

Integrated Urgent Care - Frequently Asked Questions

Questions about the service and how it works

Q. Who provides the GP Out of Hours Service?

- Until July this year, Shropdoc provided the full Integrated Urgent Care Model, which is made up of the call handling and triage service, and the GP Out-of-Hours service for Shropshire.
- The call handling and triage element of the contract transferred to NHS111 in July.
- The local GP out-of-hours Service continues to be provided by Shropdoc. From 1 October 2018, it will be re-launched under a new service model, still delivered by Shropdoc but in a delivery partnership with Shropshire Community Health NHS Trust.

Q. What is 111 and why has it been introduced?

- NHS111 is a simple, free, memorable three-digit number. We know people sometimes find it hard to know which service to contact and when, so introducing a free-to-call number will make it easier not just to access urgent care but also health information and advice if you are not sure about what to do.
- Its introduction is a mandatory requirement that will bring Shropshire in line with the rest of the country.

Q. Who will I speak to? And how do I access a Shropdoc doctor?

- If you call 111, you will initially speak to a trained call taker. All of their call takers undergo extensive training and education and they will ask you a series of short questions and take basic details (including your name, address, date of birth and so on) so that health care professionals such as doctors and nurses can focus on the clinical assessment. This will help 111 to prioritise the urgency of calls so that the sickest people get treated first.
- If 111 assess that you need to talk to your GP Out of Hours service they will transfer your details to Shropdoc, who are the local providers of GP Out of Hours services.

Q. What might happen after my care is transferred from NHS111 to Shropdoc?

- Patients who need urgent GP attention, but are too unwell to travel, will still be able to ask for a home visit. These will be offered across the whole of the county based on clinical need.

- Patients not requiring a home visit will be offered a number of channels for support. These include self-help and online advice. If required, patients may also be offered an appointment at their nearest available base.
- Response and access times will be routinely monitored.

Q. Is the whole GP out-of-hours service transferring to NHS 111?

- No, only the call handling and initial clinical assessment formerly undertaken by the out-of-hours services has transferred to 111.
- Face-to-face appointments, GP telephone consultations and mobile visits will continue to be provided by the local out-of-hours provider – Shropdoc.

Questions about the benefits of the service and how it is funded

Q. What are the benefits to patients and what are the benefits to the NHS?

- The main benefit to patients is that for the first time, you will have access to a range of services by dialling a single free-to-call number that will make it easier for you to get the right service. This supports the wider campaign encouraging patients to 'Choose Well' and helps to keep emergency departments (EDs, or also known as A&E) and 999 service for those who really need them. Ringing 111 will help to signpost patients to the right service.
- The public can be reassured that the Shropdoc service, that is so well regarded across the county, will remain in place. It is simply the means of accessing it that has changed.
- The partnership between Shropcom and Shropdoc will ensure the delivery of this service locally, by two organisations that have years of experience of providing excellent, high quality healthcare. The partnership aims to develop other services in the future that equally benefit the population of Shropshire.

Q. Are reports that there has been a cut in funding for this service correct?

- No. There has, however, been a change of delivery model. Call handling and triage has been transferred in full to NHS 111 – this was a mandatory requirement that brings Shropshire in line with the rest of the country already using the 111 service. Its introduction has changed the way the service is funded but overall the funding available from Commissioners for the new model (NHS111 and Shropdoc) has remained at the same level.
- The local service – which includes out-of-hours GP advice, face-to-face appointments and home visits – will now be provided through a partnership between Shropshire Community Health NHS Trust (Shropcom) and Shropshire Doctors Co-operative Limited (Shropdoc). This comes into effect on 1 October 2018.
- The cost of delivering the call handling and triage service has moved to NHS111. There has therefore been a reduction in the funding for the local GP-led out-of-hours service provided by Shropdoc in order to ensure the overall Integrated Urgent Care Model is still within budget.

Q. So will there be changes to the local out-of-hours service?

- Yes. As a result of the changes to the funding as described above, change has been necessary. Shropdoc will continue to operate bases in Shrewsbury, Telford, Whitchurch and Ludlow. The bases in Oswestry and Bridgnorth will no longer be operational from 1 October.
- Detailed changes to bases are as follows:
 - Opening times at the Telford base will be extended until 8am
 - The Shrewsbury base will be staffed by a GP until 12 midnight every day
 - The Ludlow base will be closed overnight
 - The Whitchurch base will only operate at weekends
 - The Bridgnorth and Oswestry bases will be closed
- Other changes to the service are:
 - Introduction of a Community Nurse Car 7 days a week
 - Introduction of a winter weekend GP relief car to help during periods of high activity
- Home Visits will still be available if deemed clinically appropriate. These could be provided by a GP or by an Urgent Care Practitioner.

Questions about clinical safety

Q. How were decisions taken regarding the operational status of the out-of-hours bases?

- Decisions on which bases should not be retained as part of the new model were not taken lightly. They followed evidence-based research that analysed activity levels.
- A review of the proposed delivery model has been completed, which incorporated the expected impact of introducing the NHS111 service. This was informed by evidence from other areas where NHS111 has already been implemented, and has been done to ensure the service can continue to respond to demand whilst continuing to deliver clinically safe services to the population within the resources available.
- The removal of the Oswestry and Bridgnorth bases from the model impacts on 10% of patients who use the current service. The Whitchurch base will now pick up patients from Ellesmere across to Oswestry, while Telford and Ludlow clinicians will meet the Bridgnorth demand.

Q. What happens if levels and types of activity are different to those anticipated?

- Response times will be monitored closely from the moment the service goes live on 1 October.
- A six-month review period has been agreed between all parties to ensure that demand and access times for the population are regularly monitored.
- This is important to allow us to assess the impact the changes make, and ensure the new arrangements remain clinically safe.

- Patient representation will be included this review process to provide their important perspective on how the service is performing. Commissioners and providers will also be providing updates to their public Board/Governing Body meetings so performance will be 'on the record'.

Questions about workforce

Q. What are the workforce implications?

- The range of services provided by Shropdoc will change significantly with effect from 1st October, mainly as a result of the switch of the triage element of the contract to NHS111 as well as changes required for the contract just awarded for the local service model. This has had an inevitable impact on their workforce.
- It is obviously an unsettling time for staff, however all opportunities are being considered to ensure skills are not lost to healthcare provision in Shropshire.