SCHEDULE 2 – THE SERVICES

A. Service Specifications (Full Length Contract)

| Service Specification No. | 02/GMS/0191 |
|---------------------------|--|
| Service | Boscombe and Springbourne Weekend Walk-in service, operating Saturdays and Sundays 08.00 to 20.00. |
| Commissioner Lead | Planned and Specialist |
| Provider Lead | New Waves Integrated Care Limited |
| Period | April 2016 to March 2018 |
| Date of Review | March 2017 |

1. Population Needs

1.1 National/local context and evidence base

Growth in the number of people using urgent and emergency care is leading to mounting costs and increased pressure on resources. According to figures published in January 2014 by the Health and Social Care Information Centre, during 2012/13 nationally there were 21.7 million attendances at Emergency Departments, Minor Injury Units (MIU) and Urgent Care Centres (UCC) and 5.2 million emergency admissions to England's hospitals.

The Keogh report presented NHS England's future vision for urgent and emergency care in 'Transforming urgent and emergency care services in England: Urgent and Emergency Care Review End of Phase 1 Report'. The report sets out a vision for change summarised as follows:

For those people with urgent but non-life threatening needs, we must provide highly responsive, effective and personalised services outside of hospital. For those people with more serious life threatening emergency needs, we should ensure they are treated in centres with the very best expertise and facilities in order to maximise their chances of survival and a good recovery.

In order to deliver the vision, Dorset Clinical Commissioning Group (CCG) as part of the Clinical Services Review proposes to focus on five key elements of change:

- Providing better support for people to self-care;
- Helping people with non-urgent care and minor ailment needs get to the right advice in the right place, first time;
- Providing highly responsive urgent care services outside of hospital;
- Ensuring that those people with more serious or life threatening emergency needs receive treatment in centres with the right facilities and expertise in order to maximise chances of survival and a good recovery;
- Connecting primary care, urgent and emergency care services so the overall system becomes more than just the sum of its parts.

Outcomes NHS Outcomes Framework Domains & Indicators Domain 1 Preventing people from dying prematurely

| Domain 2 | Enhancing quality of life for people with long-term conditions | |
|----------|--|----------|
| Domain 3 | Helping people to recover from episodes of ill-health or following injury | ✓ |
| Domain 4 | Ensuring people have a positive experience of care | ✓ |
| Domain 5 | Treating and caring for people in safe environment and protecting them from avoidable harm | √ |

2.2 Local defined outcomes

The key outcomes of weekend walk in service are:

- safe management of patients needing urgent care services out of hours;
- collaborative working between primary and secondary care services, out of hours services and SWAST;
- reduced attendance at Emergency Departments;
- efficiency and value for money;
- positive patient/user experience.

3. Scope

3.1 Aims and objectives of service

The service will provide a weekend walk-in service from the Boscombe and Springbourne Health Centre for all those who live in the local area and visit Dorset.

The service will provide same day rapid assessment, interface and discharge ensuring appropriate medical advice, diagnosis and/or treatment for illnesses and injuries which require urgent care but which are non-life threatening and do not require the full services of an Emergency Department.

The service will educate service users regarding use of healthcare services, ensuring access to the right level of care in the right place, at the right time. It is expected that the service will redirect service users where appropriate ensuring a smooth and effective transfer.

3.2 Service description/care pathway

The document does not state precisely how the service will be delivered as this is for the service to determine but does specify the requirement for an integrated assessment and treatment service for all patients accessing the service that delivers efficiency, service improvement and resilience.

Pathway

Staffing

• The service will be delivered by a mixture of GP and Nurse Practitioner.

Triage and Assessment

• This assessment will determine whether to discharge with advice, discharge with redirection, treat, or transfer to a more appropriate service.

Treatment/ Advice

- The service will be expected to treat on an outpatient basis only any urgent injury or medical condition which is not severe, immediately critical or life threatening and not requiring the full services of an Emergency Department;
- Prescribing within the agreed Pan–Dorset formulary;
- The service will provide education, promote self-care and self-management of long term conditions and advice on the use of other local health services for minor illness or directed back to their own GP.

Discharge

- Discharge in accordance with the contract reporting and schedules;
- Discharge may include to GP, Pharmacy or other community service;
- A requirement for compatible IT to enable real time information sharing.

Opening hours/ Out of Hours

• The opening hours of the service will be 08:00 – 20.00 every Saturday and Sunday throughout the year.

Service Principles:

- Access to the service will be via 111 or walk ins (self-referral) or from the ED Department;
- Provide the service to service users of all ages including children;
- Participation in service improvement programmes and pilots to support future service development;
- Provision of a clinical IT system that enables efficient information flows between providers, two way sharing of service user records, care plans and information with other providers e.g. GPs, community and acute services
- Clinical assessments are undertaken by an appropriately skilled clinician with the experience and competencies to direct service users to the most appropriate service, including Emergency Department;
- Protocols for transfers of care to ensure service users are transferred as quickly and safely as possible, particularly those requiring specialist Emergency Department attention
- Service users are only transferred to the Emergency Department when clinically necessary;
- Contribute to the reduction of avoidable admissions and other inappropriate use of services;

3.3 Population Covered

The service is available for all service users registered with an NHS Dorset GP practice and out of area visitors who require urgent care. This service is provided across all ages.

Costs incurred for any non-Dorset service users will be referred by the provider to the responsible commissioner under 'Who Pays – Establishing the Responsible Commissioner'.

3.4 Any acceptance and exclusion criteria.

The weekend walk-in service is an alternative to accident and emergency (A&E) for a range of minor injuries and urgent medical problems.

It is a walk-in service for patients whose condition is urgent enough that they cannot wait for the next GP appointment (usually within 48 hours) but who do not need emergency treatment

at A&E.

Acceptance Criteria for the weekend walk-in service:

- Accidental injuries (excluding possible bony tenderness/fractures etc)
- Minor medical emergencies
- Infected wounds
- Treatment for wound stitching, sprains and minor fractures
- Suspected DVT
- Bites or stings
- Rash with fever
- Breathless or wheeze
- Minor scalds and burns

This list is not exhaustive

Exclusions:

- 1. Service users who require urgent and lifesaving medical attention these should be transferred to the acute Emergency Department:
 - Chest pain or upper back injury
 - Collapse
 - Major Abdominal pain
 - Pregnant- Bleeding/other
 - Major Allergic reaction
 - Major fractures/penetrating
 - Mental health
 - Major Burns
 - Suspected meningitis
 - Major Trauma

This list is not exhaustive

- 2. Service users who require urgent acute specialist services these should be transferred to the acute specialist department as an emergency.
 - Ophthalmology
 - Labour/ childbirth

This list is not exhaustive

- Service users who are not urgent and can be managed within routine primary care services such as GP, Pharmacy, Optician, Out of Hours and Dentist eg repeat prescriptions, minor ailments. This includes temporary residents (visitors).
- 4. Service users who require urgent dental attention should be redirected to the Emergency Dental Service via 111.

3.5 Interdependence with other services/providers

During the period of this contract the Commissioning Services Review will be underway, it will be essential for this service to be responsive to all elements of the review as required.

During the period of this contract the service will be re-tendered, the Provider is required to support this process providing timely access to activity and financial information as required.

4. Applicable Service Standards

4.1 Applicable national standards (eg NICE)

The service will comply with all prevailing national standards.

4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)

The service will comply with all applicable standards.

4.3 Applicable local standards

The service will comply with all standards as per the service contract.

5. Applicable quality requirements and CQUIN goals

5.1 Applicable quality requirements (See Schedule 4 Parts A-D)

5.2 Applicable CQUIN goals

Not applicable.

6. Location of Provider Premises

The Provider's Premises are located at:

Boscombe and Springbourne Health Centre 66-68 Palmerston Road, Bournemouth Dorset BH1 4JT

7. Individual Service User Placement

Not applicable.