
Feedback report

Consultation on the redesign of urgent care services in Bury

Executive summary

A six week consultation period in relation to the redesign of urgent care services in Bury ran from 29th January to 11th March 2018 inclusive.

- There is general support for the proposed future model for urgent care.
- Feedback was captured at a public meeting attended by around 40 people.
- 173 people responded to the consultation survey (online or in hard copy format).
- Of those that responded to the survey:
 - Over 88% described themselves as a patient or local resident, and over 95% said they were registered with a GP Practice in Bury.
 - Over 87% agreed or strongly agreed with the preferred option to provide an enhanced level of access beyond the minimum level required i.e. to develop Integrated Health and Social Care Hubs in addition to an Urgent Treatment Centre.
 - Over 77% agreed or strongly agreed that they believed the CCG had listened and responded to feedback about the importance people place on retaining access to walk-in services.
- Verbatim feedback received via the survey was themed around the following topics:
 - Support for the proposed model.
 - The need for convenient and accessible services in the community.
 - The importance of appropriate resourcing of services: funding and staff, to meet demand, and not reducing current i.e. GP service availability.
 - The importance of patient information to communicate future service availability.
 - More clarity was sought around the different parts of the proposed model, i.e. timescales for implementation, opening hours and services available.
 - Some concern that a decision had already been made.
- Bury's Health Overview and Scrutiny Committee and separately the Health and Wellbeing Board, supported the urgent care redesign proposals as presented.
- *Bury's Locality Care Organisation (LCO - an alliance of Health and Care providers in Bury) recognise the need for redesign of the urgent care system. It welcomes the

CCG's intention to pursue redesign, and the principles on which the redesign proposals were developed. It believes that the CCG's proposals need to be fully integrated with the proposals for wider change across the health and social care system and is keen to work with the CCG to support the redesign.

Background and introduction

About NHS Bury Clinical Commissioning Group (CCG)

NHS Bury CCG commissions (buys) health services for the local area with doctors and other health care professionals making decisions about local services.

The CCG has a budget to plan and purchase a range of health services including those provided in hospitals and in the community, including GP services.

The Governing Body, or Board, of the CCG oversees the work of the organisation and sets its priorities and direction. The Board is made up of doctors and other health care professionals and members represent the interests of patients, carers and local people.

Urgent care

In respect of this consultation and the proposals to redesign current urgent care services; urgent care services are services that are designed to assist patients with an illness or injury that does not appear to be an emergency, but is considered too urgent to wait for routine care.

Case for change in summary

In developing the revised proposed future model for urgent care, NHS Bury CCG listened to feedback from local people about the importance they place on retaining access to walk-in services in the town. This feedback was considered alongside new national guidance and the Greater Manchester approach for out of hospital primary care.

Both nationally and locally it is recognised that the urgent care system is under considerable pressure. The Royal College of Emergency Medicine reports a steady deterioration in emergency and urgent care, facing the worst A&E four hour target performance in almost 15 years. They recognise this is a national problem but highlight that at a local level there is a case for better service planning and design to facilitate health care delivery.

Nationally it has been acknowledged that patients are confused as to which service to access and when. This same specific feedback was identified in Bury in the earlier engagement and consultation phases relating to urgent care.

The NHS England Urgent and Emergency Care Delivery Plan April 2017, states nationally that: *'The system is too complicated and fragmented leading to patients not getting the best care and large variations in performance across the country'*.

Governance

The revised proposal was discussed at NHS Bury CCG's Governing Body meeting on 24th January 2018. The report received some minor amendments following the meeting to provide more clarity in some areas.

Discussions at the Governing Body meeting and advice from the Health Overview and Scrutiny Committee on 18th January 2018 triggered a six week period of consultation running from 29th January until 11th March 2018, to capture views and feedback from local people, stakeholders and health care professionals alike.

This feedback summary incorporated patient, public and stakeholder feedback and has been prepared by the CCG's Communications and Engagement Team.

Healthwatch Bury kindly provided an independent critique of the consultation feedback report, and where appropriate their suggestions have been reflected in this report.

The revised proposed future model for urgent care

The revised proposed future model for urgent care on which the consultation was based included two main elements:

1: Urgent Treatment Centre

As mandated in national guidance, plans to develop an Urgent Treatment Centre based at Fairfield General Hospital in Bury, running alongside the A&E department.

- Open for 12 hours a day (specific hours to be determined locally).
- Clinically led by primary care staff including GPs and nurses with access to patients' medical records to help with their care.
- Walk-in appointments available. Pre-booked and same day appointments available with referrals accepted from A&E, NHS 111, the Ambulance Service and General Practice.
- Suitable for patients experiencing minor illnesses and injuries. Examples include minor sprains and strains, cuts and grazes, minor burns and abdominal pain. Being located close to A&E, staff would have access to diagnostic tests such as blood tests, urine testing, ECG and X-rays (i.e. for suspected broken bones).
- The proposal is for this service to be up and running by December 2019.

2: Integrated Health and Social Care Hubs

The CCG has listened to feedback from local people about the importance they place on retaining access to walk-in services in the town, and the CCG's preferred option is to provide an enhanced level of access above and beyond the minimum level required (i.e. to have an Urgent Treatment Centre). The revised proposals include plans to develop the two current nurse led Walk-in Centre services (based in Bury and Prestwich), along with the three current GP evening and weekend appointment services (based in Bury, Prestwich and Radcliffe) to become Integrated Health and Social Care Hubs. It is proposed that the (initially) three Integrated Health and Social Care Hubs will operate from

the two current nurse led Walk-in Centre sites, with the addition of the Radcliffe site, to offer a range of services including GP led (including nurse) walk-in services.

- It is proposed that as the Integrated Health and Social Care Hubs evolve (commencing with a pilot), the following services would be available in a phased approach: GP led (including nurse) walk-in services; urgent GP appointments; evening and weekend appointments; wound care services; signposting advice to other services and social care advice and services. Ultimately, it is the intention, as per the Locality Plan, to locate the Integrated Hubs within each of Bury's five neighbourhoods.
- Developed in a phased approach, starting with one pilot site during 2018/19, before a roll out across the three initial proposed sites.
- The health aspects of the Integrated Hubs would be clinically led by GPs and nurses with access to patients' medical records.
- The two current nurse led Walk-in Centre services would continue to be available until the Integrated Health and Social Care Hubs are established.
- The health aspects of the Integrated Hubs would be suitable for patients requiring access to routine extended hours GP care, urgent GP care and for minor injuries.
- Whilst the health services would be accessible to patients registered with a Bury GP practice, they would deal with any patients requiring immediate treatment, and where appropriate direct patients to other local services.

Purpose of the consultation

Through the six week consultation process, the CCG aimed to capture views on the proposals before a formal decision is made at the March 2018 meeting of the Governing Body.

The purpose of the consultation exercise was:

- To inform local people, stakeholders and health care professionals about the proposals.
- To capture the views and feedback from all identified stakeholders including local people, health care professionals, local third sector organisations and groups, as to whether they felt the revised proposals were an appropriate solution for urgent care services in Bury and would meet local needs.
- To identify any concerns about the proposals.
- To answer any questions about the proposals.

Consultation approach and mechanisms

The range of approaches and mechanisms used aimed to capture views from all communities and stakeholders including local third sector organisations and groups. The ability to request presentations to specific groups or meetings was promoted.

- A press release was dispatched to local and regional press and media contacts (once at the launch, and a further press release at a mid-way point promoting the public meeting).
- A consultation survey was prepared and this was available online and in hard copy format on request. See Appendix 1.

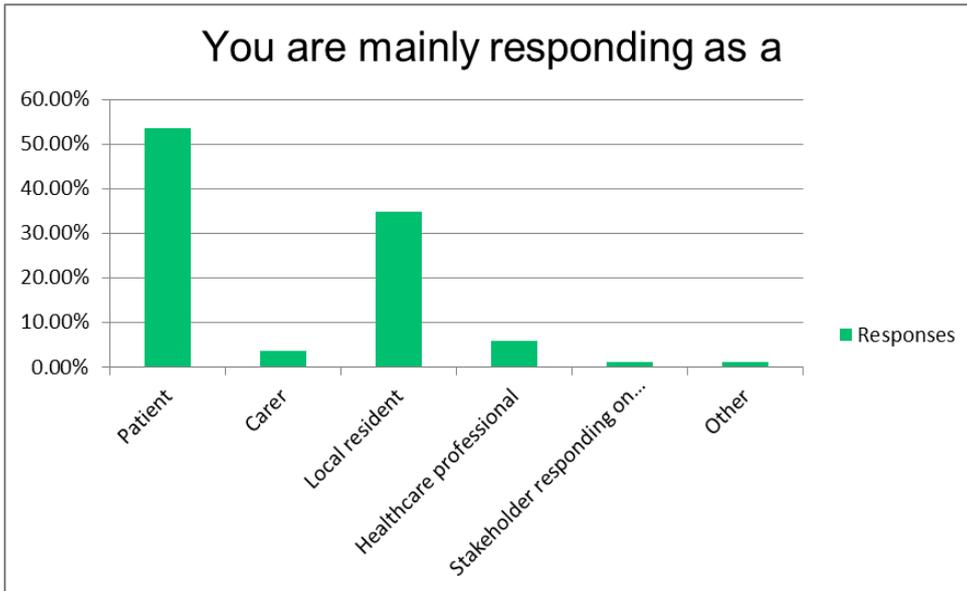
- Hard copies of the survey were made available in both current Walk-in Centre locations.
- Hard copies of the survey were made available in the CCG's reception area.
- Hard copies of the survey were offered to all GP practices to make available on reception.
- A PowerPoint presentation was prepared to describe the proposed model in more detail, for presentation at meetings.
- Content was published on the CCG website, including an image and link on the homepage to the survey, and a press release.
- Social media was scheduled and pinned as the top story to both CCG Facebook and Twitter platforms.
- Information was published on GP practice reception TV screens signposting to the consultation.
- A page was set up on the Bury Directory to promote the consultation.
- Information about the consultation was shared through existing networks including through the voluntary sector.
- An issue of the CCG's Health Matters E-Newsletter was prepared and issued to recipients at the point of launch, and again when the public meeting date was confirmed.
- A public meeting was held on the evening of 7th March 2018 at the Fusilier Museum in Bury, around 40 people attended and the meeting was promoted through all usual/available mechanisms.
- The ability to request presentations to specific groups or meetings was promoted.
- The CCG attended the Healthwatch public meeting held on 29th January 2018.
- Views were welcomed by letter or email.
- As feedback started to become available via the survey, an FAQ document was prepared and published on the CCG website.

Feedback received

Survey

QUESTION 1: You are mainly responding as a: Patient; Carer; Local resident; Healthcare professional; Stakeholder or other.

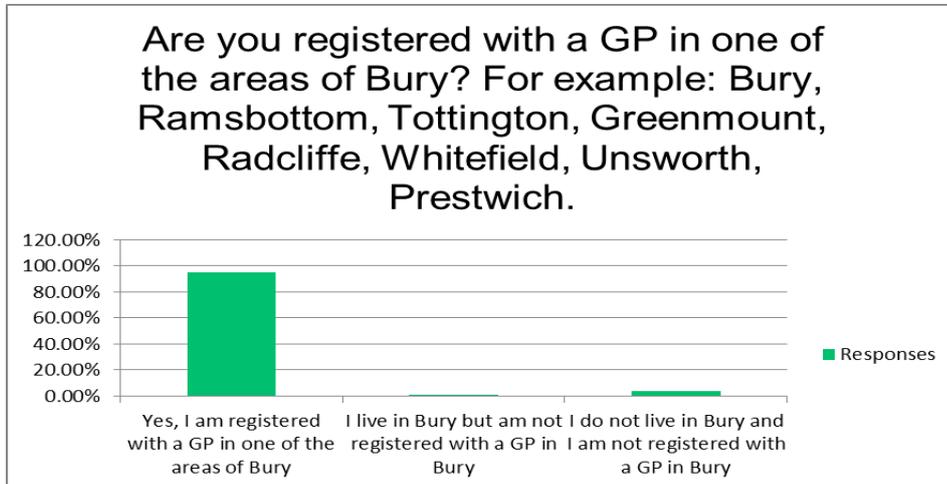
172 respondents answered this question. Over 88% described themselves as a patient or local resident.



Answer Choices	Responses	
Patient	53.49%	92
Carer	3.49%	6
Local resident	34.88%	60
Healthcare professional	5.81%	10
Stakeholder responding on behalf of an organisation	1.16%	2
Other	1.16%	2
Answered		172
Skipped		1

QUESTION 2: Are you registered with a GP in one of the areas of Bury? For example: Bury; Ramsbottom; Tottington; Greenmount; Radcliffe; Whitefield; Unsworth or Prestwich.

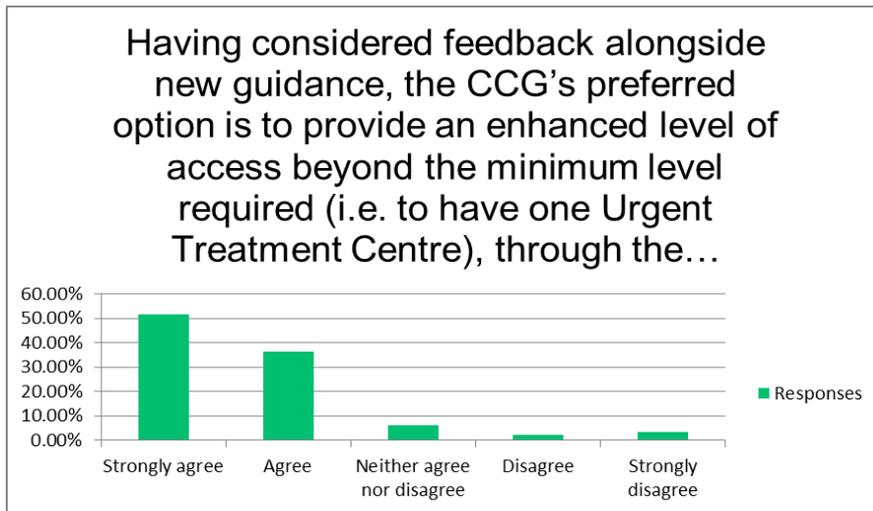
171 respondents answered this question. Over 95% of respondents said they were registered with a GP Practice in Bury.



Answer Choices	Responses	
Yes, I am registered with a GP in one of the areas of Bury	95.32%	163
I live in Bury but am not registered with a GP in Bury	0.58%	1
I do not live in Bury and I am not registered with a GP in Bury	4.09%	7
Answered		171
Skipped		2

QUESTION 3: Having considered feedback alongside new guidance, the CCG’s preferred option is to provide an enhanced level of access beyond the minimum level required (i.e. to have one Urgent Treatment Centre), through the addition of ‘Integrated Health and Social Care Hubs’. The Integrated Hubs would operate from three sites initially: including the two current Walk-in Centre sites, offering a range of services including GP led (including nurse) walk-in services: To what extent do you agree with this preferred option?

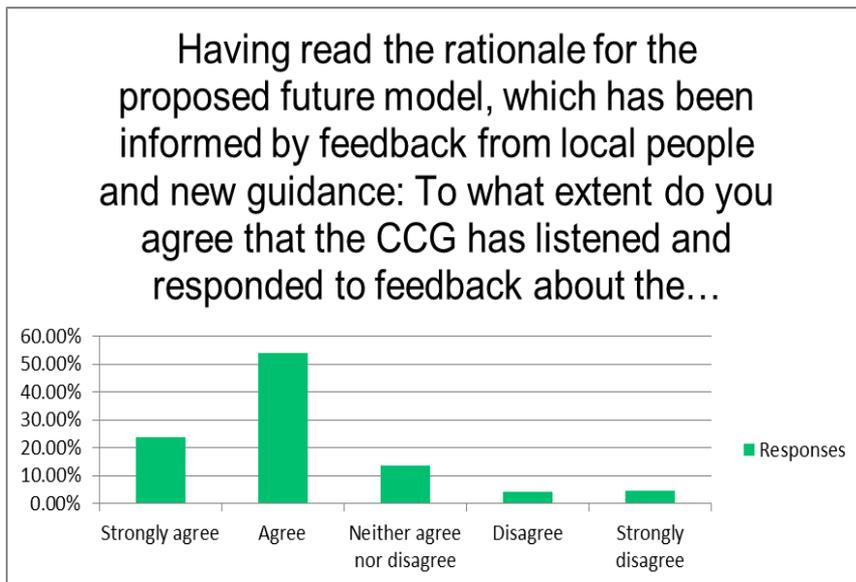
173 respondents answered this question. Over 87% agreed or strongly agreed with the preferred option.



Answer Choices	Responses	
Strongly agree	51.45%	89
Agree	36.42%	63
Neither agree nor disagree	6.36%	11
Disagree	2.31%	4
Strongly disagree	3.47%	6
Answered		173
Skipped		0

QUESTION 4: Having read the rationale for the proposed future model, which has been informed by feedback from local people and new guidance: To what extent do you agree that the CCG has listened and responded to feedback about the importance people place on retaining access to walk-in services?

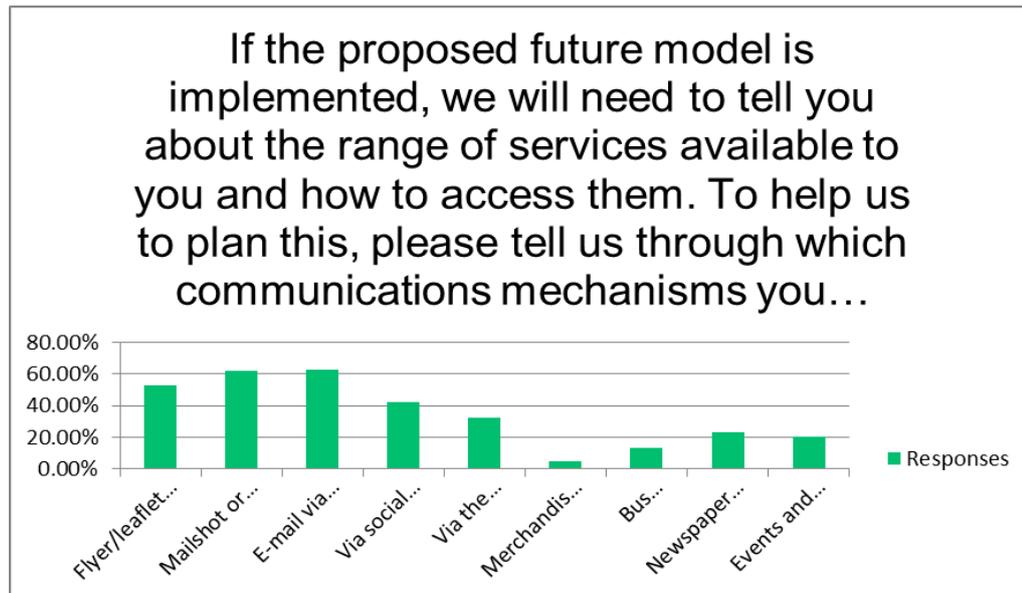
171 respondents answered this question. Over 77% agreed or strongly agreed that they believed the CCG had listened and responded to feedback about the importance people place on retaining access to walk-in services.



Answer Choices	Responses	
Strongly agree	23.98%	41
Agree	53.80%	92
Neither agree nor disagree	13.45%	23
Disagree	4.09%	7
Strongly disagree	4.68%	8
	Answered	171
	Skipped	2

QUESTION 5: If the proposed future model is implemented, we will need to tell you about the range of services available to you and how to access them. To help us to plan this, please tell us through which communications mechanisms you would prefer to receive information.

173 respondents answered this question. The most popular mechanism were communications via GP practices and information sent to people’s homes, along with printed information being available in key locations and the use of social media and the web.



Answer Choices	Responses	
Flyer/leaflet/information booklet to pick up in i.e. your GP Surgery or at hospital	52.60%	91
Mailshot or flyer to your home	61.85%	107
E-mail via your GP Practice	62.43%	108
Via social media	42.20%	73
Via the internet i.e. Bury CCG website	32.37%	56
Merchandise i.e. a pen or fridge magnet	4.62%	8
Bus advertising	13.29%	23
Newspaper advertising	23.12%	40
Events and roadshows	20.23%	35
Answered		173
Skipped		0

COMMENTS: A space was available within the survey to enable respondents to provide any further feedback in relation to the proposed future model. A number of respondents provided thoughts and feedback to this option. Comments were considered and collated under the following themes:

Support for the proposal:

- The model will be a good thing / good news for Bury.
- The proposal is sensible, practical and welcome.
- Support for integrated health and social care.
- Support for the Urgent Treatment Centre to be located alongside A&E/reducing pressures.
- 'Thank you for listening'.

Access to services:

- Preference for face to face rather than telephone assessment.
- The need for accessible services (i.e. location of Fairfield isn't accessible for all / public transport issues), close to where people live in an emergency.
- Convenience of services in the community highlighted as important.
- More information on the triage system at the Urgent Treatment Centre would be welcome (covered in FAQ document).
- NHS 111 seen as an unnecessary layer.
- To take into account when designing services, the needs of individuals with learning disabilities, and those with communication needs or physical disabilities.
- A preference for Integrated Hubs to be open outside of work and school hours, and geared around demand.
- A suggestion that the hours the Urgent Treatment Centre is open is linked to when the Integrated Hubs are closed.
- Assurance sought that services are available to homeless people.

Staffing and resources:

- Concerns about current waiting time for a non-urgent GP appointment. If the new services will be staffed by colleagues drawn from existing services, will this make it more difficult to book an appointment at your own practice?
- Appropriate resourcing / staffing in the Integrated Hubs and Urgent Treatment Centre highlighted as important.
- Assurance that having an Urgent Treatment Centre would not mean a reduction of A&E services would be welcome (assurance provided in FAQ).

Offer and demand:

- Assurance needed that the Integrated Hubs will be able to meet demand.
- Assurance that the proposal would be a guaranteed minimum, not a temporary solution would be welcome.
- Suggestion that providing advanced diagnostics in the Integrated Hubs could reduce pressure on A&E.
- The importance of informing/educating people about the future service availability (including self-care) was highlighted.

Tell me more/assurance:

- Clarity on the difference between an Urgent Treatment Centre and an Integrated Hub is needed (provided in FAQ).
- Clarity on how the proposals compare to current provision would be welcome.
- More clarity on the timeframes for the changes and hours of operation (including the 12 hours when the Urgent Treatment Centre is not open – i.e. will patients go to A&E if attending Fairfield when the Urgent Treatment Centre isn't open?).
- Some concern that the survey was too simple for a complex and controversial issue, suggesting that a decision had already been made.

Public meeting – 7th March 2018

Around 40 people attended the public meeting held at the Fusilier Museum on the evening of 7th March 2018. The proposal was described with the support of a PowerPoint presentation. Following a presentation, there was generally positive feedback in relation to the revised proposals. There were also a number of questions or points made as follows (as per Twitter feed published during the event):

- A request to ensure Bury's unpaid carers are involved in the process. [A future date for the CCG to attend the Carers Forum is being arranged.](#)
- A question relating to GP capacity and financial resources to deliver the proposals. [The transformation plan for Bury aims to reduce demand on emergency services which should release funds, and money has been secured to make some of the changes in Bury. National Government has capital resource to support the development of Urgent Treatment Centre.](#)
- A question in relation to the future model about the best course of action if you have a poorly child. [The aim is to get people to call their GP Practice number in the first instance.](#)
- A point made about the importance of communication about the changes, so that people know the range of options they have in the future. [There will be a communications campaign, in addition the Urgent Treatment Centre team would provide an element of education in relation to the best services to meet a patient's needs in the future, if their condition could have been more appropriately treated elsewhere. We need to ensure that the right health care professional treats the most appropriate conditions i.e. use pharmacists where appropriate. We also need to engage better with younger people.](#)
- Concern about people using the A&E department as they can't access GP appointments. [We need to change the system in order to free up GP time, so that patients can access convenient appointments.](#)
- A point made about NHS funding being reduced leading to reduction in services. [It is our role to ensure that we secure the best services within the budget we have to meet the needs of the local population. We will increasingly be working more closely with the Local Authority with a view to jointly commissioning health and social care services in the future.](#)
- A question about what happens to patients attending A&E who are distressed due to a mental health condition. [We have a RAID system in A&E to support patients. Many patients with dementia do end up in A&E when it isn't the most appropriate](#)

place for them, the Integrated Hubs should help to ensure that patients are treated in the most appropriate place.

- A question in relation to Integrated Hubs, is there a possibility to integrate the charity sector i.e. regarding mental health? Yes, we need the involvement of the voluntary sector in the Integrated Hubs and their role is key in relation to co-design and social prescribing. We need a navigation system linked to each Integrated Hub which can direct patients to the most appropriate service to meet their needs.
- A question about when we will know how joint commissioning will work. This is something that will evolve over the next few months, as work develops between the CCG and the Local Authority. There will be paper coming to our Governing Body over the next few months describing the approach. The CCG and the Council will remain as separate statutory organisations.
- A question about whether GPs will continue to have a contract with the NHS. Yes they will and there is no appetite to change this. We want to focus on changing the services to improve them. If organisational form or contractual arrangements become a barrier to delivering that change, then we will look at that.
- A question about charging arrangements for the NHS. The CCG has no plans to charge patients to access GP services. We believe we can provide sustainable GP services by working in a different way.
- A question about a proposed merge of some GP practices Bury. We do want practices to work in a way that makes them sustainable in the future, working together and sharing resources to ensure appropriate access. GPs are already working in an integrated way through the extended working hours hubs, offering evening and weekend appointments.
- A question about Integrated Hub opening times, and might the times be staggered across the sites so there are longer opening times. It will be for each neighbourhood to determine the services and hours that are appropriate to serve their local populations. Feedback from local people, groups and stakeholders during the pilot (before roll out across the three initial sites) is very important in shaping these services and access to them, to ensure they meets the needs of local communities and individuals.

Healthwatch Bury public meeting – 29th January 2018

The CCG attended a Healthwatch Bury public meeting on 29th January 2018. around 13 people attended. Following a presentation, there was generally positive feedback in relation to the revised proposals. There were also a number of questions or points made as follows:

- One question related to whether patients could book an appointment at the Urgent Treatment Centre: The Urgent Treatment Centre will be located alongside A&E. It will provide care for patients who choose to attend A&E, where their need is assessed as being urgent but not an emergency. A patient will not be able to pre-book an appointment at the Urgent Treatment Centre, however, a health care professional i.e. a GP will be able to request an appointment for their patient if it is felt that the Urgent Treatment Centre would best meet their needs, for example, where diagnostic tests including X-Ray may be required. The Integrated Hubs are more focussed on supporting our most vulnerable patients and patients with complex needs, who would benefit from a more integrated service whilst improving access to both routine and urgent care.

- The use of the word 'integrated' in relation to the Integrated Hubs could be misinterpreted to be relating to personal health budgets: [In this instance integrated relates to more joined up working between services.](#)
- Accessibility, including the availability of Loop systems in health buildings was highlighted as important: [The CCG agreed that this should be standard practice.](#)
- Clarity was requested in relation to access to GP patient records: [In the future, staff working in both the Urgent Treatment Centre and the Integrated Hubs would, where appropriate, have access to full GP records.](#)

Health Overview and Scrutiny Committee

The period and format of consultation was shaped with valued input from the Health Overview and Scrutiny Committee at its meeting on 18th January 2018. In addition, the Health Overview and Scrutiny Committee considered urgent care during the consultation period at its meeting on 5th March 2018.

At the meeting on 5th March 2018, the CCG was thanked for its attendance and the Health Overview and Scrutiny Committee supported the urgent care redesign proposals as presented.

Health and Wellbeing Board

The CCG attended the Health and Wellbeing Board on 14th February 2018.

The Health and Wellbeing Board supported the urgent care redesign proposals as presented.

It was agreed that at a future meeting, the Health and Wellbeing Board would consider: Timescales for the future roll out of the additional Integrated Health and Social Care Hubs; the make-up and scope, including staffing, of the Integrated Health and Social Care Hubs and the Urgent Treatment Centre, and further information in respect of how the CCG in partnership with Public Health will develop and expand the self-care agenda.

Other meetings attended

CCG Patient Cabinet meeting – 1st February 2018.

Locality Care Organisation (LCO) Board (provider alliance*) – 28th February 2018.

Political parties

The CCG individually engaged with the three main political parties in Bury, who were generally supportive of the proposals.

Clinical engagement

GPs and their teams were engaged through their Sector meetings (x 4) during February 2018. In addition, urgent care will be covered during the quarterly GP engagement event held during March to explore alternative ways of working. Current Walk-in Centre staff were also directly engaged with in relation to the proposals.

Individual letters and correspondence

A letter was received from the *Locality Care Organisation (LCO), this is Bury's alliance of providers, (Pennine Acute Hospitals NHS Trust; Pennine Care NHS Foundation Trust; Bury GP Federation; BARDOC and the provider arm of Bury Council).

The LCO recognises the need for redesign of the urgent care system. The LCO welcomes the CCG's intention to pursue redesign, and the principles on which the redesign proposals have been developed. The LCO believes that the CCG's proposals need to be fully integrated with the proposals for wider change across the health and social care system as they are articulated in the Locality Plan, and especially as they relate to integrated neighbourhood teams and the future role of Fairfield Hospital. The LCO is keen to work with the CCG to support the re-design and suggested some next steps.

The LCO had a number of questions and points of clarity which will be explored.

Conclusion

- The Health Overview and Scrutiny Committee supports the urgent care redesign proposals as presented.
- Bury's LCO (provider alliance) recognises the need for redesign of the urgent care system, welcomes the CCG's intention to pursue redesign and is keen to work with the CCG in this respect.
- There is general support for the proposed future model for urgent care from all stakeholders involved and engaged in the consultation period.
- The majority of respondents felt that it was the right thing to do to look to develop Integrated Health and Social Care Hubs above and beyond the nationally mandated Urgent Treatment Centre.
- In addition, the majority of respondents said they agreed that the CCG had listened and responded to feedback about the importance people place on retaining access to walk-in services.
- Accessible and convenient services were highlighted as important, whilst ensuring appropriate resourcing of services (funding and staff) to meet demand.
- People would welcome more clarity in relation to the different parts of the proposed model i.e. timescales for implementation, opening hours and services available.
- Emerging joint commissioning arrangements for health and social care between NHS Bury CCG and the Local Authority will maximise opportunities for greater integrated working including working with local people, groups and key stakeholders to develop services moving forward, ensuring they meet the needs of local communities and individuals.

Next steps

The Governing Body will consider this consultation feedback at its meeting on 28th March 2018.

After a decision on the proposal has been made by the Governing Body, feedback will be provided on the decision to stakeholders through all existing mechanisms, including the press and media, social media and the internet, through local third sector organisation networks and other networks, and through the Health Overview and Scrutiny Committee.

Appendix 1 – Consultation survey

Consultation on the redesign of urgent care services in Bury

NHS Bury Clinical Commissioning Group (CCG) commissions (buys) health services for the local area with doctors and other health care professionals making decisions about local services.

The CCG has a budget to plan and purchase a range of health services including those provided in hospitals and in the community, including GP services.

The Governing Body, or Board, of the CCG oversees the work of the organisation and sets its priorities and direction. The Board is made up of doctors and other health care professionals and members represent the interests of patients, carers and local people.

What is urgent care?

Urgent care services are services that are designed to assist patients with an illness or injury that does not appear to be an emergency, but is considered too urgent to wait for routine care.

Urgent care redesign – background and current position

NHS Bury CCG has listened to feedback from local people about the importance they place on retaining access to walk-in services in the town.

Considering this valued feedback alongside new national guidance and the Greater Manchester approach for out of hospital primary care, local people are now being asked for their views on a revised proposal for Bury. The revised proposal was discussed at NHS Bury CCG's Governing Body meeting on 24th January 2018. The report received some minor amendments following the meeting to provide more clarity in some areas, and you can access the amended report > [HERE](#). Access our presentation, which provides more information > [HERE](#).

Discussions at the meeting and advice from the Overview and Scrutiny Committee has triggered a six week period of consultation with a view to capturing the views and feedback from local people, stakeholders and health care professionals alike on the proposed future model.

The consultation will run from Monday 29th January 2018, for a period of six weeks (ending on Sunday 11th March 2018).

The revised proposal for urgent care includes two main elements:

1. As mandated in national guidance, plans to develop an Urgent Treatment Centre based at Fairfield General Hospital in Bury, running alongside the A&E department.

2. The CCG has listened to feedback from local people about the importance they place on retaining access to walk-in services in the town, and the CCG's preferred option is to provide an enhanced level of access above and beyond the minimum level required.

The revised proposals include plans to develop the two current nurse led Walk-in Centre services (based in Bury and Prestwich), along with the three current GP evening and weekend appointment services (based in Bury, Prestwich and Radcliffe) to become Integrated Health and Social Care Hubs. It is proposed that the (initially) three Integrated Health and Social Care Hubs will operate from the two current nurse led Walk-in Centre sites, with the addition of the Radcliffe site, to offer a range of services including GP led (including nurse) walk-in services.

Read more about these two elements in our press release [>HERE](#).

1. You are mainly responding as a

- Patient
- Carer
- Local resident
- Healthcare professional
- Stakeholder responding on behalf of an organisation
- Other

2. Are you registered with a GP in one of the areas of Bury? For example: Bury, Ramsbottom, Tottington, Greenmount, Radcliffe, Whitefield, Unsworth, Prestwich.

- Yes, I am registered with a GP in one of the areas of Bury
- I live in Bury but am not registered with a GP in Bury
- I do not live in Bury and I am not registered with a GP in Bury

3. Having considered feedback alongside new guidance, the CCG's preferred option is to provide an enhanced level of access beyond the minimum level required (i.e. to have one Urgent Treatment Centre), through the addition of 'Integrated Health and Social Care Hubs'. The Integrated Hubs would operate from three sites initially: including the two current Walk-in Centre sites, offering a range of services including GP led (including nurse) walk-in services: To what extent do you agree with this preferred option?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

4. Having read the rationale for the proposed future model, which has been informed by feedback from local people and new guidance: To what extent do you agree that the CCG has listened and responded to feedback about the importance people place on retaining access to walk-in services?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

5. If the proposed future model is implemented, we will need to tell you about the range of services available to you and how to access them. To help us to plan this, please tell us through which communications mechanisms you would prefer to receive information (please tick all that apply).

- Flyer/leaflet/information booklet to pick up in i.e. your GP Surgery or at hospital
- Mailshot or flyer to your home
- E-mail via your GP Practice
- Via social media
- Via the internet i.e. Bury CCG website
- Merchandise i.e. a pen or fridge magnet
- Bus advertising
- Newspaper advertising
- Events and roadshows

6. Please use this space to provide any further feedback you may have in relation to the proposed future model.

You do not have to answer the following questions, but this will help us to understand if we are capturing views from all parts of our community.