

**SUBMISSION TO NHS OVERVIEW & SCRUTINY COMMITTEE on 8 June 2007:
OUT OF HOURS SERVICE (OOHS) - STOURCARE COMMUNITY INTEREST
COMPANY**

1. Introduction & Summary

1.1 This issue which concerns the provision of out of hours GP services in the Canterbury and coastal areas was first drawn to your attention on 27 April 2006 having been referred by the then Canterbury and Coastal PPI Forum under Section 7.1 of SI 2003 No 2124, The Patient's Forum's (Functions) Regulations 2003.

1.2 On 23 March 2007 I attempted to bring you up to date but because of very tight time constraints I was able only to give a brief summary of the issues involved so that it was agreed to reschedule discussion for a subsequent meeting particularly as the final decision of the joint PCT, Stourcare and Forum Review Group was due that afternoon.

1.3 Before I explain in more detail the basic facts are:-

- Initially, in September 2005, the PCT announced that the Stourcare base in Herne Bay which served the whole area would close and OOHS move to KCH to co-locate with A&E. Following the Forum's challenge of this decision it was agreed that the service should co-locate with ECC at KCH and that a weekend service should remain at Herne Bay subject to a 6 month review.
- Co-location took place in September 2006 and the 6 month review has now been completed and following joint work between Stourcare and the Forum the PCT agreed on 27 March 2007 to the recommendation to maintain the status quo i.e. a main OOHS service co-located with ECC at KCH and a weekend service at Herne Bay.
- Although we have now reached a satisfactory conclusion for the people of Herne Bay and Whitstable the Forum felt that:-
 - a) you ought to be acquainted with the full details
 - b) the value of joint working between Forum and OSC should be highlighted and
 - c) you should be aware that a full review of the OOHS covering the new PCT catchment area will take place in 2008, the existing contractors i.e. Stourcare, MEDDOC and South East Coast having had their contracts extended to 31 March 2008 to accommodate this process.

2. Background

2.1 In January 2005 East Kent Coastal PCT and Canterbury and Coastal PCT signed a contract with Stourcare Ltd to provide out of hours medical services in the catchment areas covered by both PCTs. This replaced the service previously supplied by CANDOC which was run by local GPs and based at Chestfield Medical Centre.

2.2 The contract is particularly relevant and it is worth highlighting at this stage the

following pertinent paragraphs:-

Section 3 The Specification at paragraph 1 lists *Queen Victoria Memorial Hospital (QVMH) Herne Bay, Manston, Buckland Hospital Dover and Victoria Hospital Deal.*

Para 1.1 as a continuation of the list of premises says *Queen Elizabeth Queen Mother (QEQM), Margate and Kent and Canterbury Hospital (KCH) and other sites agreed between the PCT and contractor within the first year of operation.*

Paragraph 6.4.1 under the heading of services says *the contractor will open a second base for Canterbury residents at KCH and QEQM within the first year of the contract*

Paragraph 4.1 of Quality Standards says that *“The contractor will provide adequate primary care facilities to ensure that at least 85% of the patient population shall be within 30 minutes car traveling time to their closest base during evenings and weekends and 45 minutes care traveling time overnight.”*

2.3 Initially services were run from QVMH Herne Bay, Manston, Buckland Hospital and Victoria Hospital Deal but during 2006 medical services were moved from Manston to Queen Elizabeth Queen Mother Hospital Margate; the administrative base remaining.

2.3 In September 2005, as part of the Forum’s ongoing partnership or should that be critical friend of the PCT and Stourcare it was stated, for the very first time, that the base at Herne Bay would close and the OOHS move to KCH to co-locate with A&E.

2.4 As this was the first the Forum had learned of these plans we voiced our concerns but the point was made by the PCT that the plan had only ever been to cover one site.

2.5 As this was contrary to information we had received and contrary to the terms of the Contract we asked the PCT for an explanation and were told that and I quote:-

“it was clearly unfortunate that the contract with Stourcare does not reflect the intentions of the PCT” and that *“it was always the intention that the base at Herne Bay should transfer to KCH.....”*. *“This is in line with our strategic intentions for unscheduled care services”*.

But the then CE went on to say that he accepted that there was legitimate expectation that the base in Herne Bay would remain and invited the Forum to participate in a review of OOHS with respect to activity levels, patient access and cost. At the same time he added that pending the outcome of the review there would be no change to the current service.

3. Co-location Review

3.1 The Forum has participated in the Review which started in January 2006 as a demonstration of our good faith and of our desire to co-operate and endorsed the recommendations that emerged... in April/May that:-

- the PCT Board should review its decision to close the base at Herne Bay.
- co-location to Emergency Care Centre at KCH takes place as soon as possible
- a weekend service remains at Herne Bay.

But, and most critically the service should be formally reviewed after 6 months.

3.2 This endorsement was pragmatically based recognising the need to obtain statistical evidence of the impact of the change to inform future decisions. And acknowledged that co-location of unscheduled care services was recommended as best practice by DoH and part of the PCT's strategic plan.

3.3 However, the Forums involvement was without prejudice to any action that we considered was necessary regarding the Contract. Although, we did and still do appreciate the co-operation we had received and hopefully the partnership that has developed between ourselves, the PCT and Stourcare.

3.4 Unfortunately the Forum has no legal power to challenge the legality of action under a contract and acting on advice from Commission for Patient and Public Involvement in Health we referred the matter to the OSC. Hence your involvement in April 2006.

4. Co-Location

4.1 Following the co-location of the existing out-of-hours clinical services provided by StourCare at the QVMH, Herne Bay, to the KCH, Canterbury on 20 September 2006, a six month pilot project was undertaken to determine whether a clinical base service should remain on the coastal strip during the weekend and bank holiday periods. This project extended the level of clinical cover provided on weekends and bank holidays (courtesy of the former PCT, Canterbury and Coastal PCT) who funded two four hour GP sessions between the period of 09:00 and 17:00 on each respective day. These sessions are supported by a receptionist and this service works in partnership with the GP and Driver Team who, externally to this project, were retained within the coastal area in order to be able to effectively respond to home visits.

The six month pilot came to a close on 31.3.07. At the request of the PCT, the Forum worked jointly with Stourcare in establishing a method of study. All patients who proceeded to any point in Stourcare's treatment, beyond advice, were relevant to our study. This enabled the capture of:-

- Requests by clinician to attend base – accepted by the patient
- Requests by clinician to attend base – declined by the patient
- Patients who decline further treatment
- Patients who require home visits
- Patients who receive a home visit at the discretion of the GP due to the refusal to attend base

This was achieved through:-

- Statistical Analysis;

- Patient Feedback (Patient Satisfaction Questionnaire's); and,
- Monitoring of Complaints.

There were four periods of study all lasting for one month which provided: a benchmark through the assessment of the state prior to co-location; and, an assessment of the state post co-location. At the end of the pilot both Stourcare and the Forum made independent submissions to PCT and made recommendations for the future.

5. Outputs and Findings from Study

5.1 The following comments are on the Forum's observations and submission and the recommendations submitted to the PCT by Stourcare. Firstly the hard data:-

Evidence based data

5.2 One of the most revealing statistics is that for base appointments for the whole week which shows that 255 patients attended Herne Bay in Oct/Nov 06 of whom 132 were from Herne Bay, 83 from Whitstable and 40 from Canterbury out of a total of 668 who were dealt with by Stourcare ie 38% of total numbers. Or in other words 75% of Herne Bay patients went to Herne Bay base and 25% went to Canterbury; 61% from Whitstable went to Herne Bay compared to 39% who attended Canterbury base.

5.3 Alternatively from the PIE charts we can see that of the total patients who attended a base 58% went to Canterbury and 40% went to Herne Bay (Dover and Thanet figures are negligible). And, the percentages in favour of the latter are even more marked when we compare the figures on a pro rata basis as we understand Canterbury's attendance numbers are spread over a period of 118 hours while those for Herne Bay are for only 32 hours. In other words very nearly four times as many people might have attended Herne Bay base if the service had been available on an equal basis to Canterbury.

Patient Satisfaction Questionnaire

5.4 A Patient Satisfaction Questionnaire was produced to further inform our monitoring process with questions relevant to the project. The data collection methods employed ensured that all patients attending a base consultation received a questionnaire and a PSQ was also sent to a random selection of those patients who contacted our service but did not attend base. The completion of the PSQ was not compulsory and sadly resulted in a very low response of 4.6% but nonetheless shows that some patients from the Herne Bay and Whitstable areas still choose to use the base at Herne Bay because it is more local to their homes.

5.5 It is also interesting to note that opening the base at Canterbury and leaving a limited service in Herne Bay has had little or no effect on the number of home visits to either Herne Bay or Whitstable; the figures for October 2006 are virtually the same as the same period in 2005.

Complaints

5.6 There were no complaints received by Stourcare during the study period which

relate to the remodelling of this service.

Other information - demography

5.7 The coastal area is populated by a considerable number of older people. The access to local care and the need for social support required by these patients is considerably greater at times of ill health, especially those that live alone and/or are unsupported by friends or family who live locally.

Access

5.8 During the weekday period patients from the coastal area said that travel times were less than 30 minutes and they did not have difficulty in travelling to the KCH. But the 5 responses received from those patients who live in the coastal area, all indicated that they would have preferred to have attended the QVMH rather than the KCH because they found the QVMH more accessible, with neighbours/friends being more willing to drive patients this shorter distance.

5.9 Stourcare's have pointed out that their Contract/Service Level Agreement states that: *"the contractor will provide adequate primary care facilities to ensure that at least 85% of the patient population shall be within 30 minutes car travelling time to their closest base during evenings and weekends and 45 minutes car travelling time overnight."* They acknowledged that during the weekday period travelling to the KCH is achievable within these guidelines, but say that weekend travel to the KCH for those patients residing on the coastal strip would fall outside of these guidelines.

5.10 Stourcare also indicated that without the base service at QVMH, the subsequent increase in travelling time for patients could result in an increased number of complaints which might reduce their effectiveness and efficiency as a consequence of an increased demand on home visits. This shift in working pattern could result in StourCare not being able to achieve its quality standards as the rise in home visits on the coastal strip could increase by up to 30 a day over the weekend and bank holiday periods.

Patient Choice and NHS reform

5.11 Stourcare also highlighted the fact which the Forum supports that the reforming of the NHS to be more responsive to patients' needs has established, through the NHS plan and public consultations (such as Our Health, Our Care, Our Say), that care needs to be accessible, faster and more convenient to where people live. Patients are said to experience better health outcomes when they are more involved in the decisions on where treatment is accessed. Patients residing on the coastal strip will not have any choice as to where to receive primary care out of hours if there is only a KCH option available and this also contradicts the principle of care being closer to home.

Additional factors from Stourcare

5.12 Finally, in their submission Stourcare pointed out that:-

- a) East Kent is a Department of Health Demonstration Site for Urgent Care. This process is radically reviewing all aspects of the urgent care pathway. Out of Hours services are a key part of this process of review and it may be

considered appropriate to wait until the new service model has been proposed before any significant change is recommended.

(b) from the 1st April 2007, StourCare will have only one year remaining on its contract

c) discussions are underway for their co-located centre at the KCH to expand its role in supporting the Hospital Trusts' Minor Injury Unit and the removal of the additional service could adversely affect Stourcare's ability to support this, and subsequent, service improvement(s).

6. Recommendations

6.1 Both the Forum's and Stourcare's recommendations to the PCT based on the above were to maintain the status quo. In other words:-

- **Retain Visiting GP & Driver Team at Herne Bay**
- **Retain Current Base Service at Herne Bay: Weekends and Bank Holidays**

6.2 At the Review Group meeting on 23 March 2007 the PCT tentatively accepted these recommendations and formal acceptance was received a few days later on 27 March 2007.

7. Conclusion

7.1 Thank you for giving me the opportunity to cover this topic in the depth it deserves. Although we have now reached a satisfactory conclusion for the people of Herne Bay and Whitstable, from the Forum's perspective it demonstrates that without our intervention and your (OSC)involvement the following would have occurred:-

- an apparent legal contract can be put to one side and the recommendations ignored; in fact dismissed as never being the original intention
- people of the coastal areas would have been disadvantaged
- closure would have occurred without any apparent consultation with patients or public.

7.2 On the other hand it also demonstrates that with the subsequent consultation a satisfactory partnership between PCT, contractors and the Forum can be achieved to ensure patients and public get the service they need. It also shows the value of joint working between Forum and OSC.

7.3 And finally as I mentioned when I first started we need to be aware that a full review of the OOHS covering the new PCT catchment area is scheduled to take place in 2008 and both Forum, OSC and patients and public should be involved from the start in the consultation process.

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Canterbury & Coastal Locality Group
Eastern & Coastal Patient & Public Involvement Forum

5/06/2007

Appendix 1 - Patient Questionnaire

We are undertaking some analysis on patients' access to our bases. We would be very grateful if you would be willing to answer the questions below. Your comments will be kept in confidence and you are not obliged to disclose your identity. Should you choose to disclose your identity, any analysis conducted as a result of this survey will not be identifiable to you personally, nor will your identity be disclosed to any person or organisation outside of StourCare.

Your Name: (Optional) _____

If you are the patient, please fill in the details below:

If you are not the patient please give the patient's details.

Age:			
Gender:	<table style="border-collapse: collapse; width: 100%;"> <tr> <td style="border: 1px solid black; width: 50%; text-align: center;">Male</td> <td style="border: 1px solid black; width: 50%; text-align: center;">Female</td> </tr> </table>	Male	Female
Male	Female		
Post Code:			

	Please Tick ✓	
	Yes	No
On contacting StourCare, were you given clear instructions on how to find us?		
Did you use your own vehicle?		
Did a relative, friend or neighbour drive you to the base?		
If applicable, were parking facilities available to you?		
Were the parking facilities close to the place that you saw the doctor?		
Did you use public transport?		
Was the public transport adequate?		
Did you travel by taxi?		
Did your journey take :		
• 45 minutes or less overnight (i.e. 2300 – 0800)		
• 30 minutes or less in the evening (i.e. 1830 – 2300)		
• 30 minutes or less at weekends (i.e. 0800 – 1830)		
If outside these travel time ranges, how long did your journey take you?		
Which base did you attend?	Margate Canterbury Herne Bay Dover Deal	
Why did you choose this base?		

What time of day (approximately) did you initially contact the StourCare service?		
Was it a weekday or weekend?		
Were you offered an earlier appointment than the one that you attended?	Yes	No
Can you remember the time of the earliest appointment that you were offered?	Yes	No
If so, when?		

Is there anything else you would like to add in relation to the questions asked above?

Thank you very much for participating in this survey. Your comments are valuable to us in our aim to continually improve the services that we offer.