

Trafford Locality Urgent Care Review Report August 2024

Part of Greater Manchester Integrated Care Partnership



Introduction

A simple to navigate, joined up Urgent Care offer which meets the needs of all the population has been a long-standing ambition in our Locality Plan. Therefore, the Trafford Locality Board supported and requested the establishment of this review to ensure and assess the offer available for Trafford patients and residents.

The review also considers whether the urgent care services are in line with national guidance and can be delivered in a sustainable manner within the staffing and financial resources available.

The definition of Urgent care used for the purposes of the review was: the diagnosis and treatment of medical conditions which are serious or acute but pose no immediate threat to life or limb or health, but which requires medical attention within 24 hours.

Review Process and Approach

Review undertaken between September 2022 – November 2023

Within the course of this review, we have undertaken four key phases focussing on:

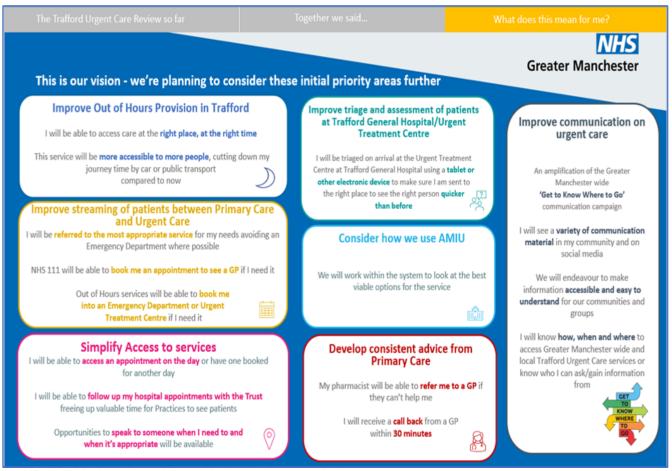
- Locality Needs Assessment which provided a comprehensive analysis of resources and services available to the people of Trafford including the usage of those services, as well as identifying the needs of the population, understanding access to Transport and the health inequalities within the locality.
- Public and Patient Engagement which took the form of eleven listening session with various Voluntary, Community, Faith and Social Enterprise (VCFSE) groups and organisations in different locations and neighbourhoods across Trafford between 17th January 23 and 13th February 23rd. In addition to these sessions, we also held 6 drop-in sessions at libraries throughout Trafford. Overall, we spoke with 155 people face to face.
- **Urgent Care Survey** which was available to complete between 3rd Jan 23 and 14th Feb 23 (6 weeks in total), available online and in paper form. We received a total of 627 responses to the survey and to support this further independent analysis was undertaken by Healthwatch Trafford in partnership with Trafford Council's Public Health Team.
- Co-design priorities and Engagement identified several priority areas for development as a result of the outcomes of the review so far. The priority areas as a result of the review were agreed by: NHS GM and Locality, Manchester University NHS Foundation Trust, Mastercall Healthcare, Healthwatch, Independent GP, Trafford Council Public Health. Further engagement around these priority areas was undertaken between 23rd 30th October 23 with a range of groups and organisations that were previously involved in the engagement sessions during January. This provided the opportunity to update on findings and seek feedback and views on suggested draft priorities.
- For each of the seven priority areas identified multi stakeholders working groups were established to consider the information and evidence within the review and to identify a potential response / recommendation within that area.



- As a result, each working group developed recommendations to mitigate the gaps identified within the review.

Identified Priority Areas Description

As part of the outputs of the first three phases of the review seven priority areas were identified and are summarised in the table below. These priority areas formed the basis of the Co Design working Groups that considered the information within the review and possible recommendations or changes that could be made to mitigate areas identified.



NB AMIU is Altrincham Minor Injuries Unit – see priority area 7



1) Improve Out of Hours Provision in Trafford

What led us to this priority from the review findings?

- Many people raised concerns about not being able to get a GP appointment and long waiting times to see a doctor.
- Those that had accessed out of hours services at their GP were then asked to rate various aspects of experience.
- Survey responses identified several areas for improvement in relation to Out of Hours based on several questions posed to the public.
- Feedback to commissioners regarding attending Out of Hours services in other localities during the evening as Trafford historically not had an Out of Hours service based in or close to Trafford for a number of years.

What is the recommendation/s for this priority?

NHS Greater Manchester colleagues work with the Trafford Out of Hours provider to establish a physical Out of Hours presence within or closer to Trafford.

2) Improve triage and assessment of patients at Trafford General Hospital (TGH) /Urgent Treatment Centre (UTC)

What led us to this priority from the review findings?

- During 21/22 more Trafford residents attended the Urgent Treatment Centre at Trafford General Hospital than any other site
- Many people had concerns about not being able to get a GP appointment and long waiting times to see a doctor.
- Significant proportion of respondents believed that they could use services at the hospital that are in fact not available there i.e. Maternity. (Healthwatch)
- A quarter (25%) did not identify that the opening hours are different, between an Accident & Emergency and an Urgent Care Centre, 10.6% thought children and babies could not be treated there, 4.7% thought that they were the same just named differently (Healthwatch)
- Despite the positive aspect of treatment free comments were largely critical of long waiting times of several hours prior to being seen at the Urgent Treatment Centre on the Trafford General Hospital site. "Urgent isn't a word I'd use, when accessing these overwhelmed services." "Waiting times of 4-6 hours Trafford General or even longer 9 hours plus at Wythenshawe Hospital has been my experience."
- Waiting times at emergency departments were too long and often in uncomfortable and very busy conditions.
- The responses suggest Emergency department at Wythenshawe Hospital and Urgent Treatment Centre at Trafford General Hospital were most used local hospitals.



System partners look to develop the streaming processes at the front of Trafford General Hospital and the opportunity to utilise a tablet or other electronic device to ensure patients are streamed to the most appropriate service for their needs.

3) Develop consistent advice from Primary Care

What led us to this priority?

- Concerns were voiced over local pharmacies not being a wholly reliable service, with good and bad experiences tied to individual sites, and many recently closing, reducing access.
- Trafford undertook a Pharmacy Needs Assessment in July 2022. This identified that the people of Trafford had good access to pharmacies in and out of hours except for Partington (Bucklow-St Martins) where there was an identified gap on Saturday afternoons and Sundays however, work is underway to rectify this. The Public Health team continue to actively monitor movement within the pharmacy sector routinely and escalate issues as and when required through established governance. The next statutory Pharmacy Needs Assessment is due to take place in 2025 and be published by the 1st October that year. There is a concern about access from Partington (Bucklow St Martins) and this is exacerbated by the current lack of pharmacy services on Saturday afternoons and Sundays in that area.
- "Pharmacists can do very little or nothing when you're pregnant you really have to talk to a GP or midwife because the pharmacist isn't allowed to make recommendations for anything not specifically approved for use during pregnancy [...] This is very frustrating for things like athlete's foot or eczema where they should be able to advise on the risks and benefits even during pregnancy, and it would be good if there was a national enquiry line that pharmacists could use to check [...]."
- They detail that though pharmacies are often convenient and provide a timely response, they are not appropriate in many situations.

What is the recommendation/s for this priority?

The system looks to develop a pilot to explore the opportunity to refer patients directly to a GP from a pharmacy, utilising the Trafford Patient Assessment Service (provided by Mastercall) to provide a timely response and patient contact by a GP within 30 minutes. This will provide additional GP capacity through utilising existing services and improves access.

4) Simplify access to services

What led us to this priority?

- Lower levels of knowledge to West (Partington) of services available to patients
- Concern in West (Partington) around being able to get an appointment or speak to someone for urgent care at a practice.
- Patients particularly in North advised to go elsewhere by a practice.
- Patients in West (Partington) and North identified they could not get an appointment with their practice so went elsewhere.



- Lack of knowledge in West (Partington) regarding evening and weekend primary care appointments
- Nevertheless, either for themselves or on another's behalf, 43% had contacted the NHS 111 service due to not being able to access their GP.
- 111 is a good service, easy to access by phone and online. No long waits.
- A follow up free comment question on the topic revealed a set of beliefs around overstretched services, ease of access, problems at primary care level meaning people go to the Emergency department, and lack of education about appropriate options.
- Clear need in West (Partington) of patients attending an Urgent Treatment Centre as they couldn't get an appointment with their own GP.
- Better and more accessible communication needed to advise where to go for certain conditions/symptoms.
- The survey work has shown a general concern about access to services from General Practice level to Emergency Departments. The concerns differ in that at General Practice level it is about obtaining appointments whereas at Emergency Departments it is the long waiting times on arrival.

NHS Greater Manchester ICB colleagues will work with NHS 111, Directory of Service Leads and Providers to ensure that patients are directed to the most appropriate service for their needs at the earliest opportunity.

5) Improve streaming of patients between services

What led us to this priority?

- People felt that waiting times at emergency departments were too long and/or often in uncomfortable and very busy conditions. It was felt that fewer people would attend A&E if seen to by their GP or other appropriate services more easily.
- Use of the NHS 111 service fluctuates considerably over time, but all four neighbourhoods show the same pattern of fluctuation, although usage is much higher in North and West Trafford than in Central or South.
- A quarter of people (25%) from Trafford who ring NHS 111 are recommended to attend A&E (Including ambulance dispatches) compared to 15% of people from Manchester.
- A&E is a default for many and is often seen as the quickest path to treatment regardless of the wait.
- Many of the comments were negative about various aspects of the NHS 111 phone line and website. Key concerns were the length of time to get a response, the level of advice, and finally that after all this many lacked confidence in the resolution. Essentially the advice was not felt to be right and/or they ended up going to Accident and Emergency.
- However, primary care, local hospitals, NHS 111 telephone and the 999-ambulance service are the most accessed services in this survey.
- 24% of people used NHS 111 Online and 29% of people used NHS 111 phoneline. Just under half reported a positive experience, the rest were between average to negative.
- Over 22% of people felt their attendance was inappropriate or were unsure.
- Many people were unsure where to go to access treatment for different concerns, or where to go to find this information.



NHS Greater Manchester colleagues will work with Manchester University NHS Foundation Trust and Primary Care colleagues to ensure patient pathways for referring to specialist services rather than attending Emergency Departments is utilised effectively. NHS Greater Manchester Colleagues will work with GP practices and other services across Trafford to remove variation in NHS111 being able to book patients into appointments that should be available across the system.

Undertake a controlled pilot for the Trafford Out of Hours service to directly book patients into an Emergency Department or Urgent Treatment Centre with the potential to expand to all primary care practices being able to book into these services in the future.

6) Improve communication on urgent care

What led us to this priority?

- People are generally aware of the larger services i.e., Hospital sites around them but not those at a community or local level.
- Better communication about where to go for certain conditions/symptoms, where to access urgent care. Confusion over where to seek help.
- People across the community raised the issue of needing physical information as well as digital, such as noticeboards and leaflets.
- Will require clear and consistent communications to inform public/patients.
- Better use of communication methods used by young people e.g., social media.
- Breakdown of services and what they can provide.
- Many people were unsure where to go to access treatment for different concerns, or where to go to find this information.

What is the recommendation/s for this priority?

Amplification of the NHS GM Get to Know Where to Go (GTKWTG) campaign. Targeting GTKWTG messaging and materials to audiences in Trafford based on findings from this review.

The NHS Greater Manchester Trafford commits to supports the proposal for investment in the amplification of the GTKWTG campaign within Trafford to ensure a wider reach of comms and engagement across the locality.

7) Consider how we use Altrincham Minor Injuries Unit

What led us to this priority?

- Altrincham Minor Injuries Unit (AMIU) is part of the wider urgent care offer within Trafford. Provision of the Minor Injuries Unit at Altrincham Hospital was suspended on the 1st of April 2020 (partially re-opened June 21 and closed again on 28th of July 2021) and has remained closed since that date in response to a shortage of specialist nursing staff who run the unit, known as Emergency Nurse Practitioners.
- National guidance stipulates that Minor Injuries Units should no longer be provided as outlined by the NHS Long Term Plan and guidance for Urgent Treatment Centres (UTC).



- "The Next steps on the NHS five year forward view, published in 2017, set the ambition for the rollout of standardised new UTC's. This was to reduce the confusing mix of urgent care services including walk-in centres, minor injury units and urgent care centres. This refresh of our 2017 UTC principles and standards sets out what we want to see integrated care boards (ICBs) implement"
- Service does not currently meet national guidelines or requirements.
- The service was delivered via two rooms within the Altrincham Hospital site.
- The average attendance per day at AMIU was 49 patients of which 65% lived within only a 2 mile radius of the facility. Outlining it serves a very small proportion of the Trafford population and the highest proportional use compared to any other urgent care service Trafford patients access.
- The highest proportional age range using the AMIU were ages 10-14 and 15-19 (school age)
- There is a nearby Urgent Treatment Centre based at Wythenshawe Hospital 3 miles away
- There are two GP practices 200 yards away from the Altrincham Hospital site that also provided Extended Access provision for patients.
- Patients are being treated at other hospital sites whilst AMIU has been closed including Wythenshawe and Trafford General Hospital.
- The increase in activity at Wythenshawe in 21/22 can be attributed to the proportional shift of patients that would have been seen within the AMIU previously.
- The Emergency Nurse Practitioners previously running the AMIU have been transferred to the Wythenshawe UTC site to support the delivery of the service and the increase in demand on this site (average increase 49 per day) as well as supporting a wider breadth of conditions than minor injuries.
- While the Minor Injuries Unit at Altrincham remains stood down, all other services delivered at the Altrincham Hospital site remain open including outpatient and diagnostic services.
- One option that was considered following publication of NHS England guidance was to change the minor injuries unit into an urgent treatment centre. However, the findings of the needs assessment and patient and public engagement, the constrained financial resources and availability of the required workforce would not warrant this as a viable option.
- Patients with non-life and limb threatening urgent care needs are still able to access the UTC at Trafford General Hospital, Wythenshawe Hospital and Manchester Royal Infirmary.
- While accessibility by public transport is very important, many people access hospital services by car. Trafford has a relatively high rates of car ownership, especially in the south of the borough.
- Our comprehensive needs assessment also identified that Trafford has relatively fewer areas of transport related social exclusions with Altrincham not being an area for concern due to its high rates of car ownership and access to good public transport links.
- Areas of concern are Bucklow-St Martin (Partington) where just over a third (34%) of households are car-less, and parts of West St Mary's which has relatively few cars registered to the area when compared with the rest of Trafford, South Sale Moor and South Altrincham.



Permanent closure of the Minor Injuries Unit service based at Altrincham Hospital with the continual relocation of services to the Wythenshawe Hospital site.

NHS GM ICB (Trafford colleagues) work with Manchester University NHS Foundation Trust to ensure efficient and appropriate streaming of Minor Injury patients into the UTC at the Wythenshawe Hospital site is effective and robust.

NHS GM ICB (Trafford colleagues) work with Manchester University NHS Foundation Trust to explore opportunities to utilise the additional space within the Altrincham Hospital Site made available by the permanent closure of the Minor Injury Unit service (2 consulting rooms).

8) Commissioner Insight

Commissioner Insight considers information, experiences, views, and feedback from a range of sources as an additional priority area not previously captured within the seven priority areas. This insight has been developed through the outputs of this review and a common thread of different issues identified as areas for particular focus by the commissioners.

Throughout the course of the review there have been consistent areas within the Trafford locality identified as being areas of particular interest or requiring improvement. The area that has consistently emerged as requiring particular focus and attention is Partington. Within the Needs Assessment there were clear health inequalities and needs identified within Partington, the public engagement and surveys and wider responses coupled with the working groups have identified areas of improvement that could be made within the Partington area.

What is the recommendation/s for this priority?

Same Day Urgent Primary Care Resilience for Partington – additional capacity to support and improve the availability of same day urgent care offers including:

- Development of a virtual primary care offer to provide additional resilience to Partington practices for Same Day Urgent Primary Care appointments.
- NHS GM ICB set aside a small amount of funds to provide conveyance for patients from Partington to Trafford General Hospital where a face-to-face appointment is deemed necessary.

Undertake a programme of focussed intervention and consideration of wider health inequalities within Partington including a Health Equality Audit for Partington with Public Health. Include a particular area of focus around Partington within the Fairer Health for Trafford Programme of work.

Ensure that where new services are commissioned within the locality additional attention and focus is made to ensure equality of access and provision for Partington residents.

These recommendations should they be accepted by the locality system and Greater Manchester system will form part of a programme of work to support developments within Urgent Care for Trafford for 2024/25.



Conclusion

The review has identified that most of Trafford's population has good access to urgent care. The data, insight, and information we have shared within this review highlight across the health care system and particularly within urgent care that we are seeing greater pressures and consequently our resources are stretched further than they have ever been before. We know that more deprived areas have higher rates of urgent care usage, and this is the pattern seen in Trafford.

For several years, we have been working as a wider health and social care system to reduce patient confusion regarding the offers available to them and in many cases support patients to navigate the system appropriately. However, the overwhelming choice of services often leads to problems with patient confusion and limits the opportunity for patients to understand and navigate the system. This unfortunately leads to a default approach of patients opting to attend the services they are most familiar with and in many cases, this is the Emergency Department, despite this not being the most appropriate service for their needs.

We are asking the Trafford Locality Board to review, consider and accept the recommendations contained within this document. The recommendations within this review will serve to enhance, improve, and develop the Trafford urgent care system and offer available to Trafford residents and patients through the establishment, implementation, and delivery of a 12 month+ programme of work commencing in Autumn 2024 which will focus on the realisation of these recommendations within the Trafford system.

Recommendations

Recommendation	Priority Area	Summary of Recommendations
1	Priority Area 1	NHS Greater Manchester colleagues work with the Trafford
		Out of Hours provider to establish a physical OOH presence
		within or closer to Trafford.
2	Priority Area 2	System partners look to develop the streaming processes at
		the front of Trafford General Hospital and the opportunity to
		utilise a tablet or other electronic device to ensure patients
		are streamed to the most appropriate service for their needs.
3	Priority Area 3	The system looks to develop a pilot to explore the
		opportunity to refer patients directly to a GP from a
		pharmacy, utilising the Trafford Patient Assessment Service
		(provided by Mastercall) to provide a timely response and
		patient contact by a GP within 30 minutes. This will provide
		additional GP capacity through utilising existing services and
		improves access.
4	Priority Area 4	NHS Greater Manchester ICB colleagues will work with NHS
		111, Directory of Service Leads and Providers to ensure that
		patients are directed to the most appropriate service for their
		needs at the earliest opportunity.

Summary Table of Recommendations



5	Priority Area 5	NHS Greater Manchester colleagues will work with
		Manchester University NHS Foundation Trust and Primary
		Care colleagues to ensure patient pathways for referring to
		specialist services rather than attending Emergency
<u> </u>	Drierity Area 5	Departments is utilised effectively.
6	Priority Area 5	NHS Greater Manchester Colleagues will work with GP
		practices and other services across Trafford to remove
		variation in NHS111 being able to book patients into
7	Drierity Area 5	appointments that should be available across the system.
7	Priority Area 5	Undertake a controlled pilot for the Trafford Out of Hours
		service to directly book patients into an Emergency
		Department or Urgent Treatment Centre with the potential
		expand to all primary care practices being able to book into
0		these services in the future.
8	Priority Area 6	Amplification of the NHS GM Get to Know Where to Go
		(GTKWTG) campaign. Targeting GTKWTG messaging and
		materials to audiences in Trafford based on findings from
9	Driority Aroo 6	this review.
9	Priority Area 6	The NHS Greater Manchester Trafford commits to supports
		the proposal for investment in the amplification of the
		GTKWTG campaign within Trafford to ensure a wider reach
10	Priority Area 7	of comms and engagement across the locality. Permanent closure of the Minor Injuries Unit service based
10	Thomy Area 7	at Altrincham Hospital with the continual relocation of
		services to the Wythenshawe Hospital site.
11	Priority Area 7	NHS GM ICB (Trafford colleagues) work with Manchester
		University NHS Foundation Trust to ensure efficient and
		appropriate streaming of Minor Injury patients into the
		Urgent Treatment Centre at the Wythenshawe Hospital site
		is effective and robust.
12	Priority Area 7	NHS GM ICB (Trafford colleagues) work with Manchester
		University NHS Foundation Trust to explore opportunities to
		utilise the additional space within the Altrincham Hospital
		Site made available by the permanent closure of the MIU
		service.
13	Commissioner	Same Day Urgent Primary Care Resilience for Partington –
	Insight	additional capacity to support and improve the availability of
		same day urgent care offers including:
		- Development of a virtual primary care offer to provide
		additional resilience to Partington practices for Same Day
		Urgent Primary Care appointments
		- NHS GM ICB set aside a small amount of funds to provide
		conveyance for patients from Partington to Trafford General
		Hospital where a face-to-face appointment is deemed
		necessary.



14	Commissioner Insight	Undertake a programme of focussed intervention and consideration of wider health inequalities within Partington including a Health Equality Audit for Partington with Public Health.
15	Commissioner Insight	Include a particular area of focus around Partington within the Fairer Health for Trafford Programme of work
16	Commissioner Insight	Ensure that where new services are commissioned within the locality additional attention and focus is made to ensure equality of access and provision for Partington residents.

Meeting our duty to involve

It is important that NHS GM meets its statutory duty to involve under Section 14Z45 of the Health and Care Act 2022. It will work with partners (including Trafford Health Scrutiny) to develop a programme of engagement and methodologies to support any pre-consultation engagement requirements, as appropriate. This will help us to fully understand any further impacts on patients and public as work progresses.

Next Steps and Timelines

Following discussion and consideration at Trafford Locality Board and pending approval of the recommendations there will be a set of sequential steps regarding governance to progress the work.

Dependent on the outcome at Trafford Locality Board on the 20th August the Trafford Urgent Care Review Report will be discussed at the following meetings/committees:

- NHS GM Executive Committee on 28th August 2024
- Trafford Health Scrutiny Committee on 11th September 2024
- NHS GM Integrated Care Board meeting on 18th September 2024

Dependent on the outcome of the governance described above further conversations will be required with Trafford Health Scrutiny Committee and a process mobilised to complete the NHS England Service Reconfiguration Assurance Process - Gateway 1, which is in response to the newly enforced legislation regarding the reconfiguration of NHS services.

Gateway 1 is a strategic sense check of all potentially major service reconfigurations that impact on patient services. It takes place after Health Overview and Scrutiny have taken a view on whether they deem a change to be substantial. At Gateway 1, projects are required to submit and present their case for change and any additional information (e.g. engagement reports, equality impact assessments, modelling, etc) to a panel of NHS England experts. NHS England will then take a view on whether they are satisfied that the relevant statutory duties are being met and whether any further work or formal consultation is required before the proposal can be implemented. Should a consultation be required, the project will progress to a second stage of assurance (Gateway 2).