Urgent Care in Hull
Public Consultation Report
November 2016
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Executive Summary

NHS Hull CCG has undertaken a comprehensive programme of engagement to involve the public, service users and carers, elected representatives, and other stakeholders and partners in the development of plans for Urgent Care across the City; and the development of an Urgent Care Centre located in Bransholme, in the North of the City.

The information gathered during the pre-consultation engagement phase has been used to shape the CCG’s final proposal for the development. The proposals were presented to the public and stakeholders during a 12 week period of formal consultation; this document is the report on the outcome of that consultation.

The consultation period ran from 15th August 2016 until 6th November 2016. As part of the consultation, service users and the general public were asked about their views of current urgent care services; and to what degree they agree or disagree with the proposed changes to urgent care services and the reasoning behind the proposals. Three options were presented and the participants in the consultation were asked to put them in order of preference, the options were:

1. Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre, with no health services based at the Freedom Centre.

2. Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre. Work with local residents on what health services can be developed at the Freedom Centre, based on the needs of children and families.

3. Do nothing and keep the current service locations, opening times and access times as they are, without the development of an 24/7 urgent care centre and without extended access to X-ray.

The information to support the consultation was set out in a 12 page consultation document which included a four page questionnaire. All information relating to the proposals and the questionnaire were also made available online via the CCG’s website. In addition a series of public meetings, drop in sessions, and information roadshows were held.

Key activity and its impact

- The consultation as a whole achieved over 1642 primary contacts; i.e. those who completed a questionnaire, attended a public meeting or engaged at a drop in session. A total of 741 completed questionnaires were received.

- The overall reach of the consultation was extensive and it is estimated that information on the proposals were seen around 1.2 million times via local media (newspaper and radio stations), via social media or on NHS Hull CCG’s website.

- 10,000 consultation documents were distributed to GP practices, pharmacies and other healthcare premises as well as Customer Service Centres, schools and community venues across Hull.
Residents in the areas that would experience the most change as a result of the proposed changes (HU7, HU8 and HU9) were specifically targeted; to ensure they had opportunity to have their questions answered and their views heard. Increased promotion of the consultation, drop in sessions and public meetings were held in these areas.

Based on the Equality Impact Assessment, targeted work was undertaken to promote the consultation and encourage responses from the following groups: parents of younger children, the Eastern European Community and the LGBT community.

In addition to the targeted work, public meetings were held across the City as well as general awareness raising roadshows held in local supermarkets and shopping centres.

Key stakeholders were identified and invited to give their views on the proposals and a number of briefing sessions have been held with clinicians and service providers.

The majority of people who completed the consultation questionnaire agree with the proposals to consolidate Urgent Care services into a single 24 hour a day, 7 day a week, Urgent Care Centre with enhanced diagnostics located within Bransholme Health Centre. Specifically they believe that:

- Urgent care should be available 24 hours a day 7 days a week (97.41% agree or strongly agree)
- People should be seen, diagnosed and treated all in the same place (95.69% agree or strongly agree)
- Something needs to be done to reduce the pressure and waiting in Accident and Emergency (98.14% agree or strongly agree)
- The current Urgent Care Service is too complicated; it is difficult to know where to go and when. (68.82% agree or strongly agree)
- The preferred option for the majority of respondents is option 2, the most popular second choice being option 1. It is clear that respondents would prefer relocating urgent care services to Bransholme rather than services remaining in their current configuration (63.78% of people 1st choice option 2)

1. The issues highlighted through free text responses and public sessions can be grouped into three main areas:
   - The location of the Urgent Care Centre, and people’s ability to travel.
   - Education and publicity, for both healthcare staff and the general public.
   - Additional services, and requirements for the building and it’s environment.

The formal responses from statutory bodies and partners were largely supportive of the proposed changes to urgent care, although there were some concerns relating to those unable to travel to the new service if it is moved to the North of the city. Of those that gave a view on which option would be preferred, formal responses identified option 2 as the preferred option, ensuring that some appropriate services be maintained at the Freedom Centre.
Introduction

Urgent Care is when an injury or illness needs immediate care, but is not serious enough to visit an Accident & Emergency department.

NHS Hull CCG has engaged with patients and the public leading up to this formal consultation; through the People’s Panel,* and urgent care service user engagement that formed part of the Community Services Patient Experience Data Pack (2015). The insight gained from these activities has helped design the proposal for Urgent Care that NHS Hull CCG has consulted on. We have gained the following insight into the general public’s experiences and preferences relating to Urgent Care.

Although chart 1 shows respondents indicated that it was important to them that Urgent Care was provided close to their home, the People’s Panel (Jan 2014) found that 69% of respondents would be willing to travel to another part of the city.

Apart from “close to where I live” the other aspects of service that people felt were most important related to service provision rather than location; seeing a doctor or healthcare professional face to face, and being seen and treated in the same place.

Urgent Care service users were asked how they travelled to service, chart 2 shows that the majority of people accessing urgent care travel by car, although some travel by public transport this does not mirror their day to day behaviour.

* The People’s Panel is a joint programme with Hull City Council. It is made up of approximately 3000 people from across Hull who are sent a questionnaire 4 times a year about different issues.
Over 92% of People’s Panel respondents (Jan 2014) agreed that urgent care should be available at all times, including evenings and weekends.

Chart 3 shows that people would prefer to access urgent care by walk-in rather than appointment or home visit.

Following an extensive review of the existing NHS estate in Hull, Bransholme Health Centre was identified as the preferred location for an Urgent Care Centre. It was the only existing NHS building that could accommodate an x-ray facility and the staff required to deliver the service. It is on the same site as North Point Shopping Centre which has good public transport links, and has a large free car park, see chart 1 (page 5).

The goals of this consultation are:

1. To determine if the public support the following improvements to Urgent Care:
   - A service that is open 24 hours a day, 7 days a week; reducing the existing confusion when deciding which service a person should access when they have an urgent care need.
   - To improve diagnostics in Urgent Care by having an x-ray facility on site; to ensure that patients are seen, diagnosed and treated in the same place where possible.
   - To reduce the pressure and waiting times in Accident and Emergency, by giving the public an appropriate alternative to Accident and Emergency.

2. To determine if the public support the preferred location of the proposed Urgent Care Centre by asking their preferred option:
   - Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre, with no health services based at the Freedom Centre.
   - Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre. Work with local residents on what health services can be developed at the Freedom Centre, based on the needs of children and families.
   - Do nothing and keep the current service locations, opening times and access times as they are, without the development of an 24/7 urgent care centre and without extended access to X-ray.

3. To identify any issues the public and stakeholders can foresee with the proposed changes.
Urgent Care and the proposed changes

What do we have now?

Minor Injuries Units
A minor injuries unit (MIU) is a type of walk-in service to treat minor injuries such as strains, sprains, stitches. Currently there are two in Hull, neither have an x-ray facility.

1 Bransholme Health Centre
   Goodhart Road, HU7 4DW
   Opening
   Monday - Sunday 9am-8pm
   Including: Bank Holidays, Christmas Day, Boxing Day and New Year’s Day.

2 Freedom Treatment Centre
   Preston Road, HU9 3QB
   Opening
   Monday – Friday 9am-5pm
   Saturdays, Sundays and Bank Holidays - Closed.

GP out of hours services
Provides access to a GP outside normal surgery hours, the out-of-hours period is from 6.30pm to 8.00am on weekdays and all day at weekends and on bank holidays. The GP out of hours services accessed via NHS 111.

3 Diadem Health Centre
   Diadem Grove, HU9 4AL

Other services

5 GP walk-in centre
   Wilberforce Health Centre, HU1 3SA
   Opening
   8 am to 8 pm, 7 days a week
   (including bank holidays)
   Can treat registered and non-registered patients without an appointment.

What are the proposed changes?

We propose to relocate the minor injuries units, and the GP out of hours service at Diadem Health Centre (services 1, 2 & 3 listed above) onto one site within an integrated urgent care centre which would offer minor injuries care and out of hours GP services 7 days a week, 24 hours a day, and better access to x-ray services within the community. This Would be based at Bransholme Health Centre.
How we have listened

Methods

The consultation was supported by the printing and distribution of 10,000 copies of a 12 page consultation document (appendix ii, page 18) which was distributed to GP practices, pharmacies and other healthcare premises as well as Hull City Council Customer Service Centres and other community venues across Hull. These were also placed in existing Urgent Care Services. The consultation document contained a 4 page questionnaire and the questionnaire was also available on-line (appendix iii, page 20).

The consultation was promoted at five supermarket road shows, three half page adverts in the Hull Daily Mail, and with some of the largest employers in the City; including Siemens, Sewells, BP Saltend and Greencore. The supermarket roadshows took place:

- Prospect Centre 23rd August
- St Stephens Shopping Centre 8th September
- North Point Shopping Centre 14th September
- Asda Kingswood 18th October

Initially four public meetings were held in the following locations and times, these were promoted on the back of the consultation document as well as on flyers and posters.

- East Hull
  Freedom Centre, Preston Road HU9 2QB
  3:00pm - 5:00pm, Thursday 25th August

- West Hull
  Lonsdale Community Centre
  2:00pm - 4:00pm, Monday 19th September

- North Hull
  Bransholme Methodist Church
  1:00pm – 3:00pm, Monday 5th September

- Central Hull
  Kardomah, Alfred Gelder Street
  11:00am – 1:00pm, Saturday 17th September
The aim of these sessions was to present the planned changes and improvements, and answer any questions the public may have had, in public, and encourage completion of the questionnaire. Initially two drop in sessions were also arranged, however, as the formal public meetings were not as well attended as hoped, a number of additional drop-ins were arranged making thirteen in total. Some of these sessions were planned at times when community facilities were busy with groups and activities. The aim of these sessions was to be on hand for anyone to ask questions and complete the questionnaire:

- Trinity House Academy, HU1 3BP, 4:30pm - 6:00pm, 13th September
- Freedom Centre, HU9 3QB, 10:00 - 4:00pm, 5th October
- Freedom Centre, HU9 3QB, 2:00pm - 7:00pm, 6th October
- St Phillips Church Hall, HU9 4JG, 1:00pm - 6:00pm, 10th October
- Brickworks, HU1 3SA, 1:30pm - 3:30pm 11th October
- Artlink, HU5 3QP, 6:00pm - 8:00pm 13th October
- Kingswood Academy, HU7 4WR, 6:00pm - 8:00pm, 17th October
- Victoria Dock Village Hall, HU9 1TL, 9:30am - 12:30pm, 18th October
- Unity in the Community, HU6 8AQ, 2:00pm - 5:00pm, 26th October
- Gipsyville Library, HU4 6JA, 11:00am - 1:00pm, 28th October
- Sirius Academy North, HU6 9BP, 6:00pm - 7:00pm, 31st October
- Sirius Academy West, HU4 7JB, 6:30pm – 7:30pm, 1st November
- Ings Resource Centre, HU8 OTX, 11:00am - 1:30pm, 3rd November

As the service model for the proposed Urgent Care Centre was well defined, effort was focused on completion of the questionnaire. The public meetings, drop in sessions, and supported sessions were to ensure that people were fully aware of the proposed changes and improvements; and had the opportunity to ask questions relating to the proposal, and complete the questionnaire.

Groups identified by the Equality Impact Assessment

Working with community groups that we have established links with, nine supported sessions were run for people who may find it difficult to take part in consultations, or are easily overlooked. Supported sessions were run with; BME groups, groups that support those with sensory impairment, and organisations working with older people.

For people whose first language is not English, NHS Hull CCG worked with Humber All Nations Alliance (HANA), to have all the consultation resources and questionnaire translated online, into 67 different languages.

The equality impact assessment identified three groups with protected characteristics that are high users of urgent care service or those that may find it difficult to access urgent care services. The three groups were; parents with young children, Eastern Europeans, and the LGBT community.

We promoted the consultation to parents of young children by working with primary schools across the city; by putting promotional material in the children’s book bags. We also ran a supported session with a BME Mums group and engaged with the Eastern Europeans through our ongoing work with HANA. To reach out to the LGBT community we worked through a local organisation ‘One Humber’, and also directly with LGBT groups, to share the links to the information on our website.

The distribution of respondent characteristics can be seen in appendix i (page 16)
Statutory organisations and partners

All statutory organisations in Hull and our partner organisations were written to and sent a copy of the consultation document for their comments. NHS Hull CCG has kept the Health and Wellbeing Overview and Scrutiny Commission up to date with each stage of the engagement and development of the proposed model for Urgent Care; from the initial engagement as part of the work around community services and the proposal of this consultation. NHS Hull CCG also have been in regular attendance at Local Area Committees and Area Partnership Meetings in the east of the city in the run up to, and throughout, the consultation, to keep local councillors and community partners up to date.

Consultation Reach

The estimated reach of this consultation is 1.2 million opportunities for people to read or hear about the planned changes for Urgent Care in Hull, with the call to action being to share their views by completing a questionnaire or attending one of a number of sessions across the city.

Primary Contacts
The total numbers of primary contacts were 1642, this includes all the completed questionnaires (741) and all the people who attended a public meeting, drop in session, support session or engaged with us at the supermarket roadshows (901).

Traditional Media
NHS Hull CCG were successful in gaining coverage about urgent care and our consultation in The Hull Daily Mail, BBC Radio Humberside, Viking FM, KCFM, and Hull Kingstown (Community) Radio. Reaching an estimated collective audience of 1.1 million people in Hull and the surrounding areas. A full breakdown of media coverage can be seen in appendix iv (page 24). Articles were also sent to local partner organisations for inclusion in internal communications.

Social Media
The two primary social media routes used were Twitter and Facebook; a video of the presentation outlining the proposed changes and improvements in urgent care was shared via YouTube. A full breakdown of activity can be seen in appendix v (page 25). The potential reach via the CCG’s own social media, which is monitored by Hull CCG, is slightly over 95,000 people. We also contacted 53 partner organisations and other community groups who have a social media presence, to ask if they would share content for us. Although NHS Hull CCG cannot monitor this directly, there is a potential reach of 138,000 people, however this has not been included in the overall reach.
Analysis of Feedback

Case for change

Charts 4 - 7 show how much respondents agree or disagree with statements relating to current urgent care services.

68.82% believe current urgent care services are too complicated, finding it difficult to know which service to use and when (chart 5); 17.01% of respondents disagree. 98.14% of respondents feel something needs to be done to reduce pressure and waiting times in Accident and Emergency, 2 people (0.29%) disagree (chart 7).

97.41% agree urgent care should be available 24 hours a day, 7 days a week (chart 4). 95.69% of respondents agree people should be seen, diagnosed and treated in the same place as much as possible (chart 6).

These charts demonstrate that the majority of people agree with the objectives that have informed the proposed improvements to urgent care services in Hull.
Respondents were asked to place aspects of service in order of importance (chart 8). The most important aspects related to service provision: open 24 hours a day 7 days a week, seeing a doctor or health professional face to face, being seen and treated in the same place, having diagnostics in the same place. Those that were rated least important from the list related to service location.

### Options

Respondents were presented with the following options:

1. Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre, with no health services based at the Freedom Centre.

2. Relocate the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 urgent care centre at Bransholme Health Centre. Work with local residents on what health services can be developed at the Freedom Centre, based on the needs of children and families.

3. Do nothing and keep the current service locations, opening times and access times as they are, without the development of an 24/7 urgent care centre and without extended access to X-ray.

Chart 9 shows that option 2 is the preferred option for the majority of respondents (63.78%), the most popular second choice being option 1. It is clear that respondents would prefer relocating urgent care services to Bransholme rather than services remaining in their current configuration.
Charts 10 - 12 show the results broken down by postcode; the postcode areas shown are those that will experience the largest change under the proposals.

Additional comments about the proposals

Respondents were asked if they had an alternative option for urgent care, or any other comments about the proposals, the full responses can be seen in appendix vii (page 27). The responses included some positive comments about the plans, suggestions about what should be provided at the Urgent Care Centre, and a number of negative comments about the proposals. The responses can be grouped into three main themes:

4. The location of the Urgent Care Centre.
5. Education and publicity.
6. Service provision and delivery.

Location

There were a number of comments opposing moving existing services to Bransholme. A number of comments wanted the proposed improvements (increase opening and diagnostics) but in existing locations. This option was not offered to the public as there is not enough of a staff resource to cover three 24/7 urgent care services, nor are there enough qualified staff in the local area to recruit to the additional roles that would be required. The demand through the night in three locations would not justify three fully staffed centres. There were also requests to consolidate the services at Diadem Health Centre or the Freedom Centre, neither of these options were offered to the public as neither location could accommodate an x-ray facility and the extra staff without additional building works.

A number of comments felt other locations would be better than Bransholme, some of those felt that locations in addition to Bransholme would be required. Provision in a more central location was the most frequent suggestion; sites suggested included: Wilberforce Health Centre, Hull Royal Infirmary, Health Central (St Stephens Shopping Centre). Respondents also expressed concern at the lack of provision in the west of the city, expressing the view that people will attend A&E because it is closer.

Travel was also highlighted as an issue relating to the location of the service. A number of comments suggested that for many people taxi fares would prohibit attendance at the Urgent Care Centre, and that public transport links from the east of the city to Bransholme were poor.
Education and Publicity
The need for an extensive publicity campaign notifying the public of the changes to urgent care was highlighted. It was felt that a campaign should be aimed at staff in NHS and partner organisations as well as the general public. It was suggested that the campaign should encourage people to not attend A&E inappropriately as well as identify alternatives to A&E. It was also suggested that part of the campaign should involve a leaflet to every home in the city.

Service Provision and Delivery
Respondents highlighted additional requirements for the Urgent Care Centre. A number hoped that urgent mental health services would be provided at the Urgent Care Centre. Concern was raised that the service should involve appropriate triage and enough staff to avoid the delays currently experienced in A&E. The security and safety of the Bransholme site was raised as a concern, particularly as those attending the Urgent Care Centre may be in a vulnerable state. Respondents hoped that the Urgent Care Centre would be accessible for those with mobility issues, and be a dementia friendly environment. Clear signage and infant changing facilities were also highlighted as requirements.

Formal Responses
Statutory organisations and partner organisations were asked to give a formal response the proposed changes for Urgent Care Services, a list of those organisations that responded can be found in appendix vi (page 26).

The majority of responses were supportive of the plans for urgent care in Hull, and felt that the proposals aligned with NHS Hull CCG’s wider goals to improve the health of the city and services to support this. A number of partners, including those that were not entirely supportive of the proposals stated that they were looking forward to being involved in developing more integrated and improved services. The level of patient and public involvement in the development of the plans and the extent of consultation were also praised.

The particular health needs of those living in the east of the city were raised by organisations that represent and operate services for those communities. Some of these issues will be addressed by the development of the Integrated Care Centre on the David Lister School site in east Hull. Some formal responses mirrored those of the public around concerns that people may not be able to afford to travel to the new Urgent Care Centre.

Of those who gave a view on which option would be preferred, formal responses identified option 2 as the preferred option, ensuring that some appropriate services be maintained at the Freedom Centre.
Conclusion

- The majority of respondents agree with the reasons for improving Urgent Care Services; Urgent Care Services should be available 24 hours a day 7 days a week, people should be diagnosed and treated in the same place where possible, pressure on waiting times in Accident and Emergency should be reduced, and the current configuration of Urgent Care Service is confusing and difficult to navigate.

- The relocation of the minor injuries unit from the Freedom Centre, and the GP out-of-hours from Diadem Health Centre to create a 24/7 Urgent Care Centre at Bransholme Health Centre, while maintaining some health services at the Freedom Centre is the preferred option for the majority of respondents. The relocation of the minor injuries unit and the GP out-of-hours service to create an urgent care centre at Bransholme Health Centre, with no health services based at the Freedom Centre is the second most popular choice. It is clear that respondents would prefer relocating urgent care services to Bransholme rather than services remaining in their current configuration. These findings where not significantly different when looking at the results by location.

- Additional engagement with the communities surrounding the Freedom Centre should be undertaken to determine what health services could be appropriately offered at the Freedom Centre.

- There were concerns raised relating to the proposed location of the improved urgent care service these related to:
  - Accessibility by public transport
  - Security

  Although we have found that service users don't tend to travel to urgent care services by public transport, there are some that do; the concern is that those who do not have access to other forms of transport will attend Accident and Emergency rather than the Urgent Care Centre.

  A number of respondents questioned the location of the proposed Urgent Care Centre; with some querying why a service is not being located more centrally in the city, or if provision in the west of the city had been considered.

- Following any changes to urgent care, access to the Urgent Care service and Accident and Emergency should be monitored to ensure a two tier system, of those who can afford to travel and those who cannot, has not been inadvertently created, and to determine if additional provision is required in other locations in the city.

- A number of respondents praised the existing urgent care services; it is recommended that following any changes to urgent care services, service user experience be monitored to ensure that the quality of service is maintained. This intelligence would also give insight into future service requirements.

- Any changes to urgent care services will require an extensive promotion aimed at both residents and health professionals.
Appendices

i. Demographics of respondents

Appendix (i)

Demographics of Respondents

Demographics roughly reflect the demographics of Hull, with the exception of gender; women are more likely to give their feedback and experience. It is recommended that the Equality Impact Assessment is revisited following the

Distribution of Service User Characteristics

![Chart 13: Age of respondents](image1)

![Chart 14: Ethnicity of Respondents](image2)

![Chart 16: Religion / Beliefs of Respondents](image3)

![Chart 17: Gender of Respondents](image4)
Are your day to day activities limited because of a health problem or impairment which has lasted, or is expected to last at least 12 months? (n=644)

- Yes, limited a little: 25.93%
- Yes, limited a bit: 13.35%
- No: 58.70%
- Prefer not to say: 0.77%

Do you identify with any of the following impairment groups? (n=336)

- Other (please specify): 25.89%
- Prefer not to say: 16.96%
- Hidden impairment (including diabetes): 21.13%
- Dementia (including Alzheimer's disease): 2.08%
- Autistic Spectrum Disorder: 1.49%
- Neurological impairment (including epilepsy and brain injury): 7.14%
- Medical related impairment (including HIV and Cancer): 5.95%
- Mental health condition: 15.77%
- Hearing impaired, hard of hearing or deaf: 10.71%
- Visually impaired, partially sighted or blind: 7.44%
- Cognitive or learning difficulty: 5.68%
- Personal assistant user: 4.76%
- Mobility impairment (not a wheelchair user): 24.11%
- Mobility impairment (wheelchair user): 10.71%
Appendix (ii)
Consultation document

Urgent Care in Hull

This booklet will provide you with information about our proposals around the nature of urgent care services in Hull.

We want to hear your views

The consultation period will run from 15 August – 6 November 2016.

See inside for details on how you can have a say.

Introduction

What urgent care services are currently available in Hull?

- Grimsby Health Centre
  - Open Monday to Thursday 8am to 4.30pm, Friday 8am to 3pm, Saturday 8am to 12pm
  - Free treatment centres located
  - Out of hours service located at Grimsby Health Centre

Other services:

- Grimsby health service located at 31 Clarke Street Practice
  - Open Monday to Thursday 8am to 4.30pm, Friday 8am to 3pm, Saturday 8am to 12pm
  - Free treatment centres located
  - Out of hours service located at Grimsby Health Centre

What would change under the proposals?

- Propose to relocate services:
  - 2 & 3 listed above were one site, which would become an urgent care centre.
  - Out of hours service would be relocated to a different site.
  - New site would be located at a different site.

The consultation period will run from 15 August – 6 November 2016.

See inside for details on how you can have a say.

Why do urgent care services in Hull need to change?

At a national level there is a desire for the NHS to:

- Develop a more integrated urgent care system that ensures patients are treated in the most appropriate setting for their needs.
- Develop a more integrated urgent care system that ensures patients are treated in the most appropriate setting for their needs.
- Improve the experience of urgent care services in order to reduce unnecessary admissions and ensure patients access the right service, first time.
- Improve the experience of urgent care services in order to reduce unnecessary admissions and ensure patients access the right service, first time.
- Ensure greater access to accident and emergency departments by reducing patients with minor symptoms either in primary care or in the community.

The new Urgent Care Centre (UCC) is planned to be open Monday to Thursday 8am to 4.30pm, Friday 8am to 3pm, Saturday 8am to 12pm.

The consultation period will run from 15 August – 6 November 2016.

See inside for details on how you can have a say.
Urgent Care centres offer fast and convenient treatment for less serious injuries. Many people go to Accident and Emergency when they could be treated just as well and probably quicker at an urgent care centre or walk-in clinic.

No appointments are required and patients are managed by specialist medical staff who have experience and expertise in the management of minor injuries, working within a safe, caring environment. Here are some patients who have used minor injuries services in the past share their thoughts:

“My eye is a bit better after using my eye drops they recommended and have helped me immensely. Soothing happy with the service I was provided with was a very happy person. Thanks ladies”

“Friendly staff. Very good service. I came in very quickly and thorough and everything was explained very well. The doctor was very friendly and made sure I was comfortable with everything. They also explained the procedure very well. Thank you!”

“My local walk-in clinic is very welcoming and friendly. The environment is also quiet and they helped me feel immediately. Soothing happy with the service I was provided with was a very happy person. Thanks ladies.”

“Comfortable waiting room. Polite and friendly staff. Good treatment given, when I was feeling quite stressed - it felt reassuring by the Nurse who was very understanding.”

“I was seen very quickly – only waited about twenty minutes. The nurse, who I saw very quickly and was very efficient, examined a small piece of glass from my eye and removed it. I am grateful for her assistance. I will definitely return. Can’t recommend them enough. Very happy customer. Well done.”

“Professional and polite reception, clear and friendly. Pleasant ambiance to the premises. Good treatment and advice from duty nurse. I don’t come with a sympathetic, caring, yet efficient manner.”

“I was surprised by how efficient the service is. It was very quick and efficient, and the staff were very helpful. I would definitely recommend this place to others. Thanks to all the staff for their excellent service.”

“Provisional and polite receptionist, clear and friendly. Pleasant ambiance to the premises. Good treatment and advice from duty nurse. I come with a sympathetic, caring, yet efficient manner.”

“Amazing facility with minimum waiting time. Access to experienced, caring and friendly hands professions.”

*My Health Care Partnership 2016*
Appendix (iii)
Consultation Questionnaire

Questionnaire

We are keen to hear your views on our proposals. Please take time to complete the survey and then fold the questionnaire as indicated and return it to us – no stamp needed. If you prefer, you can complete the survey online at www.hullccg.nhs.uk

Q1. Which of the following services have you used in the last 12 months, and why did you use them?

<table>
<thead>
<tr>
<th>Service</th>
<th>For yourself</th>
<th>For a child you care for</th>
<th>For an adult you care for</th>
</tr>
</thead>
<tbody>
<tr>
<td>A&amp;E (accident and emergency)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pharmacy (treatment or advice)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>GP Out of hours service</td>
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<td></td>
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<tr>
<td>Minor Injury Unit</td>
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<tr>
<td>NHS 111</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Emergency care practitioner (ECP) or responder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None of the above</td>
<td></td>
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</tbody>
</table>

Q2. Where did you obtain this document?

Q3. In what capacity are you responding

- Patient
- Carer
- Local resident
- Member of the public
- Clinician / healthcare staff
- Partner organisation
- Other

Q4. Please put these things in order of what you think is important in an urgent care service (1 being most important, 10 being least important)

- Being seen and treated in the same place
- Having diagnostics in the same place (X-ray)
- Open 24 hours a day, 7 days a week
- Close to other health services (Late pharmacy, hospital)
- Close to where I live
- Seeing a doctor face to face
- Seeing a nurse / healthcare professional face to face
- Accessible by public transport
- Accessible by car
- Good car parking
- Other
How much do you agree with the following statements?

Q5. The current out of hours and urgent care services are too complicated – it is hard to know which service to go to and when.

☐ Strongly agree
☐ Tend to agree
☐ Neither
☐ Tend to disagree
☐ Strongly disagree

Q6. Urgent care should be available at all times, 24 hours a day, 7 days a week.

☐ Strongly agree
☐ Tend to agree
☐ Neither
☐ Tend to disagree
☐ Strongly disagree

Q7. People should be seen, diagnosed and treated all in the same place as much as possible.

☐ Strongly agree
☐ Tend to agree
☐ Neither
☐ Tend to disagree
☐ Strongly disagree

Q8. Something needs to be done to reduce pressure and waiting times in accident and emergency.

☐ Strongly agree
☐ Tend to agree
☐ Neither
☐ Tend to disagree
☐ Strongly disagree

Q9. Please put these options in order of preference, 1 being the most preferred, 3 being the least preferred.

☐ Move the minor injuries unit from the Freedom Centre, and the GP Out of hours from Diadem Health Centre to create a 24/7 Urgent Care Centre at Bransholme Health Centre, with no health services based at the Freedom Centre.

☐ Move the minor injuries unit from the Freedom Centre, and the GP Out of hours from Diadem Health Centre to create a 24/7 Urgent Care Centre at Bransholme Health Centre. Work with local residents on what health services can be developed at the Freedom Centre, based on activity and need.

☐ Do nothing and keep the current service locations, opening times and access times as they are, without the development of a 24 hour urgent care centre and without extended access to X-ray.

Q10. Please use the space below if you have an alternative idea for urgent care.

Q11. Please use the space below to make any further comments about the proposed changes or urgent care in general.
About You

We know that people from different age groups, ethnic groups, religions, and sexualities access healthcare in different ways, they have different health needs and sometimes have differing experiences of care. By telling us a little about you, we can make sure that everyone has the opportunity to receive care in a way that is most appropriate to them. If you don’t want to answer any of the questions please select “Prefer not to say”. Your responses to this section will be completely anonymous.

Q12. What is your postcode?

Q13. Which GP Practice are you registered with?

Q14. What is your year of birth?

Q15. Which of the following best describes your ethnic background?
- White / English / Welsh / Scottish / Northern
- Irish / British
- White other (Please specify in the space below)
- Asian / Asian British
- Black / Black British
- Mixed / Multiple Ethnic group
- Prefer not to say
- Other

Q16. What is your religion, belief or faith?
- No religion
- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- Sikhism
- Prefer not to say
- Other

Q17. What is your gender?
- Male
- Female
- Transgender
- Prefer not to say
- Other, please describe

Q18. What is your sexual orientation?
- Heterosexual (Straight)
- Bi-sexual
- Gay / Lesbian
- Prefer not to say
- Other

Q19. Are your day to day activities limited because of a health problem or impairment which has lasted, or is expected to last at least 12 months?
- Yes, limited a little
- Yes, limited a lot
- No
- Prefer not to say

Q20. Do you identify with any of the following impairment groups?
- Mobility impairment (Wheelchair user)
- Mobility impairment (Not a wheelchair user)
- Personal assistance user
- Cognitive or learning difficulty
- Visually impaired, partially sighted or blind
- Hearing impaired, hard of hearing, or deaf
- Mental Health condition
- Medical related impairment (including HIV and Cancer)
- Neurological impairment (including epilepsy and brain injury)
- Autistic Spectrum Disorder
- Dementia (Including Alzheimer’s disease)
- Hidden impairment (including diabetes)
- Prefer not to say
- Other

Q21. Is there anything else about yourself that you think may have an impact on your healthcare needs?

GETTING INVOLVED

If you would like to be more involved in the future, please provide details below. To keep your responses anonymous, this information will be separated from the section above before processing.

Daytime telephone

Name

Email address
Appendix (iv)

**Media Coverage**

**Sources**
- **Hull Daily Mail (HDM):**
  - 30,000 Circulation (Readership 81,854)
  - 114,736 Daily website unique visitors
- **KCFM:**
  - 79,000 Listeners in Hull & East Yorkshire area
- **BBC Radio Humberside:**
  - 161,000 Listeners in the Humberside region
- **Viking FM:**
  - 218,000 Listeners in East Riding of Yorkshire, North Lincolnshire and North East Lincolnshire
- **Hull Kingstown Radio:**
  - 3,487 listeners through a downloaded app

<table>
<thead>
<tr>
<th>Channel</th>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
</table>
| HDM                   | Friday 15<sup>th</sup> July Page 2 | **Urgent care centre could divert patients from HRI**
  Erica Daley interviewed about plans for the city’s first seven day urgent care service that would have x rays and around the clock GPs. [Link to article](#) |
| HDM                   | Friday 15<sup>th</sup> July Page 10 | **We should welcome new urgent care unit**
  Urgent care centre cold divert patients away from HRI |
| BBC Radio Humberside  | Friday 15<sup>th</sup> July Drive time | **Consultation for Urgent Care Centre**
  Sue Lee interviewed for Drive Time regarding proposals/plans for Urgent Care services in Hull |
| KCFM                  | Tues 16<sup>th</sup> August | **Plans for new urgent care centre for Hull**
  Erica Daley interviewed about the new plans for an Urgent Care Centre. [Link to article](#) |
| BBC Radio Humberside  | Friday 19<sup>th</sup> August | Erica Daley interviewed about the proposals for a 24 hour urgent care centre. |
| BBC Radio Humberside  | Tuesday 13<sup>th</sup> September Drive time | Dr Dan Roper interviewed by Andy Comfort re: urgent care centre proposals |
| KCFM                  | Tuesday 4<sup>th</sup> October | Erica Daley interviewed about the coming Urgent Care Consultation event at the Freedom Centre. |
| Viking FM             | Tuesday 4<sup>th</sup> October | Erica Daley interviewed about the coming Urgent Care Consultation event at the Freedom Centre. |
| HKR                   | Wednesday 5<sup>th</sup> October | Toni Yell interviewed about the Urgent Care Centre proposals |
| HDM                   | Thursday 6<sup>th</sup> October Page 3 | **Advert for Urgent Care in Hull**
  Share your views |
| HDM Website           | Monday 17<sup>th</sup> October Website | **Have your say on closure plans for Freedom Centre minor injuries unit**
  Just 300 people have shared their views over plans which could lead to the closure of a minor injuries unit in East Hull. [Link to article](#) |
| HDM                   | Thursday 13<sup>th</sup> October Page 3 | **Advert for Urgent Care in Hull**
  Share your views |
| HDM                   | Thursday 20<sup>th</sup> October Page 3 | **Advert for Urgent Care in Hull**
  Share your views |
Appendix (v)

Social Media Coverage (August 25 – November 6)

<table>
<thead>
<tr>
<th>Twitter</th>
<th>Facebook</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tweets: 149*</td>
<td>Posts: 21</td>
</tr>
<tr>
<td>Impressions: 81,431**</td>
<td>Total estimated reach: Circa 14,000</td>
</tr>
<tr>
<td>Retweets: 225</td>
<td>Reach Paid: Circa 13,795*</td>
</tr>
<tr>
<td>Likes: 100</td>
<td>Reach Organic: Between 200-500**</td>
</tr>
<tr>
<td>Link Clicks: 115</td>
<td>Impressions: 17,878</td>
</tr>
<tr>
<td>Profile Clicks: 37</td>
<td>Engagements: 500***</td>
</tr>
<tr>
<td>Media Engagements: 208</td>
<td>Likes: 45</td>
</tr>
<tr>
<td>Details expands: 134</td>
<td>Link Clicks: 305</td>
</tr>
<tr>
<td>Replies: 16</td>
<td>Shares: 54</td>
</tr>
</tbody>
</table>

**Notes:**
These figures do not include the impressions or reach gained when our partners directly tweeted about our Urgent Care Consultation. We sent ready to post tweets, twitter images and campaign details were sent to 189 local partners, community and voluntary groups with a request for them to post and share on their social media feeds. This added significant additional coverage that is not represented in the above statistics.

**Notes:**
We also contacted, asked to share and directly posted on 53 Facebook groups and pages. These represented a wide range of people, from mother and toddler groups to older people’s organisations. Although we cannot directly monitor this coverage, these groups had a possible reach of around 138,000 people.

YouTube

Urgent Care in Hull presentation video: 45 Views

* The total number of tweets we posted. This does not include tweets posted by partner organisations.

** An Impression is recorded every time a tweet appears in a feed. This can mean that it is seen multiple times by the same individual.

# Our reach is the total number of individual people we have contacted. Our paid reach ensures that we have been seen by around 14,000 people.

## Because organic reach is gained from people who like our page, it’s difficult to keep a running total. We know that the un-paid for 20 posts each achieved Reaches of around 200-500 people.

### This is the total number of times people engaged with our posts (Shares, likes, link clicks, etc).
Appendix (vi)

Formal Response List

Formal responses were received from:

- Michelle Moran, Interim Chief Executive, Humber NHS Foundation Trust
- Chris Long, Chief Executive, Hull and East Yorkshire Hospitals NHS Trust
- Jacqueline Myers, Dir. Strategy and Planning, Hull and East Yorkshire Hospitals NHS Trust
- Andrew Burnell, Chief Executive, City Healthcare Partnership CIC
- Matt Jukes, Chief Executive, Hull City Council
- Janet Clark, Chief Officer, Community Pharmacy Humber
- Diana Johnson, Member of Parliament Hull North, Labour Party
- Karl Turner, Member of Parliament Hull East, Labour Party
- Preston Road NDC (Organisation that runs the Freedom Centre)
- Labour Group, Ward Concillors: Southcoates East, Hull City Council
  Southcoates West
  Marfleet
  Longhill
  Ings
Appendix (vii)

Questionnaire Free Text Responses

Question 4
“Please put these things in order of what you think is important in an urgent care service (1 being most important, 10 being least important)”

- quality care and clear treatment plan
- clean tidy friendly staff, not having to pay for medical letters
- in the centre of town or somewhere near the centre
- i believe this to be a very difficult question to complete can be very subjective and given no context
- Nice people there
- Being central for everyone to access, not stuck out on a limb
- Was this the best way to ask this question? I can’t see healthcare professionals unless I can get there easily in an emergency!
- just been there if I’m ill in the night
- Disabled access for parking without steep pathways,
- in the centre of town or somewhere near the centre
- The above list is very prescriptive and does not allow a true set of answers.
- Good disabled access
- The centre should be staffed by professionals who havve been trained to the highest of standards to mee the needs of those patients attending.
- I would have put many of those things closer to 1 but it wouldn’t allow me
- Getting results quicker
- Accessibility for disabled people, safe area.
- HRI is a major trauma centre. much of our minor injuries at HRI are from drunken injuries and patients with chronic pain who say they cannot get a Gp appoint
- Based on being aged 70 living on my own with no private transport.
- someone calm and understanding,reassurance on contact
- Central location
- 1 Well qualified GP or Nurse not an organisation like St John Ambulance
- 8 Short waiting time
- Bransholme is not central, is long distance away, not bothered about face to face with someone however if I need to I wouldn’t want to go that far.
- Important for the service to cover all conditions and that certain x-rays are not done ie; injury of shoulder and you are referred to a and e for xray
- out of hours pharmacy on site
- If Bransholme would necessitate taxi fare
- To be able getting an appointment with the doctor in the same day, and to be referred to specialist as soon as possible.
- In East Hull it needs to be on a bus route for everyone on Holderness Road.
- Clear signs! Hull royal adult A&E is impossible to find.
- 4 provide a proper 5 day service first the rest is irrelevant
- Safe locality
- Reduced waiting times
- Being seen and treated in the same place, having diagnostics in the same place (X-Ray) Open 24 hours a day, 7 days a week all 1; Close to where I live, close to other health services, accessible by car and public transport, good car parking all 2.
- confidence they can help (including understanding when to visit)
- 10 People/staff who have time to care as you would be - upset or worried panicky if for a child
- Being welcoming and accessible
• Simplicity!
• 1 good advertising & tell more numbers & answering
• Not privatised must be NHS
• 7. Been seen quickly
• has to be central no point driving past A+E
• central location
• People that understand my problems
• Being seen and treated in the same place, having diagnostics in the same place (X-Ray), open 24 hours a day, 7 days a week, close to other health services all 1; Accessible by public transport, accessible by car and good car parking all 3.
• Being seen and treated in the same place, having diagnostics in the same place (X-Ray), Open 24 hours a day, 7 days a week, close to other health services all 1.
• more advertisement and tell numbers for answering
• can see you in the day
• All these things are just as important to the service. It must be be accessible to all or someone who does not have direct transport to them will go to A&E. I would have to us 2 bus routes to get to Bransholme. That's unacceptable considering I'm in need of urgent care I will go directly to A&E
• West Hull needs to be factored in here, all services are usually east and north hull and this is not acceptable.
• Not everyone has a car or lift-giver. There are too many services located in East Hull and too few in the West

Question 10
“Please use the space below if you have an alternative idea for urgent care.”
• Educate G.P’s and patients where to get appropriate care rather than all patients getting advised to go to A&E
• need face to face triage with an appropriate health professional with then an agreed treatment plan- priorities needs so that people can be treated in more truely way
• develop Diadem Health Centre and Bransholme discontinue Freedom as a miu, consider many who need to access facilities have no car and limited finances and mobility problems
• urgent care should be readily available for all no matter who the person is, as there is not always time to get to A&E
• to keep the walk-in centre and diadem centre as they are
• direct or fire drunks or druggies!
• provide urgent care service at HRI & treat patients on arrival to prevent A&E services being inappropriately used
• Keep Diadem or Freedom open as no buses to Bransholme
• Why not centralise it in the town centre? Wilberforce HC? Or make use of the BHS building
• "The biggest issue with urgent care is patients turning up at A&E when clearly they do not need to be there, as they fail to see there are alternative places to go, using it as an extension of their GP surgery.
• My only question would be why the proposals for the urgent care centre have suggested the current locations? Would you really get people from the West of the city travelling to the proposed new locations of the urgent care centre, as opposed to going to A&E which would be nearer? I doubt it. To counteract this is there any plans to have a GP stationed at A&E where patients can be triaged appropriately. Areas is the country that have used a GP have been successful. Also what about 'heat and treat' and 'see and treat' proposals - training more paramedics and existing ones to a higher standard who are therefore equipped to make a decision treating more people at the scene reducing the amount of conveyances to hospital. Having worked on NHSE national policy for UEC these are
proven to have an impact. In addition, what would be done to educate the population of Hull? Despite best efforts, you are always going to get a minority living in the vicinity who will always turn up at A&E wasting resources, when there are more appropriate places for them to go. The frustrating thing is, these people would not be turned away, hence the benefit of a GP stationed there.

- Allocate a nurse to the doctor on duty so patients needing dressings etc can be attended to immediately not having to wait hours after consultation
- Bring Dr's back to home visits
- 24/7 urgent care to also be available in West Hull/ central Hull
- Urgent care should be located in easy to access area, not everyone has a car and some would have to use public transport to get to the proposed site at Branshorne, which would be unacceptable
- Re question 10. There's 3 choices. They are about shuffling staff around, or not. No apparent extra resource. Just moving and re forming. It will need retraining and team/staff support. I don't know what "pot" you have but it needs extra funds, staff support and training so the ultimate service is not expected to hit the ground running as so often happens. Staff are expected to deliver and develop a service (care pathways etc etc) all at once. Its too much! You end up with a much poorer service than could be provided plus quickly burnt out staff.
- Locate urgent care in local areas with community services and available public information on what to do in emergency with services including east and west hull
- It is impossible to get appointments to see GP, when you are not well been told to ring early in morning after 8.00 am, then trying to ring with no response finally getting threw then told no appointments, you should have appointments for poorly people surely
- The one on westbourne avenue or story street are not open 24/7 to the public this i think should be.
- invest more in NHS and key services
- 24/7 care at current places
- Above doesn't apply as live in Analby
- would not use any of above not in my area would go to A&E
- I can't say I'm aware of West Hull options . I can't answer Qa as I'm from West Hull and all those are East which are all too far. sort West or central to please
- police/perp treatment at A&E should be dealt with seperatley from normal A&E. No delays to normal A&E patient waiting times
- more localised ie. West Hull East Hull North Hull.
- Wast Hull again why not West Hull??
- yes there need a call centre like 111 you can call and get advice ,but ive never used a centre when ive been I call the dr out of hours number ,or I call 111 .
- Improve the appalling service offered at Storey Street. Centrally placed but Virgin are making a great deal of money and doing very little for it.
- More doctors/NPs in health centres would see less people going to A&E to beat the queues.
- Any building possible in the centre of hull or the west. Bransholme why?
- to keep walworth centre and diadem centre as they are. develop & pay facilities at westbourne
- Hull Royal Infirmary
- More doctors to be present at a & e
- Question 10 is totally irrelevant to those living in West Hull as we would not use services so far away and in many cases do not have any knowledge of the locations.
- What about Wilberforce it is central and everyone knows where it is.
- BRANSHOLME AS A LOCATION WILL DETER PEOPLE FROM ATTENDING OUT OF HOURS - MORE CENTRAL LOCATION IS NEEDED
Although Bransholme is close to where I live, I think the new Health Centre off Albion Street in the city centre might be a better option for people to reach in Hull. It also has a decent car park next to it and buses run frequently to the city centre. Also, if you can’t have all the necessary treatments i.e. x-rays, scanners, etc. then HRI is just down the road so you can quickly transport patients across there.

Stop closing East Riding resources so there is more pressure on Hull services.

I think what you are proposing is an excellent idea condensing 3 different resources into 1. Not only are you saving money but providing a better Urgent care model, so that ED at HRI can treat the appropriate patients. This is what this city needs and what the ED dept needs to be able to function as it is intended to.

What about West Hull? We have nothing here.

A&E should be a referral service only - referral by gp, miu, nhs111, or paramedics. Anyone presenting at A&E with a minor injury should be refused treatment and referred to a miu. I lived for 25 years in a country with comprehensive social health care and this above system worked perfectly. If it's urgent you ring an ambulance, if you can get yourself to A&E you can equally well get yourself to a miu. It works.

Can we not have minor injuries in one location and 24hr urgent care in another on the other side of town. Improving access for everyone.

A more central location.

"People still need to access GP out of hours - not all appointments are for 'injuries or urgent' some people just need the reassurance it's nothing serious.

I work at the hospital (non-clinical) and see people there who are just worried but can't get in at their doctors "

Have facilities in both locations so you can be treat at either place , Bransholme is difficult to get to from the east Hull area

"Could get gps to do what they used to do and actually visit patients at home.

Gp out of hours service at each practice for thir own patients and Gp can determine priority if hospital needed or appropriate to wait til working hours, gp surgeries could also have nurse or appropriate health professional to treat minor injuries etc.

Provide a mirror service in another location in Hull although this is probably not economically feasible

Staff it properly!!

Charge people who go to a&e for non urgent, stupid reasons. This is a waste of nhs funds.

Expand the paramedical service to help doctors out. Do not waste million of pounds in brand new building which is not convenient for west Hull patients.

"All the money poured into urgent care and all the different agencies who say they provide it when it is fact that people seem to want to go to HRI due to its location and the lack of trust people have with current services. Pour all that money into providing the care in the centre of town expand baker street buy diagnostics their and ensure HRI move people who are able to to that facility.

Also this isnt so clear about what youre stopping at the west side of the city as you all know where people will go if Bransholme is their only choice"

Urgent non life threatening care should be relocated to another area of the city. ERCH is great except they cannot deal with head trauma and pelvis trauma. In minor injuries at HRI the local GP's should set up a Rota so that non urgent pain can be dealt with. Many patients use A-E as a walk in centre. The reason., they can get an xray.

Need more diagnostics rather than just x ray and ultra sound- e.g.; ecg, point of care testing, blood gas analysis etc. Ambulance services must have an accessible pathway to urgent care rather than taking to A & E. Services in the west of the city should also be merged to have one or maximum two centres. It will get more complicated once the integrated care centre opens and we simply don't have a lot of staff to run 5 different centres. There should be 1 urgent care centre in east/north ie; bransholme & 1 in west/central and the integrated care centre.
What about using the Westbourne Centre?
Put an urgent care centre in the city centre.
There needs to be clearer information on how to gain access to the services and where they are involved
Provision, advice on a path way for mental health issues that are frequently signposted to busy A&E depts.
The location needs to be more central. I don't drive and would have to catch 2 busses to Bransholme which isn't ideal if you are ill
Bransholme is miles away from so many people keep treatment central!!
People get ill in West Hull as well, what about those people who do not have access to transport who require services? Shall we just go to a & e? Bransholme or freedom centre will be two bus rides if buses are available.
Sort out real emergency in A&E instead of people coming in with a cut finger/or stupid minor ailments
111 terrible service, inexperienced, I had to spell for him, told I needed to take my elderly mother to Westbourne but had to wait Upto 2 hrs for them to ring me back! I said I'll take her to A&E so he put the phone down on me! Waited 3 hrs in a@e not even triaged and if we had been would have been sent to a ward immediately ... Appalling and so unfriendly and unorganised !!!
"Bransholme and Freedom Centre are too far out
Diadem would be a slightly more central and accessible site to develop"
Closing the MIU at the 2 locations suggested will not reduce the number of people who attend HRI, for people needing urgen care they will go to the place that is most easily accessible to them by public transport, taxi or car. HRI is central, everyone knows where it is, and it is not expensive to get to.
why Bransholme centre is is not central its out of the way not easy to get to from East hull
I agree with additional tools for example X Ray machinery being out in the community to prevent people going to a and e but miu should be better staffed. I believe people that present at a and e that shouldn't be there should be turned away with an alternative given.
Why Branscombe Health Centre? Could it be more central e.g city centre with bus route and good parking so that West Hull residents can access
Something is needed in the west of hull area too as alternative to hospitals
people do not act in a rational manner when faced with our emergency especially when related to health issues. the system needs to be simple, so easily understood and well publicized schools and media
Yes. Open up a minor injuries unit next door/adjacent to A&E and also a drug/alcohol sobering up unit which has access to emergency care if required. People attending A&E inappropriately, can be redirected 'down the corrida' to the most appropriate area. I am fed up of waiting in A&E and seeing how much time and money is wasted on people presenting who are drunk or drugged. It is not fair and makes a and e very violent place. If you have a central minor injuries unit e.g. On fountain street car park, it could treat patients 24/7 leaving the more severe emergencies for A&E. anyone attending who is drunk or under influence of drugs can still get treated, but by a specialist dept at minor injuries, where they can also cool down and sober up without causing further harm to themselves or anyone else. It has to be a central location due to the east west divide of the city. Unless more circular buses are operated at all hours. If you live in west hull it is very difficult to get to bransholme or freedom centre on public transport. Why are you focussed on 2 estates of hull? I know land is cheaper in besnsholme than the centre of town or Anlaby road, but surely accessibility is an important factor too.
Make A&E for emergency use only and turn people away and redirect to the correct service
"You will not solve the issue of urgent care particularly at Hull Royal Infirmary until the issue of social care is resolved which this government does not intend to look at. The
waiting times are caused by patients requiring beds (which elderly are in waiting to be discharged) & not by people turning up with minor ailments!!!

- You will change things which will cost more money and there will be no advantage to the local Hull resident. I believe more people from East Hull will attend casualty rather than Bransholme."
- Urgent care should be treated as urgent! with a urgent phone number other than 999!
- "Keep the M.I.U at Freedom centre + G.P out of hours+ B.H. Health centre+ X Ray facilities "
- Everything is in East Hull why is there nothing in West Hull
- more education to improve current location as far as possible
- City centre
- Relocate minor injuries to Bransholme centre, but keep out of hours at Diadem to keep it not been to busy.
- create a separate 24/7 minor injuries at HRI
- "Move OOH GP to Freedom Centre and keep the MIU centre there open later in combination with the OOH GP service (e.g. to midnight).
- Then make an urgent care centre with x-ray at Bransholme as 24/7 alternative to A&E.
- Or have an OOH GP service at HRI, so non-urgent cases that attend A&E can be dealt with appropriately. We have seen this in action at Halifax when our son was ill one evening as a toddler on a trip there. He was booked in at A&E reception and triaged to the GP area. We were seen by a Nurse Practitioner (there were approx 6 NP's and GPs there). He was prescribed antibiotics there and then. Whole thing took approx 1 hr. Why not consider something like this? Simple, but effective."
- "Key urgent care facilities based and developed at hull royal that can not be closed or staff moved so closed during quiet times ......I went to the children's a and e and it was shut until 8am and we had to sit in adults a and e which was horrific !!!!!!! "
- Have a Nurse Practitioner led Urgent Care team supported by AHPs and full diagnostics. GP available if required (circa 10% of cases). 7 day service with extended hours 7am to 10pm.
- ensure the public know what is available and where , I have just done 2 shifts at Branholme asa nurse practitioner and both days patients attended thinking we had xray services for one example
- Older people do not always have transport adapt special taxi office to transport people to what injury unit is open
- "public or NHS transport to site available as it may be difficult to visit site at 3am, for example."
- Bransholme is north Hull why not develop the unit in central Hull which will mean easier access for all.
- "Would like an urgent care center in central or west hull. People
- Will just carry on going to A&E for that reason that the hospital is closer. They're is nothing for people in west hull. "
- Organize campaign to make the government to glur more money for the NHS for Hull. Encourage more young people to study health+ social care.
- One comprehensive, systematic change to clarify issues for patients - where to go at what time etc. The premise of a person needing urgent care being that they shouldn't also have to worry about what place is open at the time of their injury as well as worrying about the injury itself.
- More central location in Hull would be better
- Need to have Urgent Care services at both sides of Hull not just in East Hull
- Alleviate pressure + waiting times at HRI. Not fair currently to staff or service users.
- The space should be close to the existing facilities as much as possible to ensure that disruption is kept to a minimum.
Whilst there should be a full 24 hr Urgent care, why Bransholme as this seems out the way for the majority of Hull and East Riding, it should be positioned in a place easier to get to

Q10.* put the service where it is needed + accessible to all in Morill Street on Holderness Road.

Being seen.

Leave Diadem where it is.

"H- how bad is my injury?

E-ls emergency care definitely needed

L-look for your closest minor injuries

P- phone 111 for advice if your unsure

Everyone should know this! "

"Please do not relocate the MIU at The Freedom Centre. As a user of this facility I believe it is in the correct place already. If it was relocated, it would mean a much longer journey from the east side of Hull for all the people who currently use the facilities including the elderly, workers in that area and all the residents of the surrounding area. I also believe that it would be a great benefit to add a ""Treatment Room"" as over the last 6 weeks I have had to trek my 93 year old mother to every treatment room in Hull at least twice. As I have transport it has not been a major issue but for those without transport, this would have been a nightmare. It would also be nice to see the same nurses for continuity of care. Again over the last six weeks, every time we have had to change health centres, we have seen a different nurse."

Should be central - having MIU and OOD in the East isn't accessible to all

i am strongly in support of positive changes that will be beneficial to the general public

the minor injuries unit has to be created in the city centre. it is easy to access from any area in hull

use the facilities that already exist and staff them properly

scrap NHS 111 re-instate practitioner run telephone triage to reduce urgent care attendances children's services separate older adult

Locate primary care centre at hull royal. Or have direct bus service to miu from hri so people who turn up with throat infections etc don't even go through a&e. You should stop them attending but make sure they have access to the right sort of treatment. These centres are all well and good but people go to where they think they can get treated. The hospital will always be lots of people's first port of call.

"Prior questions give no real choice.

GPs should open 7 days to support the overall health model which would vastly reduce A&E for unnecessary visits - this could be Nurse practitioner led - care in your local area"

"A single location will increase footfall in a&e for those residents that pass it in getting to bransholme

Reducing a&e waiting will encourage more to attend

Consideration should be made to increase triage and ability to support all levels of care in a&e or have a bransholme type centre close to A&e and town centre."

Why in East Hull and not more central location.

Have different locations around Hull depending were you live think of bus routes.

Increase provisions at existing locations and increase XRAY capacity at Bransholme Health Centre, generally deprived areas local people cannot access other locations as easily therfore denying health care at the Freedom Centre would have a huge effect on local people and surrounding areas. Improve advertising so people are aware of provisions available.

Take patient to A+E hospital

"Cant have to many places as public will still go to A/E HRI

1)AE HRI only for emergencies urgent

2)Bransholme minor A/E
4) Wilberforce centre town to be kept available "
  - Return to HRI after re-investment, I paid for this all of my life so put it back!
  - Larger surgery's should have 24/7 urgent care centre's. And re equipt with X-Ray and open 24/7 pharmacy.
  - OOH access to Mental Health professionals All day, every day.
  - Agree with the principle, however, Bransholme not easily accessible using I bus, especially on a weekend.
  - I would like a skype based system so I can have face to face contact home in addition to current service.
  - Need unit in East/West North Hull.
  - As a 'frequent flyer' user of both Urgent & Emergency Care Services there are times in my conditions when I am in need of acute medical attention. I would guess that approximately 40% of these times I could be treated at an Urgent Care Centre to the same high standard I receive in the Accident & Emergency Dept; this figure would increase with the addition of X-ray facilities.
  - Improve mental health crisis team: more practitioners; better coordination with other agencies; lower case loads; better trained staff
  - Explore option 3 further with amended GP OOH contracts to include other health professionals.
  - Doctors to have more knowledge about medicine and prescribe right medicine instead of paracetemol 9 out of 10 times.
  - Keep miu at the freedom centre + Bransholme health centre but have an integrated one with the out of hours gp as it may put strain on the Bransholme centre.
  - Perhaps luncheon clubs for those unable to cook food themselves.
  - Develop a centre in the west of the city to give a good service to West Hull area.
  - Use either Diadem or the whole of the Freedom Centre as an urgent care centre.
  - Relocate to an accessible location eg town centre
  - All the empty buildings in and around Hull, surely another centre could be based in one of them and have more staff to help people in need?? (despite cash flow??)
  - Why put an Xray facility in the old out of hours location + not Diadem in the first place + offer the whole service there?
  - Why Bransholme for East Hull (Hold rd) area? too far.
  - Think about patient and lot people don't have transport to other units.
  - Urgent care has to be central, no one will drive past A+E to go somewhere else.
  - Relocate to Endeavour, Beverley Road
  - I have stated 1 all 24hr urgent care at Bransholme, but have worries about the location. This is not a safe area for people to be about from after the last bus services!!!!
  - Urgent care centre is needed in west Hull
  - I think the urgent centre is a good idea but I believe there needs to be an urgent care centre in the West of the City other wise patients will attend A&E as it is closer than attending North Hull. This would then help reduce patients presenting at A&E.
  - Co-location of urgent care service with HEY ED (to act as a "filter" before non-major patients enter ED and therefore start the 4 hour clock ticking) would seem sensible to very directly relieve pressure on ED.
  - Move everything to HRI site, this will avoid confusion about where to go out of hours
  - Keep both just open at night preston road and improve what we have
  - more centrac situation is better
  - Increase comms with the public and what is where and actually call it what it does
  - Consolidate with A&E and hospital on the same site with adequate parking
  - "I went and waited at an MIU for a suture in a hand wound and it was suggested I went away as they would close at 5 and they weren't sure if the nurse could do it and I would have to go to HRI anyway.
- You need to locate a GP led MIU at HRI to deal with Minor injuries as everyone will still come here anyway as they don't want to get messed about in a unit that can't proved 24/7 comprehensive services
- "1. work more closely with HEYHT and provide OOHGP, MIU 247 on the HRI site ensuring all walk-in's are seen in such a unit and only appropriate pt. escualated to secondary care ED.
- Reconsider the "if you build it they will come" mentality - build it where patients visit regardless e.g. HRI
- 2. Cross provider management of ED pressures and 4 hour, wait X% of patient will triaged as safe to transport to community MIU therefore provide patient transport to both take and return patients to alternative locations.
- Extend opening hours of Storey Street Walk-in and stop them from advising patient to attend ED when nearing closing time*
- "Greater provision is needed in West Hull - Story Street is too central, and I have never been as it seems like it would be relatively inaccessible by car.
- Getting in to Westbourne can be a pain, but they provide a good service. I have visited the Bransholme MIU a few times, and if there was something like that based further west, towards Hessle or Willerby, it may actually have a positive effect on A&E waiting times."
- Not at the moment!
- I'm not sure that Bransholme is the best place for this. Not sure what's happening in Health Central at the moment; I know the rent is ridiculous but could anything be done there? It's much more accessible from anywhere in the city.
- Can't tick the question properly. Disagree strongly with moving services to Bransholme unless direct transport will be available.
- Create somewhere more central or easily accessible as people in east of the city may be put off going as multiple buses to bransholme and only 1 bus needed to HRI. Also waiting area at bransholme very closetsbobic when full as no natural light.
- Is there a way of using telehealth served by the most expert professionals; that way people could speak / communicate with someone before leaving home to ensure they go to the right place
- 3 urgent care facilities are needed, East West and North Hull with diagnostic capabilities.
- Because of the number of patients who attend A&E inappropriately I think there should be an MIU on site to re-divert non-emergency attendees
- Please have something to the West. The Westbourne is all very well but it is not accessible by public transport.
- Have urgent care in a city centre located that way all residents in hull, east riding and barton upon humber who all used the services can get easy find the building, instead of going to a and e first. As the nhs guidelines are to the nearest unit which for the residents in hull and east riding and barton is the hull nhs service as it is in recommendation 10 mile journey for the residents above to travel. If you do not this the number of patients ring ambulances up to take them with keep increasing.

Question 11
“Please use the space below to make any further comments about the proposed changes or urgent care in general.”

- Great idea to move 24/7 urgent care at Bransholme centre
- focus on patients needs not targets!
- Definitley needed in the Bransholme centre
- was once directed by Drs receptionist to miu for minor injury by the time i arrived on the bus it was closed, so needed to be seen by own Dr next day, on any other occasion i went to freedom centre with insect bites i was told they would calm down an given no treatment even though i told them i reacted badly, later i need to see own dr for treatment for infection, drs need to be available at the units not just nurses
- if you make the proposed changes there will be lots of people who suffer due to these changes as they will not get to these new places, so I see there being a big problem and peoples health suffering due to the changes, minor injuries should be in the town centre
- most elderly patients live in central and West Hull and it certainly makes sense making Westbourne centre the hub for OOH care
- I live on Bransholme so having this would be ideal for me, but leaving the resident on Preston road and Diadem road area is unfair they too deserve good local care!
- something needs to be located in West Hull in the future
- I have real concerns on some people's ability to access from some addresses, not all have a clear bus routes or ability to pay for taxi's to travel to one site, lots of issues need to be addressed
- Detrimental to elderly like me as expensive in taxi and no buses. Would have to go to town and out again and the same coming home if you close Freedom and Diadem. Daren't go on Bransholme at night even buses are reduced there
- I am very pleased as I usually have to travel to Hessle Road to Elliott Chappel health centre for Lymphoedema clinic but I got appointment this for Bransholme where I live so no more pain having to travel up there. Brilliant.
- All care needs to be accessible to all
- I am very disappointed that the only place you can suggest creating a combined facility is Bransholme, rather than somewhere on, or at least closer to, Holderness Road
- "Right now I see it like this: The GP is there when I'm in the office. When I'm not working, there is only A&E. 111 is most likely a call centre in India.
- The receptionist decides whether to see a nurse or a GP. Nurse: "Health check? What is that? Ah, not here, you can have one in town hall"
- Either don't get sick or earn enough money to be able to afford private insurance or a flight to Bangkok for checkup every year.
- If neither works, make a plan when to get sick.
- There seems to be a reluctance to use technical means like x-ray or MRI for diagnostics. My GP told me MRI isn't used as diagnostics tool, but only by consultants to prepare for operation. Which is a bit strange.
- It is the endless wait in A&E which is unacceptable suggest drunks and drug takers are seen elsewhere!
- there is a well need to offer in hours urgent unplanned care services in West Hull is well as GP out of hours. E.G. by transforming the walk in@wilberforce because West Hull people will continue to use A&E - they won't travel to East Hull.
- Hospitals and NHS centre's need more staff. A lot of problems are due to cuts and lack of training. Also population increase
- Make people more aware of the current systems in place, and that they should use them instead of blocking up A & E with ailments that could be easily remedied elsewhere
- West hull not included why?? Should be alternative to a&e in West of Hull too as it is seriously not a good place to go to why not a urgent care in the city centre for all of Hull as it would be central and good public transport for all
- Need to publicise and make sure that people know what constitutes urgent care and what is A&E. People just go to nearest or A&E for anything out of hours.
- I hope it's a better care service for everyone
- Xray and other diagnostic tests must be available to save people having to travel to HRI
- More GP's not just nurse's or EMC 's
- less waiting times and wider range of patient clinics
- need to reduce waiting times at HRI A&E as this it is ridiculous at the moment
- Why aren't you making this service for the whole city. These are all East locations I would prefer a local service (west)
- "Sometimes difficult to obtain appointment with GP if you need urgently."
• Very poor experiences with walk in at Wilberforce. Long wait although quality of GP is acceptable
• My mother was on the penultimate day of chemo therapy often she felt ill with a fulminate infection makes by the effects of a tramadol pill taken at the start of a weekend delays & complications in 24H access contributes to late diagnosis between Sunday morning presentation of symptoms and her subsequent death is hours later at castle hill oncology dept. All treatment & oake should be 24/7: no arguments
• "Urgent care.
• Enable health centers with combined dr's surgeries to help individuals who may need some attention.
• ie last year I fell on Hessle rd. went to Elliot Chapel and staff were rude, I had banged my head, was confused, they told me to go to A&E
• Beds taken up by drunks is wrong leave them in the pub. Where they have bought the boozze?
• more help for the elderly + children, disabled
• well its not good his it .but I like to know how many people use the sevice ,because people just turn up at one,maybe more can be done telling people how to use this service ,also maybe there could use a dr on call when people are real ill ,
• Why can't we have a local GP and clinical nurse service mobile nurse service for special needs - e.g. elderly
• Introduce a fee for time-wasters.
• Why Bransholme? Any options central Hull sometimes traffic so difficult to get to Bransholme.
• need for a location West Hull
• diagnostics (xray / Ultrasonond) essential on site
• When you attend the childrens a & e department you are examined then wait 3 hours to get treated by a doctor on duty
• Fine as they are. Keep them local
• "If everything goes to Bransholme, not everyone has access to transport. Some services should be kept on the east of the city. Need"
• Having used minor injuries due to fooballing son, it makes sense for there to be xray/scanning facilities there.
• If this proposal is to serve Hull and the immediate surrounding area surely Bransholme is by no means an ideal location being far from central and especially a long way and possibly difficult to find for anyone from east of the city centre and esp the many who are unfamiliar with Bransholme
• Seems to be very one sided and perhaps prepared to ensure that the HCCG obtain the result they want.
• Good idea. I think the current system is too confusing. In the last 12 months, my wife or my daughter have needed OOH care - usually needing urgent help. Seems stupid having to ring 111, wait for a call back from a GP, for then to either send a paramedic or send us to Marlborough Ave. If we could just drive to an urgent care centre, and it was made clear what kind of injuries or classed as urgent, then I'd prefer to go there than wait for call backs, paramedics, etc. Paramedics can be out saving someone's life, rather than coming to us.
• Think the new walk in centres for urgent treatment is better than going to A&E but need to have xray facilities
• Urgent care is hard to understand as a concept. I work full time and often need an urgent appointment because I wait until its no longer bearable as I can't take time from work. When should urgent care be sought? Not an A&E type complaint but things such as infections, abdo pain and failing health of elderly frail relatives should be accessible from a GP surgery on the same day.
• Mental Health is an urgent care issue as well. This must be 24hrs and effective.
• People need access to health services 24/7. You don't just fall ill or have mishaps during office hours. A&E is misused and over-used because there is currently little alternative.

• The public need educating about proper use of emergency services. I have never gone to A&E without being referred by another agency - paramedic, gp or nhs111. I have attended miu and doctor out of hours services. It's a case of educating the public and having strict policies at A&E.

• I feel that there should be more centres with access for urgent care. Perhaps there could be a rotation of GP practices for out of hours?

• Not sure what is being proposed for the rest of Hull

• There is obviously a need for more urgent care locally to take the pressure off A&E, but it is too confusing at the moment knowing where to go and when for what

• Need a GP to see all the people who need to see their doctor but can’t get an appointment at their surgery

• I was very unwell recently but refused to ring doctors because I knew I would just be referred to ambulance and a&e. Luckily I am ok, but it could have worked against me.

• If feels like continuing decline of NHS and another way to privately outsource services, I want my gp surgery to be contactable out of hours and advice and treatment from them as needed. Not a strange surgery and people and not easily accessible if on the other side of town etc. Provide additional funding to surgeries to enable each to operate it's own out of hours minor injury and urgent care support.

• Believe it will ease A&E. X-rays definately important.

• Think out of hours care should have access to your records

• Why is keeping the freedom centre not an option??? You should be expanding services there too!

• Too complicated and wast of resources

• The proposed changes look ok in theory. The proposed site however will not stop the patients using it as a "treat all in one place" walk in centre.

• People who are genuinely ill don't mind travelling miles as long as they know they are going to get the treatment they need. We need to some how vet the people on the door as they come in who are just wasting time and resources.

• Overall we get a good service but there is a lack of integration between ambulance services and urgent care services. The CCG must take action and provide leadership to integrate these two services and also have remote access to specialist care from the acute hospitals via use of technology. Example, direct access - telephone advice for urgent care practitioners by the on-call registrars or consultants from different specialties to avoid an unnecessary admission to hospital

• Need more support from mental health team

• The wait at A&E puts me off even when I do have a sports injury. Were not aware of current MIV at Bransholme.

• There needs to be a person to cover the health professionals when they need their breaks especially there is a real bad emergency with the elderly or a minor i.e. head injury

• Whilst I believe there needs to be radical changes and improvements to urgent health care services. I do hope your proposal is not expected to meet the needs of the whole of Hull and that the intended is to develop the same service to the West of the city.

• Already explained. Live on my own. Son works abroad. No car. Getting older and feel the need to be more secure should an emergency arise, I have a phone, beside my bed, next door neighbor has my door key but would like emergency cover I can access myself without disturbing neighbors late at night.

• Perhaps include mental health specialists so that those in mental health crisis dont need to go to A&E

• The government needs to provide more funding! On the whole our nhs does a brilliant job with very limited resources, health care shouldn't be freely available for non UK citizens, we have to pay medical insurance to visit another country on a
holiday, perhaps this is something that should be considered here unless it's an emergency situation, keep up the good work.

- Bransholme is miles away from...o many people I would have to take 2 buses to get there. How is that a good idea?? Keep services central!!
- I agree more needs to be done to take away the bad practices of using a & e. These visits often occur due to there not being access to other services. Educating the public is one thing, availability of services at point if need is another
- Hull need an urgent out of hours crisis service for vulnerable young children & young adolescents
- Medical care is a right and should not be seen as a luxury, or an either/or situation, providing these services 24hrs a day is vital to ensure the health and wellbeing of all. Services should be easily accessible to all, good transport links are vital, public transport needs reviewing to ensure all are able to attend these centres for those who do not own their own car or have funds for taxis, if these services are to be inclusive for all. We must ensure that changes made do not disadvantage the most vulnerable in our society.
- Get ppl seen, inform ppl, smile be friendly!
- Who decides what is 'urgent'? It's not about spending money and developing sites. The key thing that's lacking is mainly CARE - care about patients, treatments, investigations, admin tasks, the whereabouts of patient records - real CARE does not cost more in monetary terms - it's about the culture and the ethos!!
- This is an important service and I would like to see any changes made to be the best for the city.
- Let's wait and see! anything that reduces pressure on A&E is a good thing as long as the services is fit for purpose
- "maintain a good level of Ambulance availability"
- I support the proposed changes
- Bransholme is the worst place in Hull to have this centre it should be located nearer east Hull on Holderness Road which as good access for cars and local bus service
- Need to increase the facilities in north hull due to continued expansion of population in Kingswood. Some need for east hull not impressed with GP out of hours services. this can be covered by urgent care!!
- Does the proposal for Bransholme mean the gp ooh services at Westbourne will be relocated? To save staffing costs as this would be unfair for West hull residents to travel and I have a new born baby who has recently accessed Westbourne
- The west of the city does not have access to an alternative to A&E at HRI. move to the east and people in west hull will gogg up A&E
- A definite need for x-ray facilities away from A&E at the hospital
- Why isn't the care centre more central it's difficult for some to get to East Hull
- Princess royal hospital should have been modernized
- Have any of the ccg used A&E or minor injuries? Have you ever gone to Story St and sat there for 4 hours?
- See previous answer
- What about West Hull people
- Dementia friendly services & accessible ie hoists & changing areas.
- Very biased to your preference if more travel, some option too far away for many
- "Diadem Grove is my local surgery so I would not like to see GP OOH service move.
- I used the GP OOH at Diadem Grove on a Sunday earlier this year + was impressed that it was open till midnight on a Sunday. I didn't have to go further away.
- The only thing was I was given a 12:30 slot by NHS 111, + it was 2pm before I was seen; nothing happened for an hour."
- "I work in A+E and I see so much in there that shouldn't be there people need to man up and use the appropriate pathways!! How about have paramedics triage patients + some would come to urgent care rather than A+E it doesn't need urgent diagnosis like CT scan/
X Ray/ MRI/ US etc... You get lots of stuff at A+E that needs some tests like urine dip could be done somewhere else.

- You need a consultant geriatrician at urgent care centre also team MDT eg PT/ OT involved too 24/7 "
- Decrease in GP waiting times at surgeries
- "Drunks use A&E incorrectly
- Like idea- as long as A&E move there as quickly as possible
- Is there a danger to delay?"
- although there has been lots of advertising it's still not clear to many people to use 111 and people must be aware they aren't speaking to someone local
- think making Bransholme Health Centre 24 hours will take help take the pressure from HRI
- "We have never had a problem with MIU or OOH provision. It has always been great.
- Centralisation is not always the answer. That said, if pooling resources is what is required, in my opinion Bransholme is not a very convenient location for much of the city. Freedom Centre is much closer to the city centre and surely a better option."
- "Listen to the staff ideas and respond to their ideas they often have the best ideas and not the managers who mess around ...
- People don't know we're to go or how to access services that's half the battle and they turn up at HRI - Traige them quick at HRI and send them to the approx ate in house area .... Instead of people just turning up and creating massive back log of waiting times - HRI and CHH will always be main points of call for people as they know them
- Pop up new services and health centres don't have the step up care or resources if needed ..... Utilise the central hospitals better !!!!! Just "
- Training to improve all services
- I fear that this will end up being just as busy as A&E with just as many pressures. North point is not easy to get to using public transport so people will still go to A&E.
- There is a risk that West Hull residents may still tend to access HRI A&E if provision is wholly transfered to Bransholme even though not an emergency need. Therefor some provision still at The Freedom Centre would address this with Ambulatory care at HRI. Would the CCG consider collaboration with Humber Trust to co utilise Beverley Community Hospital?
- one large unit, well staffed with apprpriately trained people is better than lots of smaller units which can't give a full service. the public can't have a full service on their doorstep and we should be honest with them about this, they are able to travel to watch their children play sporrt or on a night out so they will be able to do the same for a minor injury /illnesses.
- We want a special unit/hospital in East Hull. Everybody does not live in West Hull.
- I believe we need to have care centre 24/7 in south east Hull!!
- as someone with no transport how do I get to Bransholme-(miles away) out of hours??as a pension- I can't afford the very expensive taxis and may not want to call an ambulance depending on what the problem is. Why not HRI where you already have everything you need
- It would be very helpful to expand the services available at Bransholme health centre especially diagnostic equipment and Doctor cover. Have taken children (in the past) to get checked out for possible fractures and had to then go on to A&E to have them x-rayed. The staff do an amazing job just need more support.
- I think it's good to have a centre like the one proposed in Bransholme centre. However, I think that there should be more money for all health centres and instead of closing old ones we should open near ones.
- "Definitely keep some medical services at Freedom centre.
- Eg Run clinics as at present (dermatology) & More if possible
- Please= please keep warfarin clinics at freedom centre - it is used + convenient for many elderly patients who need regular monitoring.
Any alternative is costly taxi rides!!"

If the move from the freedom centre overall will be more supportive of hri and the local nhs system, then so be it. If I lived near the freedom centre and needed to be seen as a matter of urgency, a bit more travelling would be no bother considering the better and more comprehensive quality of care that would be received.

Have GPS in a and e or have urgent care near hospital so can redirect patients

I think there should be a dedicated Elderly Urgent Care facility as A & E is often under pressure from elderly patients and it's not always good for them.

"It would be 2 buses to get to Bransholme.

Freedom centre is local.

Diadem 1 bus ride I have no access to any car so it has to be bus." 

"Keep the minor injuries unit at the freedom centre people do not have transport to get to Bransholme.

Should be made more accessible. I have sat at Wilberforce drop in & they turn people away obviously due to closing. People have made special arrangements to get there because they or someone else is ill!! *

24 hr urgent care is needed, currently i have no idea what/where i should go if i feel i need to see a doctor but feel i do not need to go to A&E. Everything under 1 roof, open 24 hrs, would makes it simpler

We do need a 24/7 urgent care facility as A+E just isn't the right place. It needs to be option1.

It would have been unspent for me if there had been facility for X-Rays at Bransholme minor injuries. It would have obliterated the need for the visit to A&E Hull Royal and could have been given an appointment directly to fracture clinic.

Would people from the west side of Hull go to the Bransholme or Freedom centre?

Provision of transport for those in need.

The integrated semra idea is good. Security day night at the proposed location is of major emcem

Please leave it it is but the distance is not convenient for all buses can delay the treatment one needs.

Absolutely agree that we need 24/7 services to take weight off HRI in our communities we are densely populated in East Hull + have fewer car owners due to the nature of the income levels East of the city. Accessibility is key otherwise they will go to HRI anyway not Bransholme.

its a great idea to open Bransholme Health Centre 24/7 as it is ridiculous at A & E

Chemist needs to be open close by, especially oohs when you see Drs/GP oohs needs to be close by and accessible.

I believe more knowledge to the residents of Hull on what services are where will fix dot of other problems for example the waiting times. Often people wait for hours when if they'd have gone to the right place would be seen sooner.

See previous note

Must have accessible east and west Base...... cannot expect patients to be able to travel an hour across hull to Bransholme when unwell.

urgent care in general has to contain available GP or specialist consultant, x-ray, MRI pharmacy

I feel like I have nowhere to go sometimes and unsure who to contact regarding minor injuries. I feel like people are too busy to see me and want me out of there ASAP.

If new centre is agreed, a leaflet should be delivered to every house detailing opening hours and services provided

we need to provide a proper but for purpose 5 day service first and foremost. we need more doctors and nurses to ensure the 7 day 24 hours care that already exist can be staffed properly. we cannot extend the service if we do not have the medical staff. fund the service properly. cut the payout to the private sector
• i live in HU5 and Bransholme is not usually accessible, i drive but did not due to accident or illness a two bue journey would be daunting, i would be more likely to attend A&E pointless having urgent care without x-ray having cared for a frail elderly parent i believe a home visit option from a qualified practitioner should always be an option available
• removal of choice will increase the number of people attending A&E not reduce, people travelling in from west or East will virtually pass A&E to navigate Hull streets to Bransholme
• Not everything that is done will please everybody, but in cases were transport is not available to the person a lot of thought needs to go into the cost of getting to the centre were the services will be located.
• Shorter waiting times quicker doctor defects to reduce pressure on A7E
• As above please see.
• Ambulance service would be good.
• "People manage to get to A/E AT HRI
• So they can access the alternate place Bransholme accessible good for parking but if not advertised people will still go to HRI A/E "
• Had very good care at minor injuries but appalling service at A/E
• Go back to how it was & replace CCG'S & pay junior doctors appropriatley
• We need help available locally and not everyone can travel so far away & afford buses or taxis to get there. Also it prevents long waits & people having to take more time off work.
• We need help available locally and not everyone can travel so far away & afford buses or taxis to get there. Also it prevents long waits & people having to take time off work.
• We like things as they are because we live near the Diadem health centre we have no transport to get to Bransholme.
• Same as Q10 for GP out of hours (Westbourne Avenue)
• Not everyone has a car or can afford taxis to travel to Bransholme- see above a more central location preferred.
• "Need to do more checks on patient not just temperature and blood pressure.
• Bloods never checked at doctors or Hull Royal Infirmary."
• "A cleaner triage system in A+E.
• - walk in centre not in A+E so patients can be directed straight there.
• I would like answer machines at G.P's to direct me to out ofhours centre rather than just 111, 999."
• Have blood donations performed at Bransholme Health Centre if too far away.
• "Due to the current situation the issue needs serious discussion and consultation
• Training more practitioners will be essential if this is to be successful "
• I think one reason things are strained in A&E as we appear to live in a society where a small (ish) group of people think A&E stands for 'Anything & Everything!!
• Needs to go back to being provided by your own gp surgery
• How will mental health be factored into this review. Mental Health crisis services are already facing a significant challenge and their review needs to be incorporated into this. Having separate urgent care centre for acute and mental healthcare is confusing and risks replicated the problems MH care in A&E.
• I was against the change until I attended an urgent care consultation which fully explained the reasons. As there is a minor injuries department at HRI, it does seem logical to gave urgent care at Bransholme, especially with X Ray facilities.
• Sounds like a good idea to help alleviate pressure on A&E services. Will obviously need to be carefully planned and thought through.
• All facilities are rather in Hull, Beverley or Castle Hill it would be nice if you gave some of these facilities to the people to the East of the city, ie to Hedon so all the outlaying communities do not have a travel distance between 20-40 mls, I would imagine very few people like my self would travel to use any of these facilities, please look for the East than Holderness road.
It's not fair if the freedom centre miu is closed or minimalized as the people in that area maybe cannot reach anywhere else. The Bransholme centre may be put under strain with the new influx of stuff+ visitors. Does it have enough space? parking? use an old building and refurb for an out of hours urgent care team.

It is essential that it remains in the control of NHS and no privatisation of the service.

"1. pharmacy required 2. publisice what is available and when? 3. transport links?"

Bransholme Health centre neither accessible or reassuring. Have faith in A+E, experience of Bransholme very poor- difficult to find, no-one there hardly, advice extremely poor if not dangerous.

People need services local do not have money to travel.

These things should have been addressed years ago I've known people to wait hours and hours to be seen to and it shouldn't have to be like that.

"HRI would be nearer"

How about Freedom centre & Bransholme"

Ask people what they want don't just decide because sat in office- get into real world stop closing MiV as Freedom used on regular bases, nurse's staff are so fantastic& also reception staff- very helpful.

I feel some provision for health care should be kept at the Freedom Centre and Diadem as not all residents can casually access Bransholme.

Will the urgent care be a walk in centre or is it more numbers to ring first? Making sure low income families can access 24 hours- if live in West Hull its a long way away

It would be great to be seen to stead of trying to get to see a doctor, when you can't get an appointment and you are worried about what is wrong with you or a family member.

I am not sure whether people will use this facility instead of going to "A&E". At "A&E" people are accessible to a blood test and results while they wait! There is no mention of this happening at the proposed new facility!

I feel the proposed changes will make a huge difference to the present system. Having visited a&be with my husband recently, I was shocked at the number of people coming in with very minor problems which could easily have been treated at home or with the assistance of a pharmacist.

I feel some provision for health care should be kept at the freedom centre and Diadem as not at all residents can casually access Bransholme.

Will the urgent care be a walk in centre or is it more numbers to ring first? Making sure low income families can access 24 hours - if in West Hull it's a long way away.

At the moment the dr's we have we see different ones every time we go how do you go continuing with diagnosis's and treatment.

We used the minor injuries unit and the waiting time was 2.5 hrs this needs to be reduced by providing more healthcare professionals.

bransholme

I've ticked where to re-locate but really it depends if those services are being well used. Are they not being used because people dont know they are there + what they offer? Local services are important for people who are ill and can't travel.

Not out of the way and to the way of the city as well.

Kingswood is now such a large a growing population 24/7 at Bransholme would be ideal

"Gentleman thinks one should be built at Castlehill, because they have all that land and all they want to do is put car parking on it. Also he thinks it should be built where the old General Hospital was on Beverley Rd.

Gentleman stated he went to the freedom centre regarding his ears was told they dont do this and he had to go to AE sat there for 6 hrs told it was not their job and it was his GP. who had to do it."

It isn't clear why the reorganising is taking place. Is it to save money or improve services?

An urgent care unit is very much needed - there is too much distinction between what can and can't be treated at an MIU or a WIC, having one place to go to for everything works
much better and is easier for people to understand and use, and hopefully would take some pressure of A&E leaving it free to do its job and deal with emergencies.

- Just call it A&E and let the health care professionals do the diagnosing.
- Improve ECP response and performance to falls by including rapid assess team that includes AHP assessment and increased access to community rehab beds for such patients (extra capacity) reducing acute admissions
- As mentioned in my response to the previous question, a greater provision in West Hull may have a positive effect on A&E waiting times.
- "I, fully understand where you are heading in the changes you need to make in delivering health care for the future of patients, but some caution needs to be taken into account, as 24/7 will change how and when you see a doctor, and not always of your choice, or named doctor/ practice as now! This will be frightening for many who are settled in the way they do things, due to age, health, mental health, fear, panic attacks and depression due to their illnesses, being set in ones ways is comforting and a secure way of coping, none of this is covered in the questioner!

- I think you need to have a procedure in place for vulnerable patients with the above health issues, those who need to see their own doctor as now, this has to be accommodated where possible, with the understanding of the patient that they may/could have to wait until their doctor is on duty, again with the understanding that if their illnesses need immediate attention, then like now in A&E you’re seen by the duty doctor and consultant on duty at that time!
- It is vital when selling this to patients/public it is done in and honest, understanding and sympathetic way, demonstrating you are willing to listen and accommodate where possible.
- I, hope this has been of some help. "
- As previously stated. No further comments.
- I think having services in one place is a good idea and I think it would encourage people away from A&E and reduce waiting times.
- Again no thought to other areas of Hull. East and North yet again. What about Westbourne? Is that closing for OOH?
- A cab fare to Bransholme from the West of Hull would be prohibitively expensive. I suspect the pressure on HRI would be much reduced if there was an alternative in West Hull
- people who are scared of getting lost or have not transport with ring ambulance instead. A location need to anywhere but Bransholme as you are going help Bransholme residents not the majority of patients who use Hull NHS service.