

Questions from members of the public

Members of the PCCC introduced themselves to members of public present

- **Submission of formal petition from Sheffield Save Our NHS**

Sheffield Save Our NHS formally submitted a petition in response to NHS Sheffield CCG's consultation on Urgent Care. In particular the petition asks the CCG to re-consider the planned closures of the city centre NHS Walk-in Centre and Minor Injuries Unit at the Hallamshire Hospital.

On behalf of Sheffield Save Our NHS, Deborah Cobbett, gave an overview of the reasoning behind the submission of the petition and specifically requested more dialogue with the people of Sheffield because they believe the proposals "are unclear, unconvincing and unrealistic."

They also asked "where are the details of the local service options?"

1. Will you please consider our very serious submitted petition

She also asked the following questions regarding the future of the NHS in Sheffield:-

2. Will the CCG please be more open with the people of Sheffield about the destruction of our health service.
3. Will the CCG speak out against the cuts that are being imposed about the expensive contracts that you have to put out to tender, and about the hostile legal action that you get due to contracting process
4. Will you please reject unwarranted closures
5. Will you please speak out and join with Sheffield Save Our NHS about the undermining of clinical referrals

We are sorry to hear that some people believe the proposals are unclear, unconvincing and unrealistic. The CCG has tried to address some of the concerns we have heard about lack of detail by posting additional information on our website. This includes which practices sit within each neighbourhood and travel times. Also there are factsheets about how neighbourhoods currently work across the city.

Any future model for urgent care agreed after all the consultation feedback has been analysed and discussed in detail would not be fully implemented until 2020. This would be to allow us to develop the neighbourhoods further and all the supporting infrastructure that they would need to provide urgent care within 24 hours for their local population.

We will of course seriously consider the petition and are grateful to Sheffield

Save Our NHS for their work in raising awareness of this important consultation. The petitions we receive will be included in the formal feedback and form part of the independent analysis.

The CCG is committed to ensuring the whole population of Sheffield can access high quality health care.

Mike Simpkin on behalf of Sheffield Save Our NHS, expressed that there had been concerns regarding the format of the consultation from the beginning but expressed appreciation of the efforts to extend it and the efforts of the engagement team in organising meetings right until the end of the consultation.

As people are still finding it very difficult to understand exactly what is being proposed he requested that a clear timetable for the decision-making process be set out to enable people to understand and make further responses at appropriate times.

We have heard and acted on feedback from the public and other organisations and groups that they would like to receive more information around the proposals and the consultation extension gave us an opportunity to respond to this appropriately and to speak to more people drawn from the different geographies and communities, including hard to reach groups.

We understand that people need to have a clear timetable set out for both the decision making process and in the longer term, any implementation of final proposals. We will endeavour to share this as soon as we have finalised the details both internally and with our partner organisations and other key stakeholders e.g. the Healthier Communities & Adult Social Care Scrutiny & Policy Development Committee. At this stage, we are however clear that the Primary Care Commissioning Committee will receive a report on the feedback from the public consultation on 22nd March 2018 and the same committee expects to approve a decision on 20th September 2018.

- **Heeley Labour Party – Andy Shallice**

Andy Shallice, on behalf of Heeley Labour Party raised the following questions:-

1. Are you concerned, as we are, that there was no option on the consultation to keep the services where they are at present?

We firmly believe as a CCG that doing nothing is not an option as it would not address the access issues patients have consistently raised with us over the past few years in communities across the city. We also have to address the growing future challenge of workforce amongst GPs and nurses.

We stated at the beginning of the process that the inclusion of a preferred option did

not mean that this would necessarily be the option implemented at the end of the process. However, due to the complex nature of the subject it was however considered helpful to highlight to the public and stakeholders which option we believed offered the greatest benefits to patients and the health care system.

2. Given the fact that it is, in our experience that it has never been so easy to collect signatures for a petition in the middle of winter, in Jordanthorpe, Woodseats, in Gleadless Valley, in Heeley and in Richmond, one of the things that has become aware to us is that very few people are aware of the proposals to close and move services.

We have worked with the local press, who happily have been very supportive in spreading the word, as well as local radio and TV. In addition we have distributed thousands of leaflets across the city, including at supermarkets, GP practices, pharmacies, libraries, etc; held three public meetings about the consultation and numerous drop-in events as well as meeting with many community groups and other organisations. We have also used social media to spread the word as well as our own website. I am also pleased to report that many partner organisations and other groups have helped us promote the consultation.

3. Virtually everyone in the district that our Labour Party covers, in the South East of the City, expressed a view that quote 'everything is going to the Northern General'. That is not just a question of distance but is a psychological feeling that the services of the NHS, which are highly used and highly respected, particularly in terms of the Eye Clinic and the Minor Injuries Unit, are being moved so that they are not accessible to people in communities in the South East of the city and we find that extremely disturbing and would hope that you would concur with that?

The vast majority of urgent care is now delivered in general practice across the city – approximately 600,000 urgent same day appointments each year. The main focus of our proposals is to ensure that even more people can access the care they need locally by building on the neighbourhood model already in place across the city.

Currently approximately 18,000 patients attend the MIU and 10,000 the eye clinic at Royal Hallamshire Hospital. We know that a proportion of the people attending the MIU have minor illness symptoms and would be treated in their local community and the same would be the case for people who need urgent (not emergency) eye care.

However, we fully acknowledge the concerns that have been raised by many people about travel, parking and accessibility to the Northern General site and any final proposals after consultation to implement this model would have to address those concerns.

- **Hallam Labour Party**

David Sedgley, on behalf of Hallam Labour Party raised the following question:-

Do you share the same concern that this represents a real reduction in services particularly for people the south of the city but also as a city as a whole? Will you speak out about it and put the case forward as best you can to try to maintain the level of service we currently have?

The proposals have been put forward to address the issue of access to general practice, raised by many people across the city over the last few years, and also the major challenge of a reducing workforce in general practice and nursing.

The vast majority of urgent care is delivered in GP practices and the main part of our proposals is to provide more urgent care closer to people's homes, either at their own GP practice or a neighbouring one. We believe they would improve access to urgent care and ensure people get an appointment within 24 hours. We do not feel this is in any way a reduction in service.

The Chair advised all that the normal procedure is to forward any questions prior to the meeting. The Chair thanked the members of the public for their time, energy and commitment towards the NHS and thanked all, both individually and collectively, for their work on the petitions.

The Chair confirmed that formal responses would be made in writing to all questions raised from the above organisations.