

**** URGENT ****

Governing Body Member,
Croydon Clinical Commissioning Group

13 January 2016

Urgent Care Review – Unanswered Questions

Dear Governing Body Member,

For the past 18 months, representatives from our Residents Associations have been in discussions with the executive team of the Croydon Clinical Commissioning Group regarding the provision of urgent care facilities within Croydon Borough. Additionally, our representatives have attended many of the engagement meetings organised by the CCG, and by others, regarding the urgent care review.

The Residents Associations believe that the CCG executive team have not fully explained their preferred scenario of 3 GP Hubs, which will be put before the Governing Body for a decision in February. We are of the opinion there are still a number of questions which must be answered before any decision is made, and that if the Governing Body were to make a decision before receiving satisfactory answers to these questions, then it would be failing in its duty of care to the people of Croydon:

One of the reasons cited for the review is to provide consistency of service. Yet, to date, there are no national, or London wide standards, or common specifications which relate to GP Hubs. In particular:

1. What are the target waiting times for walk-in patients?
2. What are the care quality standards at the GP hubs, and who will oversee them?
3. What are the target waiting times for appointments booked through NHS 111?
4. Why do GP Hubs not fall within the new guidelines defining Urgent Care Centres as "...GP led health centres or other similar facilities"?
5. What is a "virtual GP Hub", and is there a guarantee that this will not replace physical GP Hubs?

Dr Fernandez has stated that there will be access to the x-ray facility at Purley Hospital for non-fracture related urgent care requirements:

6. Will the x-ray facility be available 8am to 8pm, in line with the GP Hub opening hours?
7. How will GP Hub doctors arrange for a patient x-ray, and review the results?
8. Why has there been no mention of the x-ray facility in the published engagement documentation, or in the GP hub specification circulated for market testing?

The engagement documentation refers to flexibility in staffing at the GP Hubs:

9. Will there be a GP and nurse on site, with the appropriate minor injuries skills, at each GP Hub, for the entire opening hours of 8am to 8pm, 7 days a week?
10. Can it be confirmed that GPs will not be pulled away from GP practices in Croydon Borough to staff the GP Hubs, to the detriment of patient services in local GP practices?
11. How will the service provider recruit the GPs and nurses required to staff the GP Hubs, given the national and local shortages in these personnel?

12. Furthermore, Dr Fernandez said that no additional personnel will be required. How can this be the case when the opening hours at Purley and new Addington are currently only 2pm to 8pm, whereas the proposed GP Hubs are 8am to 8pm?

The engagement documentation and the market testing documentation states that the preferred route for patients to access GP Hub service is via NHS 111:

13. What modelling has been done to forecast the numbers of patients who will use NHS 111 to access the GP Hub? How many will simply walk in?
14. The residents of Croydon will need to be encouraged to use NHS 111 as their first port of call. How will this be publicised, how much will it cost, and who will be responsible for the publicity campaign?
15. What steps are being taken to ensure that the NHS 111 service is adequately staffed to meet the increased demands placed upon it?
16. Where is this additional NHS 111 staffing budgeted, and how much will it cost?

During the engagement process, it has been stated that for commercial reasons the sites of the GP Hubs cannot be specified:

17. If it is commercially acceptable to specify that tenders regarding the Urgent Care Centre at Croydon University Hospital must operate from that site, then why is it not possible to specify that tenders for GP Hubs must use the existing MIU/WIC sites?
18. Our residents have told us that one of the most important factors for community minor injuries services is their location. What weighting will be given to the importance of location when assessing the tenders submitted?

From the meetings attended by our representatives, it is clear that most members of the public are confused by the proposals, and do not understand the implications of the changes proposed:

19. Are the Governing Body members satisfied that the changes proposed have been sufficiently publicised, and are understood by Croydon residents?
20. Do the Governing Body Members believe that the GP Hub system will be easier to understand than the current arrangements?
21. And in particular, will members of the public be sufficiently able to determine the (lack of) severity of their injury/ailment before attending a GP Hub on a walk-in basis?

The population of Croydon is forecast to grow by approximately 5% (18,000) over the next 5 years.

22. How does the new GP Hub system improve overall capacity for the Borough to cope with the anticipated population growth?
23. Will there be sufficient borough wide system resilience under the new proposals? For example, what happens if there is a major incident?
24. What happens if services must be suspended at Croydon University Hospital A&E/UCC?
25. The Urgent Care Centre at CUH has received significant criticism from the CQC. Is it prudent to rely solely on this facility to provide more serious minor injuries/ailments treatment for Croydon's 360,000 population?
26. Currently, approximately 50,000 people p.a. access the existing MIU/WIC facilities; what modelling has been done to forecast where these people will go under the new proposals?

It has become clear that there have been serious errors in the procurement process. Most serious of which was the miscalculation of the costings for the 3 GP Hubs - originally specified as £340,000 p.a. in the September strategy document, but now estimated to be approximately £2 million p.a.

27. This error was only disclosed under pressure from ourselves. Are there any other errors which should have been publicly disclosed?
28. Is there confidence that the preferred scenario costings have been accurately forecast?
29. Do the forecast costings include the extra budgets necessary for NHS 111, and publicity?
30. Why did the CCG fail to liaise with Residents Associations when this miscalculation error was discovered?
31. Why did the CCG simply discount the alternative scenario put forward by the Residents Associations without first referring back to them?

Despite numerous meetings, emails and questions from ourselves, Croydon HealthWatch, and our local MP Chris Philp, the CCG executive have not yet fully explained the proposals and given satisfactory answers to the questions above. Furthermore, it is clear that the general public do not understand the issues involved or the proposals being put forward.

Given the apparent lack of understanding in the population of Croydon, the seriousness of the errors in the reprocurement process, and the significance of the changes proposed; we urge that the decision by the CCG due in early February is deferred, and that the CCG engage in a further, full public consultation before any final decision is made.

Yours sincerely,

Diane Hearne
Diane Hearne
Hartley & District RA

Janet Stollery
Janet Stollery
Old Coulsdon RA

Rita Barfoot
Rita Barfoot
Coulsdon West RA

Charles King
Charles King
East Coulsdon RA

Chris Stanley
Chris Stanley
Kenley & District RA

Phil Reed
Phil Reed
Purley & Woodcote RA

Dennis King
Dennis King
Sanderstead RA

Phil Thomas
Phil Thomas
Riddlesdown RA

cc. Jeremy Hunt MP, Secretary of State for Health; Chris Philp MP for Croydon South; Vanessa Hosford, Acting Chair, Healthwatch Croydon; Charlie Ladyman, CEO, Healthwatch Croydon; John Goulston, CE, Croydon NHS Trust; Simon Stephens CE, NHS England.; Dr Anthony Brzezicki, Chair, Croydon CCG; Paula Swann, CE Croydon CCG; Charles Trefusis vicar of Christchurch Purley; Polly Albany Ward, Croydon Advertiser.