A meeting of the Governing Body

Thursday 9th November 2017

Supplementary Agenda Item: 16

Public Consultation: The future of the NHS Walk-in Centre, New Cross and improving provision and access to primary care

CLINICAL LEAD/S: Dr David Abraham, Clinical Director – Urgent Care Lead and Dr Jacky McLeod, Clinical Director – Primary Care Lead

MANAGERIAL LEAD: Diana Braithwaite, Director of Commissioning & Primary Care

1. RECOMMENDATIONS:

- 1.1 The Governing Body is recommended to defer its response to the feedback from the consultation and thereby a decision on the future of the NHS Walk-in Centre and improving provision and access to primary care until 11th January 2018.
- 1.2 This additional time will allow the CCG to appropriately review and provide the necessary assurances on following;
 - (a) Comprehensive review and evaluation of the consultation responses and proposed alternatives is completed and published;
 - (b) A review of the capacity, access and public awareness of the GP Extended Access Service;
 - (c) The GP streaming and primary care access services at the Urgent Care Centre, University Hospital Lewisham are delivering against the commissioned model and requirements;
 - (d) Development of services to support the most vulnerable (specifically rough sleepers) as agreed at the Homeless Summit – ensuring that services are clinically appropriate and accessible;
 - (e) Patient Advice Liaison Support (PALS) at the Waldron Health Centre is implemented during peak times to enable increased GP registration until March 2018;
 - (f) Development of clear and simple messages on accessing primary care for the north of the borough;
 - (g) A robust assessment of the capacity and capability of the GP practices located in the Waldron Health Centre.
- 1.3 Given the need for this additional time and work, it is proposed that the contract for the NHS Walk-in Centre should be extended over the winter period until the 31st March 2018, subject to the CCG Procurement Policy. The Governing Body is asked to agree this contract extension and note the above areas where further information will be provided in January 2018 to enable consideration of its full response to the consultation.

2. SUMMARY:

- 2.1 On the 13th July 2017 the CCG Governing Body agreed to commence formal consultation on the future of the New Cross Walk-in Centre service and that the CCG Chief Officer was delegated to assure that the consultation plan included the key stakeholders that will be directly engaged and the supporting materials that will be used.
- 2.2 In line with the public sector duty to consult, pre-consultation on the proposal and the plans for formal public and stakeholder consultation were reviewed and endorsed by the Healthier Communities Select Committee on 20th July 2017.
- 2.3 A formal and comprehensive public, patient and stakeholder consultation programme was developed to enable views and comments to be sought. The public consultation was launched on 8th August 2017 and ended on 30th October 2017. Over this 12 week period the CCG has conducted an extensive and transparent programme to support the formal consultation. We have engaged with patients, the general public, public bodies, key stakeholders including health care partners and the third sector. We have conducted in excess of 40 direct engagement events and

1,768 people have responded to the survey.

- 2.4 The purpose of this report is to provide an overview of the emerging key themes, which underpin the recommendations to the Governing Body.
- 2.5 The CCG provided an update on the consultation to both Overview & Scrutiny and Healthier Communities Select Committees on 31st October 2017 and 1st November 2017 respectively.
- 2.6 This report has been submitted outside of the formal dispatch date in order to incorporate feedback received from the Healthier Communities Select Committee.
- 2.7 The most critical area of concern raised at the Healthier Communities Select Committee relates to perceived adverse impacts on the A&E Department at University Hospital Lewisham site, Lewisham & Greenwich Trust if the Walk-in Centre were to close over winter.
- 2.8 The CCG recognises that there is little academic evidence to suggest activity transfers from Walkin Centres to A&E Departments, when non co-located Walk-in services close. There have been no reports to support this perception from neighbouring CCGs in south east London or elsewhere in the country. However, it is important to acknowledge as stated in the Pinchbeck Study¹that geography to the non co-located Walk-in services plays a critical part in any shifts in activity.
- 2.9 The Walk-in Centre although commissioned as a borough-wide service, in reality predominantly provides services for the north of borough based on the number of attendances.
- 2.10 Consequently, any changes in services would have a greater impact on local GP practice services (particularly those located in the Waldron Health Centre) rather than on the A&E Department at University Hospital Lewisham site or indeed any other A&E Department located within reasonable and accessible proximity to the Waldron Health Centre E.g. Kings College Hospital (Denmark Hill), Guy's & Thomas NHS Foundation Trust (Guy's UCC and St Thomas' A&E Department sites).
- 2.11 The Pinchbeck Study provides one of the only available calculations on possible and indeed estimated shifts in activity, which is heavily caveated and weighted for geography/location. In applying this methodology to the Walk-in Centre activity for 2016/17 (29,528 attendances), the estimated shift in activity is between 5% and 10%. This would equate to an estimated 4 to 8 attendances per day to an a A&E Department, which could either be to the University Hospital Lewisham site or any other A&E Department located within reasonable and accessible proximity to the Waldron Health Centre if the Walk-in Centre were to close.
- 2.12 Our local data supports the Pinchbeck Study, as it demonstrates that in 2016/17 less than 7% of the total number of attendances (29,528) after seeing a GP or nurse at Walk-in Centre were referred to A&E, this equates to **an estimated 5 attendances per day.** Again, here there is no evidence to suggest that the referral to A&E would translate into an attendance to the University Hospital Lewisham site or any other A&E Department located within reasonable and accessible proximity to the Waldron Health Centre.
- 2.13 It is also important to reiterate that the substantial clinical reviews of presenting conditions to the Walk-in Centre, (excluding wound dressings) were for minor ailments and more specifically were coughs, sore throats and limb pain. Consequently, providing users of the Walk-in Centre in the north with support to access the right services is essential.
- 2.14 This does provide further clinical validation that the activity (attendances) seen by the Walk-in Centre, would not necessarily translate into attendances to an A&E Department.
- 2.15 Under responsible commissioner arrangements the CCG has responsibility for;
 (a) persons who are provided with primary medical services by a member of the group, and;
 (b) persons who usually reside in the group's area and are not provided with primary medical

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services by a member of any clinical commissioning group.

- 2.16 Consequently, the CCGs allocation for primary medical services is calculated on the number of people on the total GP registered list (327,824 at September 2017) and not on the number of people resident in the borough. The costs of the Walk-in Centre are not included in this allocation and are therefore an additional cost to the CCG.
- 2.17 The Walk-in Centre costs are per attendance and not per GP registration. Accessing primary medical services from a local GP provides a comprehensive and holistic service, which is not commissioned on the number of attendances. This is why it is essential, not just with regard to providing continuity of care through access to medical records but in terms of better value that we encourage people to be registered with a GP.
- 2.18 The survey received 1,768 responses. 82% of respondents did not support the proposals, 11% supported the proposals, 7% did not know and 1% did not answer this question. The critical question which underpins the recommendations to the Governing Body was with regard to confidence levels in getting an appointment at their GP surgery or using the GP Extended Access Service if it replaced the Walk-in Centre. There was not an overwhelming majority of respondents who were confident.
- 2.19 A full evaluation of the survey will be submitted to the Governing Body in January 2018.

3. CONFLICT OF INTEREST:

- 3.1 There is a conflict of interest for Dr Sebastian Kalwij, Clinical Director and Governing Body Member due to being a GP and partner at the Amersham Vale Training Practice. The Amersham Vale Training Practice;
 - (a) Of those attendances that could be attributed to a Lewisham GP, this practices patients are the second biggest users of the Walk-in Centre based on 2016/17;
 - (b) The practice has a commercial arrangement with Goldsmiths College to register 2,000 students;
 - (c) The Dr Louise Irvine, is Chair of the Save the Lewisham Hospital Campaign (SLHC) and is also a partner with the same practice;
 - (d) All GP practices in Lewisham are shareholders in One Health Lewisham Ltd the provider of the GP Extended Access Service.

4. CORPORATE AND STRATEGIC OBJECTIVES:

- Our Healthier South East London Sustainability Transformation Plan Community Based Care
- CCG Primary Care Strategy
- CCG Estates Strategy
- Corporate Objectives 2017/18: Urgent & Emergency Care Review access to Urgent Care to streamline the number of 'front doors', including the Urgent Care Centre, new integrated primary care and Integrated Urgent Care (formerly NHS 111) and the New Cross Walk-in Centre

5. CONSULTATION HISTORY:

- 5.1 In 2010, the Secretary set out four key tests against which NHS service reconfigurations (significant changes to services) have to be assessed. These tests were set out in the Revision to the Operating Framework for the NHS in England 2010/12. This requires reconfiguration proposals to demonstrate;
 - 1. support from GP commissioners;
 - 2. strengthened public and patient engagement;
 - 3. clarity on the clinical evidence base; and
 - 4. consistency with current and prospective patient choice.

Lewisham Clinical Commissioning Group

- Clinical Directors, 2nd February 2017
- Membership Forum, 8th February 2017
- Governing Body, 9th March 2017
- CCG Clinical Directors and Senior Management Team, 25th May 2017
- Governing Body, 13th July 2017
- Healthier Communities Select Committee, 20th July 2017
- Public Reference Group, 27th July 2017
- Public Engagement & Equalities Forum, 7th September 2017
- Lewisham & Greenwich Trust 21st September 2017
- Equality & Diversity Group 21st September 2017
- Overview & Scrutiny Committee, 31st October 2017
- Healthier Communities Select Committee, 1st November 2017

6. PUBLIC ENGAGEMENT:

• A comprehensive public and stakeholder engagement plan and associated activities are located in Appendix 1 and 2.

7. HEALTH INEQUALITY & PUBLIC SECTOR EQUALITY DUTIES:

- The Equality Impact Assessment was completed and published (on the website) as set out in the formal consultation document and is attached.
- It was reviewed by the CCG Equality and Diversity Group on 21st September 2017.
- The Equality Impact Assessment will be refreshed after the review of the responses, comments and alternative proposals and will be resubmitted to the Governing Body on 11th January 2018.

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Public Consultation: The future of the NHS Walk-in Centre and improving provisions and access to primary care – Key themes

1. Purpose

- 1.1 The purpose of this report is to provide the Governing Body with an early assessment on the consultation on *the future of the NHS Walk-in Centre, New Cross and improving provision and access to primary care* and the rationale underpinning the recommendations.
- 1.2 It is important to note that the CCG may not have captured all the themes from responses as the closing date was 30th October 2017.
- 1.3 Therefore, in order to review and assess all the responses and fully consider all the suggested alternatives to the consultation more time will be required to produce the final evaluation to inform the consideration of the CCG response. These will be published in line with best practice.

2. Background

- 2.1 On 13th July 2017 the NHS Lewisham Clinical Commissioning (LCCG) Governing Body approved the recommendation to formally consult on *the future of the NHS Walk-in Centre and improving provision and access to primary care*.
- 2.2 The CCG adopted commissioning responsibilities for the NHS Walk-in Centre from NHS England in 2015, when the GP register was disaggregated from the Walk-in Centre. On the 1st January 2016 an extension to the contract was issued to the incumbent provider of the Walk-in Centre, located in the Waldron Health Centre for a period of 24 months.
- 2.3 In line with the public sector duty to consult, pre-consultation on the proposal and the plans for formal public and stakeholder consultation were reviewed by the Healthier Communities Select Committee on 20th July 2017. A formal and comprehensive public, patient and stakeholder consultation programme was developed to enable views and comments to be sought and was launched on 8th August 2017. The consultation ran for a period of 12 weeks. This was to enable sufficient time the public and stakeholders to provide a considered response (taking into account of the last four weeks of the school summer holidays) and to ensure consideration by the CCG of what if any impact there may be and take appropriate mitigating action.
- 2.4 Our approach to engagement, which supports the consultation this are referenced in Appendix 1 and 2. We recognise that there are different ways of engaging with our local communities and therefore our engagement programme has consisted of face to face outreach with various groups and to the diverse communities in Lewisham. We have met with homeless charities, community development groups, community hubs, children's centres, parents' forums, patient participation groups, faith groups, local ward assemblies and students.

3. Key themes

3.1 The key themes are based on a series of engagement events, stakeholder meetings, letters and emails to the CCG and an early review of the responses provided in the survey. This report also reflects feedback from the Healthier Communities Select Committee. It is important to note that a more comprehensive qualitative analysis and review of all responses will be conducted. This is to ensure that appropriate consideration and reflection is given to all responses and proposed alternatives.

3.2 GP Extended Access Service

- 3.3 The vast majority of responses to date indicate that there is not only a lack of awareness of this new service, but that residents contacting their local GP practices are not being routinely offered this choice. Respondents were not aware that the GP Extended Access service operates 8am 8pm, 7 days per week and provides both nurse and GP bookable appointments (including video consultations) and most importantly has access to medical records.
- 3.4 This is supported by a review of all GP practice websites in Lewisham where to date only 14 out of the 39 practices provide information on the GP Extended Access service on their sites. It is apparent that the service is underutilised, particularly by GP practices in the north of the borough.



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- 3.5 This concurs with the Healthwatch Q2 Intelligence Report, which provides a 'qualitative view' and concluded that a significant number of people were unaware of the service.
- 3.6 The GP Extended Access service has re-located to a purpose built suite and will be re-launched in November 2017. The CCG has contacted all GP practices to ensure that frontline staff are aware of the service.
- 3.7 Unable to get through over the phone/Unable to get an appointment with their GP
- 3.8 There were a significant number of responses where people were either unable to get through over the phone and/or unable to get an appointment with their GP. There is also a lack of awareness of the 'extended' opening hours of local surgeries.
- 3.9 As alluded to earlier not all GP practices are not routinely providing patients with the choice of a GP Extended Access appointment. This is a recurrent theme in Lewisham with regard to appointments and is supported by regular qualitative Healthwatch Intelligence Reports. However, the Healthwatch Q2 Intelligence Report does suggest that for this period people's views were more positive about GP practices in the borough, which is an improvement on the previous quarter.
- 3.10 The GP National Survey² is an annual England-wide survey that gathers data on patients' experiences of their GP surgeries. In July 2017 questionnaires were completed by 4,048 Lewisham patients. Ipsos MORI administers the survey.
- 3.11 Lewisham was slightly below the national average for overall patient experience of their GP practice. The national average was 85% and Lewisham scored 83%. However, what is clear is that in Lewisham the difficulty patients experience is getting through over the phone to their local GP practice and this fuels the overall dissatisfaction rates.
- 3.12 For ease of getting through over the phone the national average is 68% of respondents who found it either very easy or fairly easy and for Lewisham it was 62%. However, there are 3 GP practices that are below 35% of respondents who found it either easy or fairly easy to get through over the phone. The CCG has provided additional funding to 8 GP practices (including 4 in the north of the borough) for specific improvements in telephony infrastructure.
- 3.13 However, once patients do get through the satisfaction rates increase with regard to getting an appointment. In relation to the convenience of the appointment the national average was 92% being convenient and for Lewisham CCG 91% responded that the appointment they got was convenient. In terms of success rates of getting to see or speak to a nurse or GP from their surgery the national average was 84% and for Lewisham the average was 81% were successful.
- 3.14 All Lewisham GP practices offer GP Online Services, which includes booking appointments, ordering repeat prescriptions and accessing medical records. Lewisham is currently the third best performing CCG in London for the number of patients that are registered for online services. The CCG will look to continue this good progress and support patients and practices to maximise the benefits of this facility. Online services free up practice time to support patients who may not be able to take advantage of online services and need to contact to contact the practice by phone.
- 3.15 As part of the eConsultations GP Forward View programme, the CCG are developing local solutions to improve access at GP practices, which are supported by technology e.g. symptom checkers/video consultations. These alternatives free up time for GPs enabling them to spend more time managing patients with complex needs. For example the GP working remotely can provide a consultation, in about a third of the time of a traditional face to face appointment. As well as improving access for patients, evidence to date indicates that online consultation systems can free up to 10 per cent of the GPs' time.
- 3.16 NHS England has commissioned the North of England Commissioning Support Unit to collect *Third Next Appointment* (TNA) data from each general practice in England. TNA is intended to give an indication of the amount of time in days a patient theoretically would need to have waited



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for an appointment at the time a booking was made. This will give NHS England a view of waiting times for GP appointments and play an important part in understanding the pressure on healthcare systems as we move into winter. Every practice received a call during September and October 2017. We are awaiting the results of this audit, which should be available to CCGs next month.

3.17 Audits conducted by the South East London Primary Care contracting team in August 2017, indicated that there is sufficient capacity to offer patients a good choice of GP practices to register within a 1 mile radius of the Waldron Health Centre. However, during the practice reviews it became evident that both the ability to appropriately assess capacity and demand and therefore capability to absorb any additional activity is subjective. Therefore, the CCG will work with practices to better understand their capacity.

3.18 <u>Unregistered</u>

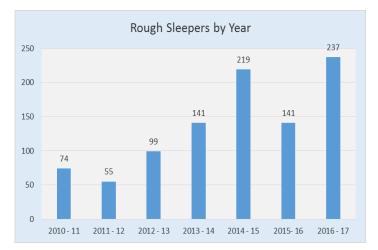
- 3.19 A number of those we engaged with from local organisations raised concerns about the potential number of people who live in the borough and might not be registered with a GP.
- 3.20 It should be noted that the CCGs allocation for primary medical services is calculated on the number of people on the total GP registered list (327,824 at September 2017) and not on the number of people resident in the borough.
- 3.21 The initial review of activity data presented as part of this consultation demonstrated that some 28.6% (8,367) of all attendances to the Walk-in Centre in 2016/17 could not be attributed to any CCG. In order to attribute the attendance to a CCG the GP details are required. Therefore, for those attendances without these details the assumption is that these are attendances for people who are not registered with a GP or the details are unknown. Unfortunately, this is a commonplace issue with Walk-in Centre activity because it is not linked to an individual's medical record.
- 3.22 The CCG has reviewed the activity data from the Walk-in Centre for 2016/17 to support the Equality Impact Assessment and potential number is not as significant as first perceived. The CCG has modelled the potential number of unregistered patients or where no GP was identified by using the first part (partial) of the postcode of the address attributed to each attendance. This approach was necessary in order to comply with data protection rules on Patient Identifiable Data (PID).
- 3.23 Of the 8,367 attendances where a GP was not identified, based on a review of partial Lewisham postcodes, the number is estimated at 2,300 people potentially resident in Lewisham. This number is likely to be heavily inflated due to the inclusion of some partially shared postcodes with the 5 other south east London boroughs and Croydon. Consequently, the remainder of the 8,367 attendances, approximately 6,067 can be attributed to non-Lewisham residents.
- 3.24 The CCG has commissioned additional Patient Advice Liaison Support (PALS) at the Waldron Health Centre to support patients to be registered with a GP over the winter period to March 2018.
- 3.25 Concerns were also raised about unregistered students and the CCG attended the *Fresher's Week* at Goldsmiths College (See Appendix 1: 2.24). However, the CCG intends to develop an annual communications and engagement programme for students to coincide with regular intakes.
- 3.26 It is also important to note that Goldsmiths College has commissioned the Amersham Vale Training Practice to register 2,000 students under a separate commercial arrangement. The CCG has supported the practice in agreeing additional space within the Waldron Health Centre. The Amersham Vale Training Practice provides weekly drop-in sessions on site.

Lewisham

Clinical Commissioning Group Table 1: Rough Sleepers; Source: Lewisham Council

3.27 Vulnerable/Homeless

- 3.28 There has been significant concern expressed from the outset of the consultation from the local MP, local homeless charities, GP practices, residents and more recently local faith groups for those most vulnerable in New Cross and Deptford – specifically the homeless.
- 3.29 The CCG through its Equality Impact Assessment identified that this is where there could be a gap in services for the homeless in New Cross and Deptford.



- 3.30 The CCG commissions two GP practices who provide Enhanced GP services to the four hostels in Lewisham. However, these services support those who are known to agencies and access the hostels.
- 3.31 Consequently, the CCG organised a multi-agency summit with the council to better understand the challenges faced by the homeless accessing services across the system. A key requirement for the CCG from the homeless summit was to consider the barriers to accessing primary care services for the homeless and to inform any additional provision or services.
- 3.32 The multi-agency homeless summit took place on the 18th October 2017 and was well received by all those in attendance. It presented a unique opportunity where representative from agencies across the system providing services and support to the homeless came together. There were representatives from homeless charities including, Deptford Reach, 999 Club, Bench Outreach, St Mungos, Thamesreach, Lewisham & Greenwich NHS Trust, South London & the Maudsley NHS Trust, Pathway, Healthy London Partnership and Healthwatch.
- 3.33 The summit heard from the council that the number of rough sleepers in New Cross and Deptford in 2016/17 was 237 (See Table 1). However, local charities advised that these numbers were an underestimation and this was the tip of the iceberg.
- 3.34 The council reported that the numbers of rough sleepers had risen over the years due to a number of contributing factors; austerity, public sector service reductions, welfare reform and the housing crisis.
- 3.35 The summit received a joint presentation from Bench Outreach and the 999 Club on 'Poverty and exclusion among people accessing homelessness services in Lewisham'. The presentation outlined the preliminary analysis of a survey conducted across three organisations, the 999 Club, Bench Outreach and Deptford Reach, over a two week period in October 2017. Its purpose was to inform service development, joint working and strategic planning. In summary the recommendations included; development of gender specific services, a review of supported accommodation, support for the vulnerable housed and facing the introduction of Universal Credit, review of Mental Health service provision for the homeless, the development of a similar pathway, with the guarantee of a same day service in the north of the borough for the homeless and support for the development of services to people who are eligible for benefits or housing support.
- 3.36 The summit mapped the many pathways and services provided for the homeless in New Cross and Deptford. However, two things were apparent with regard to accessing primary care services for the homeless; (i) for those known to the system and able to access beds in hostels the GP Enhanced Primary Care Service met their needs and the service was well received by all agencies; and (ii) for those termed as 'rough sleepers/sofa surfers' the GP Extended Access service presented an additional barrier due to the requirement to be registered with a GP practice in Lewisham and also being constrained by having to book and attend an appointment at a fixed time.



- 3.37 The summit committed to do a number of immediate things;
 - (a) To set up a homeless redesign network, which would meet on a regular basis this would be facilitated by commissioners (the council and the CCG);
 - (b) The CCG committed to working with local GP practices located in the Waldron Health Centre to develop an additional alternative service for the rough sleepers in New Cross and Deptford.
- 3.38 The CCG will also be running training sessions for all GP practices in February 2018 at a protected learning time event on registering and supporting the vulnerable utilising the Healthy London Partnership training materials and toolkit.
- 3.39 A further outcome from the summit was in relation to the Mental Health Assessment & Liaison Service provided by the South London & the Maudsley (SLaM) Trust. During the consultation concerns had been raised by the homeless charities about changes to this service. A solution has been provided through the current Clinical Service Lead for the Assessment & Liaison Service who is a dual trained nurse and has a specific interest in Homelessness and Public Health. This will consist of Mental Health Assessment and advice to service users and staff at the 999 Club for six months.

3.40 Children under five years

- 3.41 Concern was raised that the Walk-in Centre saw a large number of children under 5 years of age and that the GP Extended Access service was not seeing children under 18 years of age. The GP Extended Service now sees all children, following the recent relocation to the dedicated suite at University Hospital Lewisham. In addition, it is recognised that it is best practice for GP surgeries to triage and prioritise children under 5 years for urgent care and management.
- 3.42 Not enough GPs and Nurses
- 3.43 The capacity of local GP practices in Lewisham and the lack of GPs and Nurses was a recurrent theme particularly in the written submissions.
- 3.44 Health Education England has conducted a national workforce analysis published in January 2017 to support the General Practice Forward View on Primary Care for GPs and Nursing.
- 3.45 In comparison to both the national and London *GP Full-time equivalent (FTE) to patient list size ratio* Lewisham is in a better position and this trend continues when compared with neighbouring CCGs in Lambeth, Southwark, Greenwich, Bromley, Bexley and Croydon.
- 3.46 In practical terms this means that in Lewisham there are fewer patients to each GP. The national average GP FTE to patient list size ratio is 1:2000 and for London the average is 1:2100. For Lewisham CCG the average GP FTE to patient list size ratio is 1:1900, which equates to 143.8 FTE in January 2017. These ratios do not include locums, retainers and registrars, which do help to support the substantive workforce. This also excludes the GP Extended Access (which includes Nurses and GPs) and the Primary Care Assessment (GP Streaming) services.
- 3.47 The current number of GPs in Lewisham as per the latest publication of NHS Digital data (publication August 2017; data extracted 30th June 2017) is 147 as shown in Table 2 below;

Table 2: GP WTE

CCG	All	GP	Salaried/Other	GP	GP	GP
	Practitioners	Providers	GPs	Retainers	Registrars	Locums
08L Lewisham	161	94	53	1	4	9

- 3.48 Notwithstanding our benchmarked position the CCG recognises GP issues in some local practices including retirement over the next 3 years.
- 3.49 A joint bid across south east London CCGs has been approved for 45 additional overseas doctors as part of the International GP Recruitment Programme.(https://www.england.nhs.uk/gp/gpfv/workforce/building-the-general-practice-



workforce/international-gp-recruitment/). The CCG are also working closely with our local GP trainers to support recruitment and retention of GPs who train in Lewisham.

- 3.50 Health Education England has also conducted a national workforce analysis on Nursing Fulltime equivalent (FTE) to patient list size ratio puts Lewisham in a better position in London. However, when compared to the national average Lewisham falls behind. The national average Nursing staff FTE to patient list size ratio is 1:3600 and for London the average is 1:5300. For Lewisham CCG the average Nursing staff FTE to patient list size ratio is 1:5000, which equates to 58 FTE. However, all London CCGs have a lower ratio of nursing staff compared with the national average.
- 3.51 In recognition of the challenges facing our nursing workforce, the CCG has been working in partnership with Lewisham Community Education Providers Network (CEPN), on developing and sustaining the Primary Care Workforce. This has included on-going recruitment of newly qualified nurses, or nurses from other domains, to undergo General Practitioner Nurse training in order to address the early succession issues in Lewisham.
- 3.52 Lewisham has 4 of the first Healthcare Assistants from primary care in London on the Nurse Associate training programme at the University of Greenwich. The CEPN supported by the CCG has commissioned additional places for the Advanced Care Practitioners at Greenwich University (MSC in Advanced Clinical Practice). There are currently 10 on the course and 4 started in September 2017.
- 3.53 In Lewisham, 6 General Practice Nurses commenced non-medical prescribing, which supports with reducing the workload of GPs and improving patient satisfaction training.
- 3.54 The CCG appointed the first Nurse Consultant in Primary Care in the country, in addition to appointing 3 General Practice Nurse Advisors to support with professional development and recruitment.
- 3.55 The CEPN has supported 6 student nurses on the 3rd year management placements in general practice and each spends 3 months in GP practices. Consequently, 5 have qualified and 2 are working for GP practices in Lewisham and 1 is a District Nurse in Lewisham.
- 3.56 Practice nurses are recruited directly on completion of their training and are being mentored by the CCG Nursing Team. Currently there are no vacancies in Lewisham except where practices are not recruiting.
- 3.57 The CCG has also submitted a successful bid against the GP Forward View Clinical Pharmacist in General Practice programme, which will support Clinical Pharmacist to work in GP practices. This bid will initially cover a population of approximately 90,000 and provide additional clinical support to GPs in managing patients and their prescribing needs.
- 3.58 Wound dressings
- 3.59 A specific concern was raised by the Save the Lewisham Hospital Campaign and a local GP practice about the provision of services to support care for wound dressings.
- 3.60 The GP Extended Access service provides appointments with nurses who are able to access patients' medical records, which enables continuity of care. The service provides care for wound management and from November 2017 when the service relocates, will be providing an additional 1,000 nurse appointments. In 2018, this will increase to 2,600 additional bookable nurse appointments.
- 3.61 Each year NHS Lewisham Clinical Commissioning Group invests an 'additional premium payment' of £3.2M to GP practices providing core services to patients. The CCG agreed in May 2017 with the Local Lewisham Medical Committee and the London-wide Medical Committee (which represents GPs) to continue to include payment for wound dressings (post-operative wound care and sutra removal). Therefore, patients in Lewisham will also be able to access support from their local GP practices.



3.62 Winter Planning and A&E

- 3.63 Across all types of responses and engagement, concern has been expressed with regard to planning for winter and the potential impact on A&E. However, it is important to note that other CCGs anecdotally report no or minimal impact, with no significantly spiked increase in A&E attendances associated with Walk-in Centre closures, which are not co-located with A&E. Where similar changes have been made by more local CCGs such as Lambeth, Southwark and Greenwich there have been no reported adverse shifts in activity.
- 3.64 Monitor (2014)³ identified that there was no actual published evidence on the effects of Walkin Centre closures on actual A&E attendance figures. Walk-in Centre's do create additional Primary Care demand in their immediate geographical location e.g. because of the convenience over making a GP appointment and higher propensity for use by patients registered with GPs in that area.
- 3.65 The Pinchbeck (2014 Social Economic Research Centre) Study 'Estimating Impacts of Walk-in Centres at Hospital Emergency Departments in the English National Health Service'; reviewed actual hospital records. The study identified a 5% to 10% effect of patients attending A&E who would otherwise go to a non A&E co-located Walk-in Centre. An estimated figure of 5-10% outlined in the Pinchbeck report for A&E impact modelling could add an estimated at between 4 and 8 patients per day (based on 29,528 Walk-in Centre attendances in 2016/17) to an A&E Department.
- 3.66 Our local data supports the Pinchbeck Study, as it demonstrates that in 2016/17 less than 7% of the total number of attendances (29,528) after seeing a GP or nurse at Walk-in Centre were referred to A&E, this equates to **an estimated 5 attendances per day.** Again, here there is no evidence to suggest that the referral to A&E would translate into an attendance to the University Hospital Lewisham site or any other A&E Department located within reasonable and accessible proximity to the Waldron Health Centre.
- 3.67 However, it is important to consider the two GP services at the University Lewisham Hospital site, as mitigation; The GP streaming/redirection and the Primary Care Assessment Pilot. The GP streaming commenced this month and provides streaming and redirection support for patients attending the A&E Department. Patients are either provided with support for alternative services, or clinically streamed to a number of pathways. This includes, the primary care assessment pilot, where a GP is located in the Urgent Care Centre, who sees and treats patients. This pilot has been in place since October 2016 and has successfully redirected on average 10% of activity away from the A&E Department.
- 3.68 The CCG in partnership with Lewisham & Greenwich Trust and the system A&E Delivery Board has a robust Winter Plan, which has been submitted to NHS England.
- 3.69 The local mitigations are set out in the Equality Impact Assessment, which includes;
 - (a) GP streaming and redirection in the Urgent Care Centre, which commenced on 1st November 2017;
 - (b) Increased nurse and GP appointments provided by the GP Extended Access service;
 - (c) Patient Advice & Liaison Support to help patients register with a GP, located at the Waldron Health Centre, to March 2018; and
 - (d) Development of additional support for the rough sleepers as identified earlier.
- 3.70 Lastly, the clinical review has demonstrated that the vast majority of people attending the Walk-in Centre for colds and sore throats did not need to see a GP. This is supported by the national review of Walk-in Centres conducted by Monitor. Therefore, in order to reduce pressure on primary care services over the winter period as a system we need to support residents to access the right care.

³ Monitor Walk-Centre Review (2014): <u>https://www.gov.uk/government/publications/nhs-walk-in-centre-services-in-england-review</u> **11** | Page LCCG: GOVNOV2017 - WiC&PC



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- 3.71 The CCG will be supporting the national annual Winter Campaigns such as *Stay Well Winter* and *Stay Well Pharmacy*.
- 3.72 However, the CCG has committed to developing a bespoke winter campaign for the north of the borough to support those who did not need a GP appointment to use alternative services or to self-care. The CCG will be working with local pharmacies and preventative services. This is evidenced by the recurring theme from the consultation and highlighted by Healthwatch that residents are not aware of the alternative services such as pharmacies or the GP Out of Hours Service (accessible when GP practices are closed), which is provided by the South East London Doctors Co-operative (SELDOC).

4. Alternatives

- 4.1 The vast majority of alternatives summarised below relate either to extending existing GP services or to developing more bespoke services. Additional time is needed to fully assess these.
- 4.2 The alternative models and services proposed include;
 - providing a satellite GP Extended Access service in the Waldron Health Centre;
 - a Walk-in service for the homeless;
 - getting GP practices to extend their hours;
 - re-introducing same day appointments at the GP practices;
 - same day triaging at GP practices;
 - providing walk-in appointments at GP practices;
 - charge patients £20 for a same day GP appointment
 - increase the use Clinical Pharmacist or Nurse Practitioners;
 - provide STD test at GP practices;
 - clearer appointment systems;
 - fast track service for the elderly and children;
 - register student as part of enrolling;
 - provide a named GP for each patient;
 - provide online booking;
 - provide a diagnostic centre at the Waldron (e.g. ultrasound and x-ray);
 - develop more alternative care;
 - expand SELDOC;
 - offer wellness and preventative groups;
 - turn the Waldron Health Centre into one good GP facility;
 - develop video or Skype consultations;

4.3 The CCG will review, consider and assess and publish all alternatives proposed in response to the key questions in the survey and from the engagement activities, which we have undertaken.

5. Financial Implications

The Finance & Investment Committee will be advised of the financial implications associated with extending the Walk-in Centre contract.

6. Equalities implications

The Equality Impact Assessment was completed and published and is attached. The document was reviewed by the CCG Equality & Diversity Group. The Assessment will be refreshed after review of the responses and resubmitted to the CCG Governing Body in January 2018.

Appendix 1: Strengthened Public and Patient Engagement

1 Pre-consultation

- 1.1 In January and February 2017 the CCG interviewed users of the Walk-in Centre to better understand why they used the service and what the CCG could do to better improve access to primary care. A series of interviews took place on different days and times to ensure that a representative sample of users and views would be reflected.
- 1.2 The main driver of patients choosing to use the Walk-in Centre was being unable to get an appointment with their own practice. However, a significant number of patients perceived that they would be unlikely to get an appointment and therefore, went directly to the Walk-in Centre without contacting their own GP; 46% said they went directly to the Walk-in Centre because they did not think they would be able to get an appointment at their GP practice.
- 1.3 The CCG asked those interviewed in January and February what they would do if the Walk-in Centre was not available and 40% stated they would have used A&E if the Walk-in centre was not available and 27% would just wait and see their own GP.
- 1.4 At the point these CCG led interviews users there were no other alternatives available, as the GP Extended Access Service was not launched until April 2017.
- 1.5 Of those interviewed, 82.2% of people reported that they would consider using another service, which offered bookable appointments at another location, if their own GP practice did not have appointments available.
- 1.6 In January 2017, we commissioned Healthwatch Lewisham to deliver engagement activities with seldom heard groups in Lewisham. This engagement was commissioned to support a future model of Primary Care Extended Access, organised around the needs of patients and local populations. It was important to seek the direct views and experiences of the following groups;
 - People from Black African and Caribbean backgrounds
 - People with a learning disability
 - People with a physical or sensory disability
 - People with mental health issues
 - People living in areas of deprivation
- 1.7 The recommendations were used to develop the GP Extended Access service, which commenced in April 2017 and are included in the Equality Impact Assessment.
- 1.8 The Healthwatch report was submitted to the Primary Care Commissioning Committee on 15th August 2017.

2 Consultation

- 2.1 The CCG outlined its approach to engaging members of the public, patients and stakeholder in this formal consultation to the Healthier Communities Select Committee on the 20th July 2017. We have ensured that the information on the consultation is accessible online and paper copies have been provided when requested. The CCG also commissioned easy read, audio and Vietnamese versions.
- 2.2 The survey received 1,768 responses. 82% of respondents did not support the proposals, 11% supported the proposals, 7% did not know and 1% did not answer this question. The critical question which underpins the recommendations to the Governing Body was with regard to confidence levels in getting an appointment at their GP surgery or using the GP Extended Access Service if it replaced the Walk-in Centre. There was not an overwhelming majority of respondents who were confident.
- 2.3 Engagement
- 2.4 We acknowledge the need to find more innovative ways of reaching those in our community who do not traditionally engage with processes of this nature or the seldom heard and have visited



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local businesses – particularly those where we are able to access residents from Black Minority Ethnic backgrounds.

- 2.5 We have also been visiting local transport hubs (Lewisham, Catford, Forest Hill, Sydenham, New Cross and Gate stations) and the Lewisham Shopping Centre and we have supported all GP practices to send text messages to their patients on the consultation.
- 2.6 People of working age are the highest users of the New Cross Walk-in Centre. Therefore, the CCG has had a visible presence at key transport hubs and train stations in the borough during the morning rush hour. The CCG distributed 1,175 postcards to commuters, in addition to making announcements on the consultation.
- 2.7 This section sets out of a summary of some of the interventions and a list of engagement activities are located in Appendix 2;
- 2.8 Patient Participation Groups (PPG)

The CCG supported the development of neighbourhood Patient Participation Groups (north, south west, central and south east) in 2015, working with the local GP Federation, One Health Lewisham. The CCG attended this borough-wide meeting with attendees representing the PPGs from Lewisham practices. A presentation of the consultation was given to the 40 people who attended the event. Attendees were asked to take part in a snap shot vote – using a coloured care voting system. Of those attending 30 took part in the vote; 19 supported the proposal; 3 did not; and 8 were unsure. The confidence levels varied with regard to getting an appointment with their own GP or the GP Extended Access service.

- 2.9 Local charities and voluntary organisations
- 2.10 Deptford Reach

The CCG delivered a presentation to 12 people at the service with written materials to support discussion and 6 people completed paper surveys (who were all registered with GPs). There was positive feedback about the Enhanced GP Service for the homeless commissioned by the CCG. However, concerns were raised about those who attended the Walk-in Centre and might not be registered with a GP. There was a lack of knowledge about the GP Extended Access service. The view was that the homeless would be more likely to ask for appointments in person due to a lack of phone credit.

2.11 999 Club

The CCG attended the 999 Club and spoke with people in small groups and individually.18 surveys were completed and all were registered with a GP. 14 service users responded and 4 staff and volunteers who lived in the borough and had used the Walk-in Centre. Concerns were raised again here about the ability to access the GP Extended Access service due to a lack of phone credit and having to travel to their GP to book an appointment at the Lewisham Hospital site.

2.12 Evelyn Parents Forum

Evelyn Parents Forum is a local Deptford volunteer parent/carer community group. The CCG attended the Forum and spoke with 4 parents and 3 completed the survey. Although not concerned for themselves 2 parents expressed concerns for others about the proposed closure. There were strong concerns from 1 parent about for their own vulnerability with regard to probable additional travel costs and travelling to the Lewisham Hospital site on public transport from Deptford with sick children.

2.13 Stakeholders

2.14 Kaleidoscope Children's Centre

The CCG spoke with parents of children from across the borough and from diverse backgrounds at the Centre, engaging in total with 25 people and 16 completed the survey. People using the services at Kaleidoscope were overwhelmingly in favour of the proposal. Particularly, with regard to the benefits of having a fixed/booked appointment when travelling with a sick child – rather than a queue up and wait system.

2.15 Neighbourhood Community Development Partnership

The CCG attended an event held by the partnership to provide information for community organisations, which was shared with 18 community organisations. There were a handful of members of the public were present. The purpose of attending this event was to utilise the existing community channels and network to inform people about the consultation and encourage participation. People at the event had not used the GP Extended Access service and were not aware that it offered appointments 8am-8pm, 7 days a week. Concern was expressed that people in the area (on the border of Southwark) were often forgotten in any health decisions.

2.16 Downham Health & Leisure Hub

The CCG spoke with people at this community hub. This engagement was successful in reaching people of working age and diverse ethnicity. Of the 40 people, 6 completed the paper survey – with others agreeing to complete it online. The majority of those engaged stated that the Walk-in Centre was too far and some used the Beckenham Beacon Urgent Care Centre. The GP Extended Access service had been used by one person who had a positive experience of the service. More people here supported the proposal, however this was not unanimous.

2.17 Phoenix Green Man (South Lewisham)

The CCG attended this Health & Well-being event, which was open to all residents and was attended by 70 people, who were mainly aged over 55 years. The CCG had a stall at the event and provided a short presentation to 21 people. Of those 21 people 4 had used the Walk–in Centre. None of those who the CCG spoke to were aware of the GP Extended Access service. During a show of hands vote, where 16 people voted; 11 did not support the proposal, 2 were unsure, 1 supported it and 2 were out of borough residents.

2.18 Local NHS Trusts and neighbouring Clinical Commissioning Groups The CCG wrote to all local NHS Trusts and neighbouring Clinical Commissioning Groups at the start of the consultation.

The CCG met with representatives of Lewisham & Greenwich Trust to discuss the proposals and possible mitigations. The CCG received verbal reassurances on the mitigations and have requested a formal written response.

2.19 Save the Lewisham Hospital Campaign (SLHC)

The CCG wrote to the campaign on 8th August 2017 and received a response on 29th September 2017, which outlined 8 specific areas of concern. A meeting was arranged with representatives of the campaign Dr Louise Irvine, Dr Tony O'Sullivan and Jane Mandlik, The CCG has provided a formal response to the areas of concern, which has been published here; <u>http://www.lewishamccg.nhs.uk/get-involved/PublishingImages/Pages/Have-your-say-Walk-in-Centre,-New-Cross/SLHC_CCG_Statement_16102017.pdf</u>

A second response was received from SLHC on 30th October 2017, which included the following two recommendations;

'1: We still believe there are grounds for delaying the closure of the WIC until suitable and improved services are in place for those who need them, easily accessible in time and place; and 2: These disadvantaged groups will not be able to use the GPEA service – to use the GPEA service a person must already be registered with a Lewisham GP practice. We think the WIC should remain open until adequate plans have been made to meet the needs of these groups of people, if and when the WIC closes.'

2.20 Leegate Community Centre

The CCG engaged with 8 people who had used the Walk-in Centre. Some expressed positive comments about the GP Extended Access service although they had not used it themselves. Some valued the Walk-in service because they had attended in a crisis and believed they were treated better than at their own GP. Of the people we spoke to 3 supported and 4 opposed it and 1 person did not complete the question. There was less certainty about



confidence levels in being able to book appointments using either their own GP or the Extended Access service, with half of people uncertain about answering the question.

2.21 Young Mayors Advisors

The CCG met with 8 Young Advisors and provided information about the proposals. The young Advisors' experiences of access to GP appointments was positive, with most reporting that they could get an appointment when they needed one. When asked about their views on the proposals 2 people supported the proposal, 2 were uncertain and 4 did not support the proposal.

2.22 Local residents, patients, NHS staff and users of the New Cross Walk-in Centre

2.23 Waldron Health Centre Drop-in Sessions

The CCG organised a series of drop-in sessions at the Waldron Health Centre. These sessions were open to the public, patients, staff and included two people outside the Waldron Health Centre, who told us they were rough sleeping and who completed the survey. These rough sleepers were registered with a GP practice, which is commissioned to provide an Enhanced Service to the Homeless. However, they expressed concern at the potential loss of the Walk-in Centre in that it supported people who could not make appointments. Over these three initial drop-in sessions, 90 people were engaged with and 24 completed the survey with other agreeing to complete online. Although most people understood the requirement to address the needs of the entire borough and some people supported the proposal; the majority did not agree with the proposal. Reasons provided included proximity of the Walk-in and the potential impact on vulnerable people.

From additional sessions held during the week commencing 23rd October 2017 at the Walk-in Centre and engaging with users of the service; 28 people completed a survey, of which 10 supported the proposal, 8 did not and 10 did not know. In addition, a number of people committed to complete the survey online.

2.24 Goldsmiths College Fresher's Fair

The CCG engaged with 300 students over the course of two days. Information of the consultation was made available with a brief explanation. The CCG attendance at the fair was also to encourage new students to register with a local GP register and explaining to overseas students the points of access to Primary Care in Lewisham. There was also a helpful conversation with a member of staff who is a first aider for the College about the proposals.

2.25 Lewisham Islamic Centre

The CCG had previously engaged with the centre on the development of the GP Extended Access service. This session was mixed but predominantly men were in attendance. The three women in attendance abstained in voting activity. The CCG held a presentation and discussion session on the proposal. There was appreciation of why the changes were proposed, but with concerns about losing the walk-in element. The majority of people did not support the proposal. One person was very confident about being able to get an appointment and remainder were not so confident. There was concern about expressing confidence levels in a service they had not experienced – GP Extended Access.

2.26 Lewisham Shopping Centre

The CCG had brief conversations with 92 people. This is where there were the highest awareness levels of the GP Extended Access service to date with more people in favour of the proposal. There were some very positive comments from people who had used the GP Extended Access service, with regard to its usefulness for working people and its caring staff. People registered with GP practices in the Sydenham area advised that they had been offered the GP Extended Access service, those registered in the New Cross area reported that they had not.

2.27 Elected Member of Parliament

Representatives of the CCG (Dr David Abraham, Urgent & Emergency Care Lead, and Diana Braithwaite, Director of Commissioning & Primary Care) met with Vicky Foxcroft MP. Our local



MP expressed concerns about students and access to primary care services for the most vulnerable, particularly the homeless and those residing in the UK without legal status. The CCG committed to providing our MP with updates during the consultation.

2.28 Local Ward Assemblies

2.29 New Cross and Evelyn Ward Assemblies

The New Cross Ward Assembly was not well attended by members of the public. However, the CCG engaged with and had conversations with 10 people and 6 completed surveys. The Evelyn Ward Assembly was attended by 40-50 people. The CCG had a stall providing information and proactively engaged with those attending. Although people understood the need to avoid duplication of services and the requirement to support all people in the borough, the majority were concerned about the impact on vulnerable people and that people would simply attend A&E.

2.30 Telegraph Hill Ward Assembly

The CCG were invited to attend the Telegraph Hill Ward Assembly and there were about 8 members of the public in attendance. Local residents posed a series of questions and were clear; as were the two ward councillors in attendance, that they did not support the proposals.

A formal response opposing the proposals was received on 30th October 2017 from Cllr Joe Dromey on behalf of the New Cross Ward Cllrs and Vicky Foxcroft MP.

2.31 The GP practices located in the Waldron Centre

The CCG (with the assistance of the Lewisham Local Medical Committee), in its capacity as a level 3 delegated commissioner met with the Amersham Vale Training Practice, Clifton Rise Family Practice and Dr Batra – all located in the Waldron Heath Centre. The purpose of these meetings was to engage with these GP practices as providers (and not commissioners) of core primary care services in the area.



Appendix 2: CCG led Engagement to support the formal consultation on the future of the NHS Walk-in Centre and improving provision and access to primary care

DATE	EVENT TYPE	TARGET GROUP	LOCATION	OBJECTIVES	STATUS
8.8.17	Meeting with Healthwatch	Key stakeholder to reach communities	Catford	Use update meeting to highlight the launch and ensure Healthwatch have materials to disseminate information about the consultation and encourage participation through their networks and at events.	COMPLETED
30.8.17	Meeting	Homeless people and people who are rough sleeping (as per the Equality Impact Assessment), vulnerable, including people with substance abuse issues	Deptford Reach 34 Speedwell Street Deptford SE8 4AT	 To reach those identified in Equality Impact Assessment as potentially impacted by proposals. Providing people using a support service with opportunities to hear about our proposals and share their views. 	COMPLETED
1.9.17	Drop-in	People using the Walk-in Centre and other health services	Waldron Centre – Ground Floor meeting room and foyer area	 Providing people using Walk-in Centre and other services at the Waldron Centre with an opportunity to hear about the proposals ask questions and share their views. 	COMPLETED
5.9.17	Attendance at New Cross Local assembly meeting	Local Community and Councillors	Mulberry Centre, Amersham Vale, New Cross SE14 6LE	Providing people in North Lewisham with opportunities to hear about our proposals, ask questions and share their views.	COMPLETED
6.9.17	Attendance at North Lewisham Community Development meeting	Range of voluntary, community and health organisations and members of the public	Lewington <i>Centre</i> , Eugenia Road, <i>Silwood</i> Estate, <i>Deptford</i> .	Engaging key community organisations with extensive reach to disseminate information about the consultation and encourage participation through their networks and at events.	COMPLETED
8.9.17	Drop-in	People using the facilities at Downham Health & Leisure Centre	Downham Health and Leisure Centre , Moorside Road during busy evening sessions	 Providing people in South Lewisham (including those living in areas of deprivation) with opportunities to hear about our proposals, ask questions and share their views. 	COMPLETED
9.9.17	Drop-in	People using the Walk-in	Waldron Centre –	Providing people using Walk-in and other	COMPLETED



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		Centre and other health services	Ground Floor meeting room and foyer area	services at the Waldron Centre with an opportunity to hear about the proposals and ask questions and share their views.	
12.9.17	Drop-in	People using the Walk-in Centre and other health services	Waldron Centre – Ground Floor meeting room and foyer area	Providing people using Walk-in and other services at the Waldron Centre with an opportunity to hear about our proposals, ask questions and share their views	COMPLETED
16.9.17	Health and Wellbeing event	People from across the borough attending a Health and Well Being event	Green Man Centre (Whitefoot Ward) Bromley Road SE6 2RP	Providing people with an opportunity to hear about our proposals and ask questions and share their views.	COMPLETED
18.9.17	Meeting	Homeless people and people who are rough sleeping (as per the Equality Impact Assessment)	999 Club Deptford Broadway SE8 4PA	 To reach those identified in EQI as potentially impacted by proposals Providing people using a support service with opportunities to hear about our proposals and share their views. 	COMPLETED
19.9.17	Drop-in	Parents with young children in highest area of deprivation in North Lewisham	Evelyn Parents forum – playgroup sessions 231 Grove Street, SE8 3PZ	 Providing people who may not be able to attend other sessions, due to childcare or transport, with opportunities to hear about our proposals and share their views. 	COMPLETED
19.9.17	Drop-in	Young people or Parents with children attending borough wide hub for children's health services	Kaleidescope Children's Centre, Rushey Green SE6 4JD	 Providing people who may not be able to attend other sessions, due to childcare or transport, with opportunities to hear about our proposals and share their views. 	COMPLETED
20.9.17	Meeting	Lewisham CCG AGM	King's Church, Lee SE3 9DW	 Providing people with an opportunity to hear about our proposals and ask questions and share their views. 	COMPLETED
25.9.17	Drop-in	Students who may not be registered with a GP (as per Equality Impact Assessment)	Goldsmiths College Lewisham Way SE14 6NW	 Providing students in Freshers' week with information about the future of the Walk-in Centre, how to access primary care in Lewisham and the need to register. 	COMPLETED
25.9.17	Meeting	Patient Participation Group representatives	Lewisham Civic Centre	 Providing PPG representatives from the borough's 39 practices people with an opportunity to hear about our proposals and ask questions and share their views. 	COMPLETED
26.9.17	Drop-in	Providing students with	Goldsmiths College	 Providing students in Freshers' week 	COMPLETED



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		about access to primary care and the need to register with a GP (as per the Equality Impact Assessment)	Lewisham Way SE14 6NW	with information about the future of the Walk-in Centre, how to access primary care in Lewisham and the need to register.
3.10.17	Attendance at Evelyn Local assembly meeting	Local community and Councillors	2000 Community Centre	 Providing people in North Lewisham with opportunities to hear about our proposals ask questions and share their views with a (GP) Clinical Director and Deputy Director of Commissioning.
4.10.17	Attendance at Get –On Lewisham borough wide digital event	People in Lewisham being supported to gain digital skills	Green Man Centre Bromley Road SE6 2RP	 Providing people from across the borough with an opportunity to hear about GP-ON Line (AT lead) and share our Consultation and share their views on-line (DM lead). NOT COMPLETE: Event was scaled down by organisers. On-line consultation materials were previously circulated and organisers have been asked to re- circulate these to all Get- On groups in the borough.
5.10.17	Drop-in	Young people or Parents with children attending borough wide hub for children's health services	Kaleidescope Children's Centre Rushey Green SE6 4JD	 Providing people who may not be able to attend other sessions, due to childcare or transport, with opportunities to hear about our proposals and share their views. COMPLETED
5.10.17	Visits to BAME businesses	BAME communities – to encourage participation in the Consultation and share information	Catford & Bellingham	 Reaching communities who have low rates of participation in the consultation. Having conversations with individual businesses to support them to generate awareness with their customers and providing easily portable materials.
10.10.17	Consultation promotion	Working age Lewisham patients (Equality Impact Assessment – high users of Walk-in) At train stations and	Catford Train station	 Providing information (postcards) about the consultation and GPEA to commuters travelling from Lewisham in the morning rush hour; to promote awareness of and participation in the consultation.



		transport hubs			
10.10.17	Drop –in	People with current or history of mental health issues using an advocacy service	Lee Community Centre Leegate SE12 8RG	 Providing people who have had may not be able to attend other sessions, due to childcare or transport, with opportunities to hear about our proposals and share their views. 	COMPLETED
11.10.17	Meeting	People from Lewisham who are Muslim (seldom heard group)	Lewisham Islamic Centre, Rushey Green SE13 6NZ	 Providing people with an opportunity to hear about our proposals and share their views. 	COMPLETED
12.10.17	Consultation promotion	Working age Lewisham patients (Equality Impact Assessment – high users of Walk-in) at transport hubs	Lewisham transport hub – train station (DLR and bus on 18.10.17)	 Providing information (postcards) about the consultation and GPEA to commuters travelling from or through the borough's major transport hub in the morning rush hour; to promote awareness of and participation in the consultation. 	COMPLETED
12.10.17	Drop-in	People of all ages and demographics using the borough's largest shopping centre	Lewisham Shopping Centre	 Providing people with an opportunity to hear about our proposals and share their views. 	COMPLETED
13.10.17	Consultation promotion	Working age Lewisham patients (Equality Impact Assessment) – high users of Walk-in) at transport hubs	Forest Hill Train station	 Providing information (postcards) about the consultation and GPEA to commuters travelling from or through the borough's major transport hub in the morning rush hour; to promote awareness of and participation in the consultation. 	COMPLETED
17.10.17	Consultation promotion	Working age Lewisham patients (Equality Impact Assessment – high users of Walk-in) at transport hubs	New Cross Gate – transport hub	 Providing information about the Consultation and GPEA to commuters travelling from or through the borough's major transport hub in the morning rush hour; to promote awareness of and participation in the consultation. 	COMPLETED
17.10.17	Visits to BAME businesses	BAME communities – to encourage participation in the Consultation and share information	Deptford / New Cross	 Reaching communities who have low rates of participation in Consultations. Having conversations with individual businesses to support them to generate awareness with their customers and providing easily portable materials. 	COMPLETED
17.10.17	Attendance at Local Assembly	Local Community and Councillors	Telegraph Hill Assembly	 Providing people with an opportunity to hear about our proposals, ask questions 	COMPLETED

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			Somerville Youth & Play Provision	and share their views.	
			260 Queen's Road SE14 5JN		
18.10.17	Consultation promotion	Working age Lewisham patients (Equality Impact Assessment – high users of Walk-in) at transport hubs	Lewisham DLR and bus station	 Providing information about the Consultation and GPEA to commuters travelling from or through the borough's major transport hub in the morning rush hour; to promote awareness of and participation in the consultation 	COMPLETED
18.10.17	Meeting	Homeless multi-agency summit – in response to previous engagement and Equality Impact Assessment findings	NHS Lewisham CCG Cantilever House SE12	 Providing key stakeholders (statutory and voluntary organisations supporting homeless people) with an opportunity to share their views on additional needs/services. 	COMPLETED
19.10.17	Consultation Promotion	Working age Lewisham patients (Equality Impact Assessment – high users of Walk-in) at transport hubs	Sydenham Station SE26 5EU	 Providing information about the consultation and GPEA to commuters in the morning rush hour; to promote awareness of and participation in the consultation. 	COMPLETED
19.10.17	Drop-in	Parents with young children	Abbotshall Healthy Living Centre, Catford SE6 1SQ	 Providing people with an opportunity to hear about our proposals, ask questions and share their views. 	COMPLETED
19.10.17	Drop-in	Walk-in Centre	Walk-in Centre	 Providing people with an opportunity to hear about our proposals, ask questions and share their views. 	COMPLETED
21.10.17	Meeting	Social housing tenants South Lewisham	Diversity Day – Phoenix Green man	 Providing people with an opportunity to hear about our proposals ask questions and share their views. 	COMPLETED
23.10.17	Drop-in	People at risk of social isolation	Lee Community Centre	 Providing people with an opportunity to hear about our proposals ask questions and share their views. 	COMPLETED
23.10.17	Meeting	Young people (14-23)	Lewisham Young Advisors	 Providing young people with an opportunity to hear about our proposals, ask questions and share their views. 	COMPLETED
24.10.17	Drop-in	Walk-in Centre users	Walk-in Centre	 Providing people with an opportunity to hear about our proposals ask questions and share their views. 	COMPLETED

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25.10.17	Drop-in	Walk-in Centre users	Walk-in Centre	Providing people with an opportunity to hear about our proposals, ask questions and share their views. COMPLETED
26.10.17	Drop-in	Walk-in Centre users	Walk-in Centre	 Providing people with an opportunity to hear about our proposals, ask questions and share their views. COMPLETED