

## **Primary Care Hub Access at the Merlyn Vaz Health and Social Care Centre - briefing Paper for Leicester City Health Overview and Scrutiny Commission**

### **Summary**

1. Leicester City Health Overview and Scrutiny Commission requested Leicester City Clinical Commissioning Group provide a briefing as to:
  - (a) The rationale and impact of moving from a walk-in appointment system to a combined pre-bookable and walk-in appointment system for the Primary Care Hub service operating from the Merlyn Vaz Health and Social Care Centre.
  - (b) As a result of the change in appointment system whether there has been an increased demand on acute ED services.
2. It is the intention of this paper to inform the Committee as to:
  - (i) The rationale behind the appointment change; and
  - (ii) Any evidenced impact on acute ED services.
3. A pre-bookable appointment system allows the provider to maximise the use of health professionals' time, minimises waiting times for patients and ensures an appointment is the right solution for them.
4. To date there is no evidence to suggest the appointment system change has had a negative impact on ED service delivery.

### **Background**

5. The Merlyn Vaz Health and Social Care Centre officially opened its doors in 2009, hosting a number of local GP practices and an open access walk-in centre. As the name suggests, patients were entitled to walk-in between the hours of 8am and 8pm and sit and wait for an appointment to become available. Patients from outside of Leicester City could also use the service.
6. While a walk-in service could have advantages for patients, it often led to excessive peaks and troughs in demand (times when it is either very busy or very quiet) which made it difficult to make best possible use of health professionals' time. Feedback from patients told us that they often got frustrated with the length of time they needed to wait to be seen. At very busy times, the wait could be several hours.
7. The aim of the walk in centre was to provide improved access to GPs for patients who were finding it difficult to get an appointment at their own practice. It was hoped that this would help lead to a reduction in A&E attendances but, after the service opened, the number of people attending A&E continued to rise.
8. Rather than using the walk-in centre when they could not get an appointment at their practices, we learned that patients were using the walk-in centre as their first port of call, instead of their regular GP practice. This meant they were not receiving any holistic oversight or coordination of all aspects of their care.

9. Patients were also found to be using the walk-in centre for largely minor self-limiting conditions that could have been managed better through self-care and advice from a pharmacy or NHS 111.

### **Transition from walk-in service to healthcare hub**

10. In 2015, Leicester City CCG began a pilot of the extended access primary care healthcare hubs in the city, funded by the Prime Minister's Access Fund. The purpose of the scheme was to make it easier for patients to get an appointment with a GP or nurse in the evenings and weekends and at times when their own practice could not see them.
11. The walk-in centre contract was due to end on 30<sup>th</sup> September 2017. Therefore during February and March 2017 the CCG carried out some engagement with patients to ask for their views on changing the walk-in centre model from exclusively walk-in to a hybrid model offering a combination of both pre-bookable and walk-in appointments. This was to bring the service more in line with those of the three primary care hubs in the city, although those offer an exclusively pre-bookable appointment system.
12. As part of the engagement, patients were also asked for their views on the potential future location of the service. The options presented were at Merlyn Vaz Health and Social Care Centre and Leicester General Hospital.
13. In total 56% of respondents said they would prefer the service to be located at Leicester General Hospital, compared to 31% who said they would prefer it to be at the Merlyn Vaz Health and Social care Centre. The remainder said that they did not know or had no preference.
14. Despite this, a number of respondents told the CCG that they had reservations about any move to the General Hospital taking place before consultation on the future of the site was undertaken as part of the planned STP consultation on proposals for the future reconfiguration of Leicester's hospitals. As a result, a decision was made to retain the service at Merlyn Vaz Health and Social Care Centre pending the outcome of this process.
15. The engagement also asked patients for their views about whether appointments should continue to be offered on an exclusive walk-in basis, be wholly pre-bookable or a combination of the two. In total 54% of respondents to the engagement either strongly agreed or agreed that most appointments at the hub should be booked in advance, with a smaller proportion ring-fenced as walk-in appointments. 22% disagreed or strongly disagreed, with the remainder neither agreeing nor disagreeing.
16. As a result, the contract was specified as requiring the provider to offer a mixture of both pre-bookable and walk-in appointments, with a transition to achieving an 80/20 split in favour of pre-bookable over the first three years of the contract.
17. Timed slots help to keep waiting times for patients to a minimum and it means that the use of the GPs' and nurses' time who are working in the service can be maximised.
18. Pre-booking also allows for a decision to be made about which service the patients should be appropriately signposted to, ensuring their needs are addressed by the right person, in the right place and at the right time. This could help reduce the number of walk-in patients who wait several hours for an appointment only to be referred onto another part of the service, such as A&E, following consultation with a doctor.

19. The CCG recognised that not every patient has the ability to book an appointment in advance, however. It was for this reason that it was agreed the service could continue to offer some appointments on a walk-in basis.

### **The current service**

20. The extended access primary care service at Merlyn Vaz Health and Social Care Centre continues to be open from 8.00am to 8.00pm 365 days a year.
21. The service provision includes:
- In line with patient feedback, carry out predominantly booked assessment and treatment for patients presenting with urgent care needs and patients looking for routine access 7 days a week, but also provide for walk-in patients.  
Provide medical expertise and as a minimum has on-site doctor presence throughout hours of operation
  - Be staffed by a mix of clinicians qualified to manage primary care presentations.
  - Provide the capability to prescribe medication throughout the hours of operation.
  - Arrange for testing and referrals for urgent conditions.
22. The current split of appointments between pre-bookable and walk-in at the Merlyn Vaz site is approximately 80% pre-bookable and 20% walk-In. However, it should be noted that this is variable, with the number of walk-in patients rising as high as 30% in some months.
23. Overall the service continues to see approximately 500 patients per week, which is consistent with the number of patients seen when the service was exclusively walk-in.
24. The CCG has investigated the impact the appointment system change has on acute ED service delivery and, to date, there is no evidence to suggest the change has had a negative impact on ED attendances or performance. However, the CCG has committed to keeping this under regular review.

### **Conclusion**

25. Both the walk-in model and the healthcare hub model are designed to improve access to primary care appointments. The benefits of a healthcare hub model over a walk-in have been described in this paper. Waiting time for patients is kept to a minimum. Health professionals' time can be better used by managing patient flow across the day. Having a timed appointment also means the needs of the patient can be assessed in advance to ensure the service is right for them.
26. There is no evidence to suggest that there has been a negative impact on ED service delivery by moving to the current service model. A predominantly pre-bookable appointment model was supported by patients through engagement, while a proportion of walk-in appointments are still maintained for use by patients, including those from outside the city.