WiCs can be transformed into a range of nationally recognised service models, including urgent treatment centres (UTC) or extended access primary care hubs, by 31st December 2019.

CLCCG's previous plan for the Soho WiC was to align transformation timelines to local priorities. The CCGs initial response, consistent with other local areas, was to request an extension to this date to enable the local system to fully consider alternative plans.

The CCG has also engaged local providers to develop a set of future options for the WiC, and agreed a joint decision making process with Central London Community Health Care (CLCH), University College London Hospitals (UCLH), Camden CCG and NHS England (NHSE). The process includes a period of public engagement, which is planned to commence in February 2020 following the period of General Election 'purdah' and the festive period.

Activity

The first stage of the local decision making process has been to collect a range of information on current service activity. Analysis of this information has shown that a high proportion of WiC users are coming from outside of central London – 48% are from other areas of London; 10% CLCCG, and 30% are Greater London, Home Counties and Nationwide which is indicative of commuter usage. 12% of users are unregistered to a GP practice. The main reasons for attendance are typical low-level primary care needs, wound care, and dermatology, which could potentially be absorbed into underutilised primary care services in Central London and other localities.

Quality & Safety/ Patient Engagement/ Impact on patient services:

An assessment of the quality impacts of implementing the national UEC guidance is part of the on-going review process.

The main concerns initially identified are around patient confusion over alternative services to access, and the potential impact on existing urgent care services when the walk-in centre no longer exists in its current form.

¹ <https://www.england.nhs.uk/wp-content/uploads/2017/07/urgent-treatment-centres-principles-standards.pdf>

² <https://www.healthylondon.org/wp-content/uploads/2015/11/London-UEC-facilities-and-system-specifications-November-2017.pdf>

The CCG plans to undertake engagement with local stakeholders, including local residents on the current service and the requirement for there to be change in how the service is delivered. This engagement will be undertaken during February and will inform the business case that is presented to the Governing Body in due course on the options and recommendations for moving forward.

These services and pathways will be consistent with NHS England guidance in respect of the development of integrated urgent care pathways and primary care access, and address the risks referenced in the national guidance on the widespread confusion about the most appropriate unplanned care services to access.

Finance, resources and QIPP

Central London CCG currently has a block contract with Central London Community NHS Trust for all services commissioned for its residents. Within this, £180k is committed to the Soho WiC service. This provides for activity attributable to Central London CCG and the Trust makes direct charges to other CCGs using the service. As part of the on-going work the CCG will undertake further financial analysis relevant to the development of the options and recommendations that will be included in the business case developed for the Governing Body to review.

Equality / Human Rights / Privacy impact analysis

The CCG has completed an initial Equality and Health Impact Analysis (EHIA), subject to further input from partners and a Patient Advisory Group. To summarise some of the findings:

Age

The WiC does not provide a service for children under the age of 12. Closure / change of the service and re provision elsewhere would therefore provide an opportunity to provide a more equal service open to all ages.

Disability

Some anticipated impact on those with social barriers, such as the homeless population, many of whom may have a disability and who are often not registered with a GP. The CCG will attempt to gather further intelligence on the characteristics of people using the service in partnership with CLCH and other partners.

Pregnancy

The WiC does not currently provide a service for prenatal care. The change in service will therefore present an opportunity to provide services that are inclusive of pregnant women and may have a positive impact on equality for this protected characteristic. As a large majority of users are working age commuters, pregnant women, who are also working age

commuters, are currently discriminated against by their exclusion from this service.

Risks	Mitigating actions
<p>Concerns / objections by members of the public and other stakeholders, including Westminster County Council and local MPs, in respect of the loss of a local service by Westminster's resident population.</p>	<p>Inclusion of local stakeholders in the engagement activity during February will help determine the options for the future.</p> <p>Following any decision by the Governing Body on the way forward (in due course), a robust communications and engagement plan that explains the decision and next steps.</p>
<p>Plans across NWL for changes to other WiCs in parallel may present a more significant transfer of patient flow, particularly commuters, to neighbouring acute services such as UCLH, SMH and St Thomas' UCCs.</p>	<p>Analysis of activity from the Soho WiC and consideration of future patient flows into other services in partnership with providers of those services.</p> <p>Intensive engagement with all relevant stakeholders is required as part of the engagement and communications plan, including out of area CCGs whose patients are frequent users of the current service.</p>
<p>Purdah has presented a previous risk to the timelines for engagement due to the recent general election and may present a further risk due to the upcoming mayoral election in May.</p>	<p>Timeframes will incorporate a further period of purdah in May.</p>

Supporting documents

Footnotes: national policy documentation

Governance and reporting
(list committees, groups, other bodies in your CCG or other CCGs that have discussed the paper)

Committee name	Date discussed	Outcome

1. Introduction

1.1 This paper outlines the current position in relation to the Soho Walk-in Centre (WiC) and the CCG's thinking in respect of the potential future options. The work undertaken has been set within the context of the national guidance for the standardisation of urgent and emergency care and the criteria set-out within the guidance for the establishment of urgent treatment centres. As part of the work done to date, consideration has been given to the communications and engagement activities that will need to be undertaken in order that the CCG can reach a decision on the future of the service. The CCG will need to develop detailed plans for the future service and undertake a number of key steps before asking the Governing Body to consider the way forward. The paper provides updated information on the Soho WiC service activity, further to that which was presented in the business case agreed by CLCCG in January 2018 together with an updated data analysis on patient activity, such as reasons for attendance, utilisation rates, outcomes and usage trends.

2. Background and history

2.1 A number of walk-in centres were opened nationally during 2000-2010 when the NHS opened more than 230 walk-in centres in order to offer more patient choice and improve access to primary care.

2.2 In more recent years this approach has been reviewed across the country as WiCs are seen to duplicate existing and newer urgent and primary care services. In 2017, national guidance was developed indicating that local areas are expected to work towards ceasing the use of walk-in centres, and instead implement a standardised set of service specifications for urgent treatment centres (UTCs). *Urgent Treatment Centres: Principles and Standards (July 2017³)* and *Urgent and Emergency Care Facilities and System Specifications (November 2017⁴)* outlined a set of minimum standards for urgent and emergency care (UEC) services to be implemented by 31st December 2019. The guidance states that all previous forms of urgent and emergency care services, including walk in centres, minor injury units and urgent care centres, must meet the service specification for urgent treatment centres, or be aligned into local primary care services.

2.3 The Long Term Plan (January 2019) reiterated the 2017 guidance and, in September 2019, NHS England (NHSE) wrote to CCGs reiterating the need to implement the national specifications for urgent and emergency care. The NHSE deadline for implementation of the changes was originally set for 31st December 2019 but many CCGs have been unable to

³ <https://www.england.nhs.uk/wp-content/uploads/2017/07/urgent-treatment-centres-principles-standards.pdf>

⁴ <https://www.healthylondon.org/wp-content/uploads/2015/11/London-UEC-facilities-and-system-specifications-November-2017.pdf>

meet this deadline. In response, the CCG applied to NHSE for a 3-month extension which was subsequently approved.

3. CCG response to the national guidance

3.1 As a response to the national guidance the CCG has looked at the options for the future of the service and has begun to work through what these might be. Part of the consideration has been to review the patient activity data for the service in order to get a better understanding of numbers and reasons for attendance and to look at whether there are alternative ways patient need could be provided for. This work now needs to be informed by public engagement in order that the Governing Body can take a more considered view on what service should be commissioned and how it should be provided. Additionally, the CCG has begun to explore options with Central London Community Healthcare Trust (the provider) to look at the wider system options alongside neighbouring commissioners and providers. The outcomes of this work and discussions will also contribute to any recommendation that is brought back to the Governing Body.

4. Overview of the service

4.1 The Soho WiC offers a nurse-led service, providing unscheduled and routine primary care treatment for minor injuries and health conditions. The service opens from 8am to 8pm Monday to Friday and 10am to 8pm on weekends.

4.2 The WiC is delivered by Central London Community Healthcare (CLCH), with Central London Commissioning Group (CLCCG) hosting the contract.

5. Service Activity Data Analysis

5.1 Service Delivery and Activity

- Approx. 100,000 attendances between April 2017-April 2019 (2 years of data).
- Average yearly attendance is 50,000.
- There has been a declining trend of c5% in 2018-19 compared to prior year, and based on 2019-20 forecast outturns – a decline could be seen this year.
- Attendances tend to vary between 3,582 and 4,874 per month.
- Since Apr 2017, there has been a steady downward activity trend.
- Monday to Wednesday are the busiest days seeing an average of 160 patients per day; the rest of the week sees on average 117 patients per day.
- The first hour of service each day sees a peak of typically 20 patients in that first hour. The last hour of service (7pm to 8pm) has considerably lower levels of patients presenting – typically 3 per hour.

5.2 Breakdown of attendance by CCG

- The top 24 CCGs are all London based CCGs which makes up 70% of all attendances.

- Central London CCG has 10% of all attendances. Practitioners at the WiC appear to be coding unregistered patients to CLCCG (as the majority of unregistered patients are listed to Central London at 12%).
- Camden CCG makes up 8% of users.
- Other London CCGs 40%.
- Less than 30% of attendance is commuter belt, with a small proportion nationwide. Although there were 422 Post Code entries due to poor data entry, these make up less than 5% of attendances.

5.3 Practice breakdown and registered / unregistered patients

- 75% of patients who attended the Soho Walk in Centre during 2018-19 were registered with a GP practice, with 25% of patients unregistered to a practice.
- Where the attendance activity has been identified as belonging to Central London CCG, the percentage of GP practices listed as “Unknown Practice” is circa 59%, meaning the majority of CL patients using the WiC are not registered to a GP.
- Around 9% of recorded CLCCG activity is linked to patients registered at the two co-located practices at the Soho Centre for Health and Care. Although the WiC state they aim to reduce the use of the service registered to these practices, the high activity levels represent a duplicate funding arrangement and reflect that it can be convenient for local patients to wait for a walk in appointment rather than book one with their own practice.
- The highest number of referrals to the WiC comes from GP at Hand.

5.4 Age and ethnicity

- Majority of attendees are of working age between age 20-40, and of white ethnicity.
- As a high proportion of young people use the WiC (majority are age 20-40) it appears that young professionals are using the WiC as a substitute for a GP. Further analysis of age groups versus GP registration status will evidence this.

5.5 Diagnoses / Presenting complaints and outcomes

Analysis of patient activity data between April 2017–April 2019 shows the majority of presenting complaints are typical of Primary Care with the most common complaint being “Health advice” where reason for attendance or diagnosis is recorded, accounting for 38% of all attendances. This is followed by “ENT”⁵ (ear, nose and throat conditions) at 7%. However, 18% of Diagnosis data is recorded as “not specified” – hindering any useful analysis on key diagnosis trends. The main outcome is recorded as “minor ailments” at 60% of all attendances.

5.6 Note that outcomes are poorly coded in the dataset, with “not specified” being the second largest outcome at 26%.

⁵ *Poor use of terminology (“ENT”) in the data entry – this likely refers to “URTY” (upper respiratory tract infection) as opposed to “ENT” which is appropriate to ear nose and throat conditions in an acute setting.

5.7 Data analysis 2017-2018

Previous data analysis from April 2017 – September 2018 (18 months of data) showed the following:

- 58% of contacts are by patients who visited 1 or 2 times in the 18 month period.
- Almost each 5th visitor of the WiC is a regular patient, with 3 to 74 contacts at the WiC instead of going to their GP Practice for an appointment.
- 24% (nearly each 4th visitor) - are patients without any recognisable identification (NHS No. or GP Practice, but gave a London Post Code).
- The highest activity day is Monday and the lowest activity day is Sunday.

5.8 Two clinical visits took place in 2017, with a CLCCG staff member interviewing staff and shadowing the processes at the front desk. The feedback from these visits is that most of the activity observed would be considered low level primary care, including items such as repeat prescriptions. This type of service activity fits the profile of a commuter patient who is seeking basic healthcare on an occasional basis that would otherwise be available at their GP practice. The recent data analysis provides evidence in support of this remaining the status quo.

5.9 Further analysis of data may be required due to inconsistent coding and poorly populated data fields. Monthly data reporting from CLCH for the WiC has been inconsistent until recently, however, contract reporting has now been aligned to a monthly contract meeting and data and performance reporting is now being received on a monthly basis. In addition to this, on request of the CCG, CLCH carried out a 4 week audit of patient activity which has validated the findings of the CCG's most recent analysis. Key findings from this audit; patients were asked where they would go if the WiC service was not available to which 63% replied A&E. Significantly, 80% replied that they were not aware that they could access a GP based near their place of work. On appropriateness of attendance from a clinician's perspective, 15% should have gone to A&E, 67% to a GP, 8% to a pharmacy, and 10% should have called 111 for advice. Reason for not accessing their own GP – 42% said there were no appointments available.

5.10 Central London extended access services (GP and nurse appointments outside of normal GP operating hours) are provided at Pimlico, Connaught Square and Westbourne Green GP practices at evenings and weekends. Utilisation rates for finished appointments are at 76% GP, and 62% nurse led.

6. Project, Communication and Engagement plan

6.1 In September 2019, the Leadership Executive Committee (LEC) of the CCG considered a plan for taking forward some patient engagement on the service in order to help inform the options for the future. It is clear that the CCG must work closely with key stakeholders including patients, the public, and other local agencies and authorities before any changes are proposed for the Soho WiC. Depending on the outcome of engagement, the Governing Body will need to take a view on whether any potential changes are considered significant

enough to require formal consultation. This decision will be informed by the formal feedback of the local Overview and Scrutiny Committee of Westminster City Council.

6.2 To decide how the services should be provided in the future, we need further input from the community, service users, healthcare professionals, and the local authority amongst other key stakeholders. A period of engagement is taking place from February 2020 to help shape the most suitable options for the WiC.

6.3 *Stakeholder partnerships*

To further assess the impacts associated with implementing the UEC guidance, and to explore the options for future services, the CCG has organised a set of partnership groups in collaboration with CLCH, Camden CCG, and University College London Hospital (UCLH). An operational group began meeting in November for the purpose of developing an options appraisal, which will be reviewed by a system group including the chief executives of those organisations.

6.4 *Public engagement*

Two engagement workshops are due to take place in February 2020. These workshops are open to a wide range of stakeholders including members of the public, and will cover the same content, with identical presentations shared at each. The purposes of the sessions are to:

- Aid with the development of the future options for the service going forward.
- Develop key messaging and information materials (posters, leaflets, FAQs etc.).
- Provide the public with a background on the Soho WiC and the reasons why changes are being proposed to the service.
- Consider all the different options for the WiC going forward from 1 April 2020.
- Aim to have a clear set of options developed after these two workshops to then use for further public engagement.

The CCG will promote these workshops with local partners, and using external facing communications. Once all the engagement feedback has been collated, the options will be considered and presented to the Governing Body. Outcomes of the discussions of the Governing Body will be communicated to the wider stakeholders and will be followed by a further period engagement.

7. Next Steps

7.1 Before a decision can be taken by the Governing Body on the future arrangements for the services currently provided by the Soho WiC the following actions need to be undertaken:

- Stakeholder engagement to help inform proposals for the future of the service (outlined in the section above).

- An options appraisal based on the ideas generated from the engagement and other discussions that are taking place within the groups set out above.
- Presentation of a business case to the Governing Body which summarises the outcomes of the engagement and the work of the working groups, and sets out a range of options leading to a decision by the Governing Body on the way forward.
- Development of a timeline and work programme for moving forward that can be incorporated into the business case to the Governing Body based on the preferred option.
- On-going discussions with key stakeholders and partners, in order that the business case is informed by the most up-to-date information from partners.

8. Action Required

8.1 The Governing Body is asked to:

- **Note** the position of the Soho WiC in relation to the national guidance and the need for a service change in order for the service to be compliant with the guidance.
- **Note** the work that has been done to date to review the current activity and utilisation as a way of informing a future recommendation to the Governing Body on the service change required.
- **Note** the work that will begin in February to engage with local stakeholders to help inform that recommendation to the Governing Body on the service change required.
- **Note** the work that is on-going with commissioner and provider groups to help shape the future recommendation to the Governing Body on the service change required.
- **Agree** that following the outcome of the engagement work and discussions between commissioners and providers that a business case should be presented to the Governing Body setting out the options and a recommendation for the way forward.