

Providing general practice services in Norwich

**Norwich Walk-in Centre, Vulnerable Adults Service –
Inclusion Health Hub, and GP Practice on Rouen Road**



Public Consultation and Engagement

January 24th to March 26th 2023

If you would like this information in large print or in an alternative version, please contact NHS Norfolk and Waveney and we will do our best to provide it.



NHS Norfolk and Waveney ICB, County Hall, Martineau Lane, Norwich, NR1 2DH



nwicb.contactus@nhs.net



01603 595857



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What is the purpose of this document?

This document is published by NHS Norfolk and Waveney Integrated Care Board (**NHS Norfolk and Waveney**). It sets out some details on our proposed vision for how general medical services may be provided in Norwich when the contract for the Norwich Walk-in Centre (**WiC**), the GP Practice on Rouen Road, and the Vulnerable Adults Service – Inclusion Health Hub (**VAS**) expires on 31 March 2024. The Vulnerable Adults Service consists of three elements: Inclusion Health Hub, Inclusion Health practices, and Mainstream Primary Medical Services. Only the Inclusion Health Hub is within the scope of this document.

This document is the basis of the consultation process run by NHS Norfolk and Waveney to gather people's views from 24 January and 26 March 2023. It sets out:

- NHS Norfolk and Waveney's objectives
- The case for change with supporting evidence
- Several options considered by NHS Norfolk and Waveney that were developed during extensive engagement work and conversations with local people and clinicians
- The consultation process and how to have your say
- Opportunities for you to help shape what future services look like

Our objective

NHS Norfolk and Waveney seeks to work in partnership with people and communities. We have what is known as “Triple Aim” duty so when making decisions we need to consider all likely effects on:

- Health and wellbeing for people, including its effects in relation to inequalities
- Quality of health services for all individuals, including the effects of inequalities in relation to the benefits that people can obtain from those services
- The sustainable use of NHS resources

For further details of our statutory duties in respect of patient and public involvement please see [NHS Norfolk and Waveney Integrated Care Board Governance Handbook](#) on our website.

The objective of this consultation is to continue to find ways to provide good quality general practice services for people living in Norwich and surrounding area after the contract for the WiC, the GP Practice on Rouen Road, and the VAS expires on 31 March 2024.

When we are considering making changes to how we provide general practice services for patients we want to make sure we understand what impact they would have. We know that making decisions about changing how we provide care for people is important and we take these decisions seriously. So, we would like you to:

- Tell us what you think of the changes that NHS Norfolk and Waveney is proposing.
- Help us understand what the impact would be on patients using the Norwich WiC and the GP Practice on Rouen Road.
- Share your thoughts on how the healthcare capacity currently associated with the Norwich WiC could be reshaped to increase equity of access for all Norwich residents, help meet growing demand for general practice services, and support resilience of general practices in Norwich.
- Share your thoughts about any other options for reviewing provision of services that we might not have considered that would help us meet our objective of providing good quality general practice services for people in the greater Norwich area.

Setting the scene

The NHS introduced a policy in 2009 which saw every [Primary Care Trust](#) receive funding to commission (buy) an [Alternative Provider Medical Services \(APMS\)](#) centre with a registered list and walk-in centre across England with the aim of:

- Improving patients' access to general practice services - particularly when some patients have difficulties getting timely or convenient appointments with a GP practice or accessing primary care more generally
- Modernising the NHS to be more responsive to patients' busy lifestyles
- Offering patients more choice
- Accessing care from a GP or a nurse with no need to register or to pre-book an appointment
- Opening for longer hours than the typical GP practice

Norwich WiC

The WiC on Rouen Road, Norwich provides general practice services under that policy. This includes treatment of minor illness and injury to those who need it in Norwich and the surrounding area, whether registered with the health centre, another practice, or not registered with the NHS at all.

Patients don't need to make an appointment at the WiC, they don't need to be registered with a GP practice, and the opening hours are longer than those in other practices (7am – 9pm). It also provides access to vulnerable adults when the VAS is closed.

Currently the Norwich WiC provides approximately 5,666 appointments every month. To put that in context of overall general practice appointment activity, during the 12 months September 2021 to August 2022, there was an average of 557,000 appointments across Norfolk and Waveney.

The usage of the WiC is highest during normal business hours, with peak usage between lunchtime 12 – 1pm, and with a high amount of use during the early morning (7am – 9am). Usage is lowest during the last opening hours (7pm – 9pm). The busiest day is Monday.

The largest proportion of patients using the WiC are patients that are already registered with one of the 22 Norwich GP practices (66%). Seven percent (7%) are registered with the Rouen Road GP practice. The majority of patients seek treatment at the WiC for same-day general practice services rather than minor injury treatment.

General feedback from Norwich GP practices has highlighted that the WiC can help to improve patient access to healthcare by providing a safety net to help them meet on-the-day demand. It can help to improve resilience in general practice by providing additional capacity to practices experiencing sickness absence or other workforce pressures. It also helps to address health inequalities by providing access to healthcare for those who may be leading chaotic lives, who aren't registered with a GP practice, or who struggle to book appointments.

The WiC provides open access to general practice services for many people. This includes refugees and asylum seekers for whom English is not their first language, those who live chaotic lives, those who are not registered with the local health and

care system, and those who otherwise struggle to make or attend pre-booked appointments. These groups may be served by the VAS and associated services, and the WiC provides additional capacity for these patient groups outside of the VAS opening hours. More information about the VAS is provided below.

In addition to the WiC, a [GP Out of Hours](#) service is operational across Norfolk and Waveney. This provides patients with urgent access to general practice services outside of core working hours (6.30pm – 8am, Monday – Friday, and all day Saturdays, Sundays and public holidays). This is accessed by calling NHS 111.

GP Practice at Rouen Road

The GP practice at Rouen Road is open from 8am to 8pm every day, including public holidays.

There are 6 GPs who work within the service, 2 nurse practitioners, and 2 nurses. They are supported by 3 members of the healthcare team, 2 pharmacists, 4 members of the prescription team, practice management, and an administrative and reception team.

The service provides general practice services to around 10,300 registered patients and the practice boundary serves the whole of Norwich.

The VAS - Inclusion Health Hub

The VAS is based at Under One Roof on Westwick Street in Norwich. It provides enhanced primary medical support to people with a complex range of needs between 9am – 5pm, Monday to Friday.

The VAS aims to address health inequalities by bringing together specialist healthcare professionals to provide inclusion health services and an asylum seeker and refugee service.

Inclusion health services are for people who are socially excluded and likely to experience stigma and discrimination, live chaotic lives, typically experience multiple overlapping risk factors for poor health, and are not consistently accounted for in electronic records. These experiences frequently lead to barriers in access to healthcare and extremely poor health outcomes.

The VAS provides targeted inclusion health services on a short-term basis, usually up to 6 months. Users are then integrated into general practice within the [Norwich Primary Care Network \(PCN\)](#) to one of the Inclusion Health Practices to ensure a supported transition and to plan for their ongoing needs.

[The current healthcare landscape - why do things need to change?](#)

General practice services encompass lots of services – including primary medical care, preventative screening, mental health, and vaccinations. We want services to be responsive to the patients and communities they serve.

Since 2009, the healthcare landscape and national policy has changed greatly – in no small part more recently due to the impacts of the COVID-19 pandemic. We have learned a lot about the importance of reaching out to people who aren't accessing general practice services, and about the unequal access to healthcare that has been heightened by the pandemic.

There are some big challenges facing the health service today that must be factored into how services are planned, designed, and commissioned. These include:

- Meeting the increasing needs of patients;
- Improving and increasing equity of access to general practice services;
- Improving outcomes and the quality of care;
- Using the limited workforce in the most appropriate way and ensuring general practice services are resilient; and
- Achieving value for money.

Other factors influencing the need for change include:

- There are now more ways for people to access health services that didn't exist when walk-in centres like the one in Norwich were established. General practice now offers more appointments earlier and later in the day through [Enhanced Access](#), and community pharmacies offer more services than they used to such as helping to treat minor illness and supporting medicines use reviews. Not only are these services open at similar times to the Walk-in Centre, they are also available across Norfolk and Waveney, reducing the need for people to travel to the one walk-in centre in Norwich. These services have been developed as a result of feedback from patients about how, when and where they would like to be able to access services.
- Improving access to care, providing more joined-up care, and reducing health inequalities are key pillars of the [NHS Long Term Plan](#). The strategic direction of the NHS has moved away from providing walk-in centres towards improving flexibility and access to healthcare professionals through access to other services as described above.
- Other national policies which relate to the introduction of digital solutions and [clinical triaging](#) patients, many of which were accelerated as a result of COVID-19, are further impacting on how patients access general practice services.
- The demand for healthcare services is increasing as our population grows and ages, and as the demographics of our population changes. General practice tends to act as a first point of contact for most people accessing the NHS and provides an ongoing relationship to those who need it. This connection to people is what makes general practice so valued by the communities it serves. Despite this, there are real signs of genuine and growing dissatisfaction, and access to [urgent care](#) is having a direct impact on general practices' ability to provide continuity of care to those patients who need it most.

Recognising this pressure has led NHS England to commission a review of Primary Care, which includes general practice, and forming recommendations for the future. These have been set out in: [Next Steps for Primary Care: Fuller Stocktake Report, May 2022](#). This document outlines the steps that decision makers and services should take to arrange, join-up and deliver services to improve outcomes for local people.

- There is now an increased focus on addressing health inequalities and a better understanding about how we can do this. We have learned a lot about the importance of reaching out to people who aren't accessing general practice services, and about the unequal access to healthcare that has been heightened by the pandemic. In the greater Norwich area there are areas of significant deprivation, whose residents experience poorer health outcomes, as set-out in [Appendix 1](#).
- Our health is determined by complex interactions between individual characteristics, lifestyle, and the physical, social, and economic environment. Inequalities in health and access to healthcare have deepened since COVID-19. National NHS requirements set out in the [Network Contract DES requirements for Tackling Neighbourhood Health Inequalities \(TNHI\)](#) outline how equity of access for local people in underserved communities with unmet health needs must be increased in order to improve their outcomes.
- Norfolk and Waveney [Integrated Care System \(ICS\)](#)'s [Integrated Care Strategy](#) and [Clinical Strategy](#) reinforce this, too. Seldom heard communities, the most vulnerable, and those that are socially excluded experience additional difficulties accessing services, which results in poorer health outcomes. Preventing ill health and care needs from arising in the first place and targeting high risk groups to help address and reduce health inequalities are key priorities for the organisations within our ICS that are working together to provide health and care. Systematic planning and proactive management are essential to help improve access to healthcare and health outcomes for all residents across our communities.

All these factors must be taken into consideration when current healthcare contracts expire and new service contracts are developed. That is why we need your help to identify and help shape the future of healthcare services within the Norwich area.

What patient and stakeholder engagement has there been so far?

To understand what local people think about the walk-in services in Norwich, a period of engagement was undertaken in June 2022 with current WiC users and local clinicians.

The data was captured via an online survey. Engagement with the survey was made possible using a variety of channels including digital, face-to-face, and qualitative interviews to support engagement across a wide range of audiences. The key themes that emerged from the pre-engagement were:

- **A view that this is an essential service** – Feedback indicates that many respondents report either struggling or not trying to book an appointment at the GP surgery where they are registered and turn to the WiC instead.
- **Convenient location** – on the whole, the WiC is thought to be in an accessible location. However, noting the high likelihood of travelling by car, and the lack of designated and / or free parking available for visitors.
- **I can ‘just walk-in’** – not having to make an appointment is the most influential factor when making the decision to visit the WiC. Indeed, when asked whether they would prefer to be able to book an appointment, respondents are most likely to say ‘no’ (42%) (however noting that a further 27% are unable to give a view).
- **Broad satisfaction with opening hours** – current opening hours meet expectations and needs for most, although some would like to see a 24/7 service.
- **Long waiting times** – there are some complaints of having to wait a long time to be seen, although this does appear to be an expectation of many visitors.
- **Issues with waiting outside** – there are also some complaints of having to wait outside, and with no shelter or seating provided for when weather is bad or waiting times are long (and when feeling ill).
- **Room for improvement** – although many are satisfied (to some degree) with aspects of the service they receive, there is room for improvement to achieve top ratings, in areas such as the treatment of visitors by staff (clinical expertise, dignity and respect, friendliness and attentiveness), as well as the cleanliness and comfort of facilities.
- **Communications and clarity** – are key for inclusive engagement, ensuring that everyone is able to access the information they need to use the WiC. Communications and clarity can also help to make it feel safe for diverse participants to engage with the centre.

Additional targeted engagement was undertaken in November 2022 to seek qualitative feedback from vulnerable adults and adults with additional needs to supplement the results of the initial programme of pre-engagement. This was achieved through engagement with a range of ‘advocates’ – representatives of Voluntary Community and Social Enterprise (**VCSE**) organisations and groups working with and supporting these populations.

A number of recurring themes were highlighted between the two pre-engagement programmes, including:

- Improving communications to be more inclusive;
- A lack of clarity around the role of the WiC either as an overspill for GP surgeries or an emergency centre;
- The need to create a person-centred approach to services which supports the creation of a safe space for all service users.

What are the options for the possible future of the Norwich WiC, VAS, and GP Practice at Rouen Road?

Considering all the information provided above, NHS Norfolk and Waveney has produced the following options, which take into account a service that:

- Provides good value for money and reduces duplication of funded services - we are not looking to save money, but to use our resources more effectively
- Works collectively for all partners involved, including patients, Norwich-based GP practices, NHS Norfolk and Waveney and NHS England
- Is in line with national policy and local priorities, including the NHS strategies for addressing health inequalities and improving access to healthcare services, as well as our local [Integrated Care Strategy](#) and [Clinical Strategy](#).

Option 1

No Change. Reprocure (buy again) all three services

Summary of proposal: this option would mean that the current WiC service, VAS, and GP practice would be reprocured (bought again) as they currently are, under one contract. This would mean the current location and services provided would not change. This would:

- Not support GP practices to improve resilience
- Not support improvements to patient access to healthcare services or address health inequalities
- Not deliver value for money as it duplicates other funded services such as Enhanced Access and GP Out of Hours

Additionally, as described above, the way that we access healthcare is changing. Through the creation of PCNs, the NHS is encouraging practices to work together to share provision of healthcare activity including appointments, screening, and vaccinations. Providing a walk-in facility is no longer a key feature of NHS policy. Based on a review of national policies as described above and local healthcare needs, we do not think this is the most appropriate option.

Advantages

- There would be no disruption to the services at the GP practice, VAS, or WiC, and no uncertainty for staff currently working in these services.
- It would continue to provide a level of support for GP practices experiencing capacity issues.
- There would be an opportunity to review the services and their opening hours following feedback from the consultation.

Disadvantages

- It is not in line with NHS policy. National policy is to increase the number of appointments in general practice, including appointments that are earlier and later in the day, through the Enhanced Access policy. Providing a walk-in facility is no longer a key feature of NHS policy.
- This model of care no longer provides the best value for money. We are currently funding two services for people to receive general practice services, as they can get care from a local GP practice and from the walk-in centre, as well as the [GP Out of Hours](#) service. This duplication is inefficient. It made sense when walk-in centres were established as they provided longer opening hours than GP practices, however with the introduction of the [Enhanced Access policy](#), people can now get appointments earlier and later in the day from GP practices around the Norwich PCN area.
- It wouldn't help to reduce health inequalities in the Norwich PCN area where we know there are people living with unmet health needs
- Feedback from the engagement undertaken showed us that the current role and use of the WiC isn't clear and delivering best value for patients and the wider community of Norwich
- It wouldn't be in line with the strategic direction of national policies outlined by NHS England or the ICS's [Integrated Care Strategy](#) and [Clinical Strategy](#).

Option 2

Reprocure (buy again) the VAS and GP Practice at Rouen Road only (and allow the WiC service to expire)

Summary of proposal: This option would mean that the location and services provided at the GP Practice at Rouen Road would not change, and the VAS would continue to be provided from Under One Roof on Westwick Street. The WiC would close.

As explained above, the WiC is delivering general practice services by providing approximately 5,666 appointments monthly. This option would reduce available capacity across the healthcare system and reduce patient access to general practice services. Based on a review of national policies as described above and local healthcare needs, we do not think this is the most appropriate option.

Advantages

- No change to the patients registered at the GP Practice at Rouen Road or those who are receiving healthcare support via the VAS.

- There is an opportunity to review the service and opening hours following feedback from the consultation.
- It would remove the duplication of services provided by the Enhanced Access policy and GP Out of Hours service, as described above.

Disadvantages

- While the patients registered at the GP Practice at Rouen Road would continue to receive general practice services, and vulnerable adults would still be able to receive healthcare support via the VAS, there would be no additional local services provided in place of the WiC. This would reduce capacity and service within the Norwich area unless alternative provision was commissioned (bought).
- It would not help to improve the resilience of general practice in the greater Norwich area. Patients would no longer be able to access care from the walk-in centre when they couldn't get timely care from their GP practice, nor would practices be able to offer more appointments to replace the lost capacity without receiving greater investment.
- It wouldn't help to reduce health inequalities in the Norwich PCN area where we know there are people living with unmet health needs
- It wouldn't be in line with the strategic direction of national policies outlined by NHS England or the ICS's [Integrated Care Strategy](#) and [Clinical Strategy](#).

Option 3

Reprocure (buy again) the GP practice and the Vulnerable Adults Service – Inclusion Health Hub under one contract. Redesign and commission (buy) the health service capacity that is provided at the Walk-in Centre in a different way to improve health outcomes in underserved communities across the Norwich area.

Summary of proposal: Based on a review of national policies as described above and local healthcare needs, we believe this is the most appropriate option. This option would mean that the location and services provided at the GP Practice at Rouen Road and the VAS would not change. The resources that are currently invested into the WiC would be redistributed across Norwich PCN to:

- Improve access to healthcare services for those with unmet health needs, seldom heard communities, the most vulnerable, and those that are socially excluded to help reduce health inequalities, in accordance with [NHS guidance](#) and Norfolk and Waveney ICS' [Integrated Care Strategy](#) and [Clinical Strategy](#).
- Join-up services to better support increased demand for general practice services and provide care closer to home for people living in underserved communities. This will provide appropriate access to healthcare for people as

well as support resilience to GP practices in line with the [Fuller Stocktake Report](#) recommendations.

- Provide the foundations to support the local health and care system going forward to address increased demand arising from new service developments (both in the intermediate and long-term), local population changes, and growing complexity of needs. By reshaping how resources are allocated it will provide coverage across the whole of Norwich and help address some of the increased pressure arising from planned housing growth.

We have not finalised details of how this would operate in practice because feedback from patients, the public, and healthcare professionals is essential at this early stage to shape how services could be delivered to best meet local needs.

This option would not mean a reduction in spending. It would use the same amount of resource currently invested in the WiC and redesign services to widen coverage across the Norwich PCN area to be able to respond to people's needs.

We know there are underserved communities across the Norwich PCN area that have unmet health needs (see [Appendix 1](#)), and we want to improve access to general practice services for Norwich's diverse and growing population. Following [NHS guidance](#) and the principles of the [NHS Long Term Plan](#), PCNs should prioritise equity of access to healthcare services to help drive down levels of health inequality in our communities and improve health outcomes for all.

This option would provide continued support and resilience to Norwich-based GP practices to help manage patient demand for general practice services by integrating capacity with other existing funded services. Examples could include [Enhanced Access](#) which offers same-day and pre-bookable appointments, [GP Out of Hours](#), care home visiting, and home visiting. This supports the wider joined-up approach to integrated healthcare services in Norwich which will see neighbourhood teams working together to provide a range of integrated health and care services to help keep people well and out of hospital.

Patients who are registered with a GP practice within the Norwich PCN area would still be able to access same-day and pre-booked healthcare appointments through their own GP practices and onwards through Enhanced Access according to clinical need. For urgent problems outside of usual opening hours, patients would still be able to access the GP Out of Hours service by calling NHS111.

Public feedback from the consultation is essential in helping to shape what this looks like. Redesigning the WiC capacity would provide flexibility to adapt services and enable practices working together in Norwich PCN to manage current and future demand for healthcare. It would help to reduce health inequalities in our vulnerable and at-risk population groups, support resilience in GP practices, and follow guidelines set out in national and local strategies and policies. We believe this is the most appropriate option.

Advantages

- The patients registered at the GP Practice at Rouen Road would continue to receive general practice services, and vulnerable adults would still be able to receive healthcare support via the VAS.
- There is an opportunity to review the services and opening hours provided following feedback from the consultation.
- It would enable Norwich GP practices to develop services in their PCN that address health inequalities and provide equal access for vulnerable and at-risk population groups.
- It would remove the duplication of services outlined above yet maintain the overall capacity of services available in the greater Norwich area.
- It would enable capacity to be integrated with other existing funded services such as Enhanced Access, GP Out of Hours, care home visiting, and home visiting.
- The resources (money and workforce) associated with the WiC would be reshaped to address local needs across Norwich, build and strengthen services that improve outcomes for local people and provide resilience to practices in Norwich.
- This approach is in line with the strategic direction of national policies outlined by NHS England and the ICS's [Integrated Care Strategy](#) and [Clinical Strategy](#).
- It builds on what people have said to us previously about how they want their health needs supported in Norwich. Previous feedback we've received has indicated that people want more services delivered closer to home, as well as for more integrated services, and better communication between services and the public.

Disadvantages

- While people would continue to be able to access general practice services from a local GP practice, the ability to walk-in without an appointment would be removed. This may be unpopular with people who prefer not to book or wait for an appointment.
- This option doesn't provide immediate resilience support for local practices experiencing capacity issues, although overall capacity in the healthcare system would be maintained.
- The location of where some staff work would likely change, and could require travel outside of Norwich city centre
- How patients access general practice services in Norwich would change as some patients may have to travel to a different location which could be outside of Norwich city centre.

What is Enhanced Access?

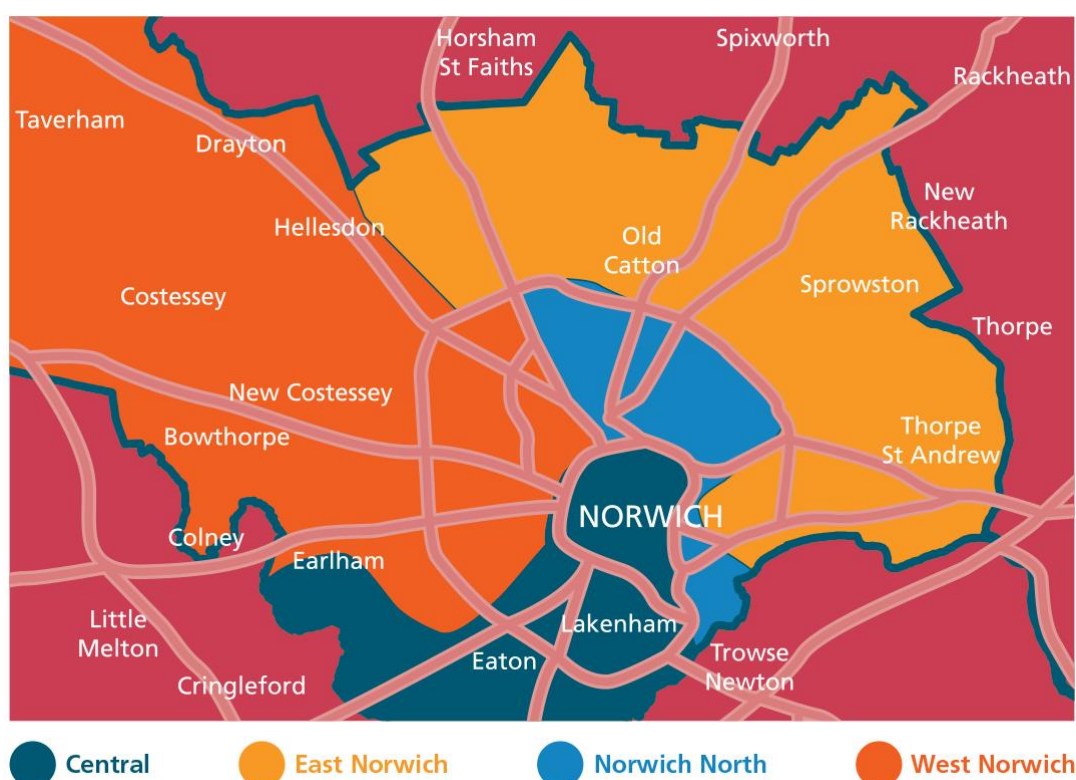
Under the national Enhanced Access policy that was introduced in October 2022, general practice now has appointments available 8am – 8pm Monday to Friday, and 9am – 5pm on Saturdays. These additional early morning, evening and weekend appointments are offered at various hubs across Norfolk and Waveney.

This means health professionals working in your area will have access to additional appointments to meet the needs of their patients. These additional early morning, evening, and weekend appointments will be offered at various surgery hubs across the greater Norwich area, which may be at your practice or one closer to you than the WiC in Norwich city centre. Enhanced Access appointments are accessed via GP practices. [Read more about Enhanced Access here.](#)

What is the Norwich PCN and what area does it cover?

[PCNs](#) are groups of practices that work together in a number of different ways to provide services that are responsive to patient needs in their area. PCNs build on existing general practice services and enable greater provision of proactive, personalised, coordinated, and more integrated health and social care for people close to home.

The Norwich PCN covers the below area:



Provide your feedback on the options outlined in this consultation

Using the information provided above and in combination with your own knowledge and views, we would like your feedback on the following questions:

1. Are you giving feedback as an individual or are you representing someone else (e.g., someone you care for, a friend, group, or organisation)?

- ☐ As an individual
- ☐ As a staff member at one of the services
- ☐ I am representing someone else (please say who)

2. Please tell us your thoughts about Option 1

3. Please tell us your thoughts about Option 2.

4. Please tell us your thoughts about Option 3, which we think is most appropriate?

What do you think are the advantages?

What do you think are the disadvantages?

5. Do you understand how we intend to look after patients who are currently using the WiC? If No, what questions do you have?

- ☐ Yes
- ☐ No

If No, please let us know what questions you have:

6. Do you think that some individuals or groups are more likely to be more positively or negatively affected than others if Option 3 is taken forward? If yes, please say how?

- ☐ Yes
- ☐ No

If Yes, please say how:

7. Do you have additional ideas or suggestions on how the healthcare capacity associated with the Norwich Walk-in Centre could be reshaped so that it offers more equal access for all Norwich residents, help meet growing local demand for general practice services, and support resilience of general practices in Norwich?

8. Are there any other options you would like us to consider?

Help us to shape how health services are delivered locally

We need your help in shaping where and how NHS Norfolk and Waveney and practices in Norwich PCN work to deliver healthcare to patients in the greater

Norwich area now and in the future. Please tell us about your experiences and preferences around general practice services through the questions below.

9. Have you used any of the services described above within the last 12 months?
Please tick all that apply:

- ☐ The Walk-in Centre
- ☐ The GP practice at Rouen Road
- ☐ The Vulnerable Adults Service – Inclusion Health Hub
- ☐ None of the above
- ☐ I can't recall

10. How far would you be willing to travel for a pre-booked general practice service appointment?

- ☐ Less than 5 miles
- ☐ 5 - 9 miles
- ☐ 10 – 14 miles
- ☐ 15 – 19 miles
- ☐ 20+ miles

11. There are lots of important factors that influence your preferences for accessing general practice services. Please select the top 6 most important factors to you from the list below.

- ☐ Being able to book a same day appointment
- ☐ Being able to book an appointment in advance
- ☐ Being able to walk-in without an appointment
- ☐ Being able to get an early morning appointment
- ☐ Being able to get a lunchtime appointment
- ☐ Free car parking on site
- ☐ Close to public transport
- ☐ Being able to have a video or phone consultation to reduce travel for face-to-face appointments
- ☐ Having a face-to-face appointment
- ☐ Access to translation and interpreting services
- ☐ Having healthcare services close to where you live (within walking distance)
- ☐ Having healthcare services in a single centralised location (no matter the distance you have to travel)
- ☐ Other (please specify) _____

12. What is the most important consideration for you when you need to access general practice services, and why?

13. Are there any barriers that make it difficult for you to get general practice services when you need them?

14. Of the general practice services you have used before, what was it about them that worked well for you?

Opportunities to have your say

- **Online at** https://www.smartsurvey.co.uk/s/GP_Norwich/. You will be able to complete the survey online using an ipad that will be available at the WiC during the consultation period. In addition, engagement staff will be on hand over a number of days throughout the consultation period to help people complete the survey face-to-face.
- **Email:** nwicb.haveyoursay@nhs.net. You can fill in this consultation document and email it back to us. Please use the Subject Line: Providing general practice services in Norwich
- **Post:** Printed copies of this consultation document will be available at the WiC and GP Practice on Rouen Road. Completed copies can be posted back to us at the following address:

FAO Communications and Engagement Team, NHS Norfolk and Waveney ICB, County Hall, Martineau Ln, Norwich, NR1 2DH.

Next steps

The consultation and engagement period will be open between 24 January and 26 March 2023.

NHS Norfolk and Waveney will then carefully consider the feedback received from patients, public, and wider stakeholders, and take into account all other considerations as outlined in this document. The outcome of this consultation and next steps will be communicated publicly on our website in due course.

Appendix 1 – Health Inequities data for Norwich area

The Norfolk Office of Data & Analytics (NODA) published Norwich Reducing Inequality Target Areas (**RITAs**) which provide analysis of indicators of multiple indices of deprivation (**IMD**) in October 2022. This report and the full set of Health Inequalities data for the Norwich area can be accessed online at [Norwich RITAs analysis of indicators \(norfolkinsight.org.uk\)](https://norfolkinsight.org.uk)

IMD is a widely used indicator to rank relative deprivation, and includes seven different domains of deprivation: income, employment, education, health, crime, barriers to housing and services, and living environment.

To briefly summarise the key takeaways; when considering all indicators of multiple deprivation, the six worst performing (Middle Layer Super Output Areas) MSOA areas in order, relative to the Norwich average, are:

1. City Centre West
2. Mile Cross
3. Earlham
4. Lakenham & Tuckswood
5. Heartsease & Pilling Park
6. Bowthorpe & West Earlham

Heat map showing neighbourhood index across deprivation indicators

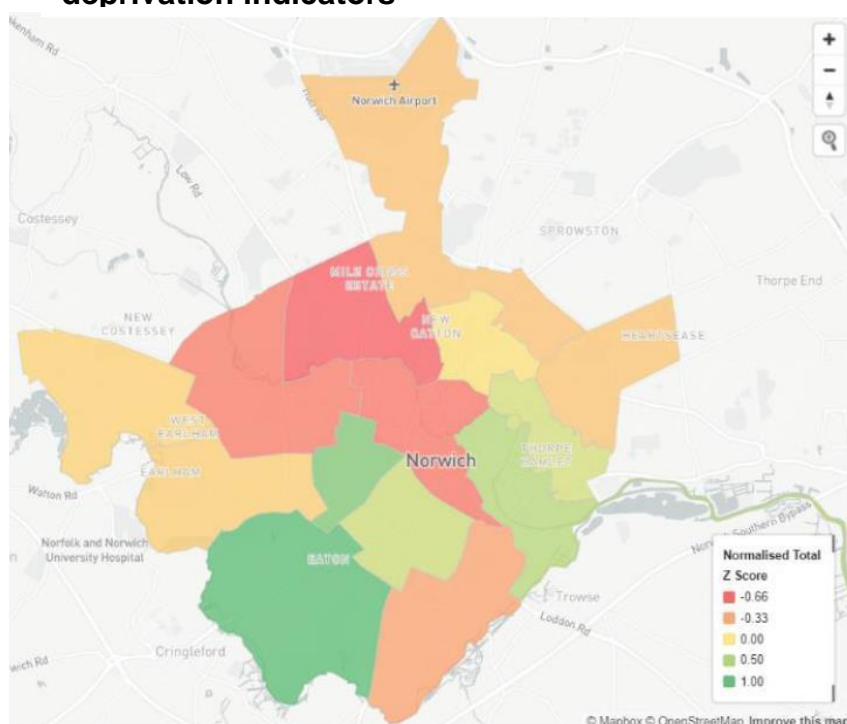
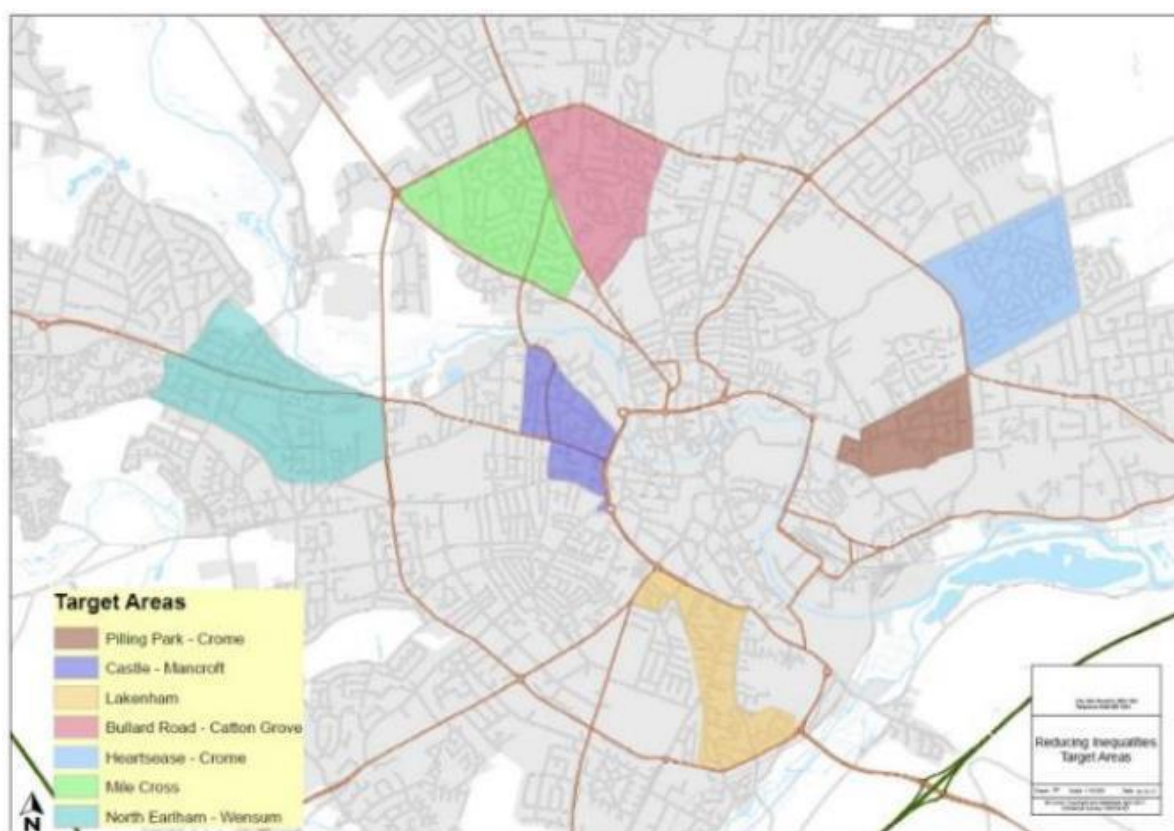


Figure 2.0: The seven local areas identified in 2015 RITAs analysis

The analysis conducted by NODA demonstrates differences in the particular issues faced by each MSOA.



Appendix 2 – Glossary

Alternative Provider Medical Services (APMS)	A form of GP contract which is time-limited.
Clinical triage	<p>GP practices receive requests for medical help or advice. For each patient request, the practice needs to work out:</p> <ul style="list-style-type: none"> • Why they have sought help from their GP • What kind of help the patient needs • How quickly the patient needs help • Who is the best person to help this patient • Where and when the patient should be seen <p>The answers to these questions help the practice to sort patients based on their clinical needs.</p>
GP Out of Hours	This service provides access to GP services during the out-of-hours period from 6.30pm to 8am on weekdays and all day at weekends and on bank holidays.

	<p>Outside normal surgery hours you can still phone your GP surgery, but you'll usually be directed to an out-of-hours service. GPs can choose whether to provide 24-hour care for their patients or to transfer responsibility for out-of-hours services to NHS England, which is responsible for providing a high-quality service for the local population.</p> <p>But this can mean different areas can have slightly different services.</p>
Integrated care systems (ICSs)	<p>ICSs are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. Find out more about the Norfolk and Waveney Integrated Care System at https://improvinglivesnw.org.uk/</p>
Primary Care Trust (PCTs)	<p>PCTs were part of the NHS in England from 2001 to 2013. PCTs were responsible for commissioning primary, community and secondary health services from providers. Primary care trusts were abolished on 31 March 2013 as part of the Health and Social Care Act 2012, with their work taken over by clinical commissioning groups (CCGs). Prior to July 1, 2022, NHS Norfolk and Waveney was Norfolk and Waveney CCG.</p>
Primary Care Network (PCNs)	<p>PCNs are groups of practices that work together in a number of different ways to provide services that are responsive to patient needs in their area. Through the creation of PCNs, the NHS is encouraging practices to work together to share provision of healthcare activity such as general practice appointments, screening, and vaccinations, to coordinate and provide more integrated health and social care for people close to home. Find out more about PCNs on the ICS website.</p>
Urgent care	<p>An illness or injury that requires urgent attention but is not a life-threatening situation. Urgent care services include a phone consultation through the NHS111 Clinical Assessment Service, pharmacy advice, out-of-hours GP appointments, and/or referral to an urgent treatment centre (UTC). If unsure what service is needed, NHS111 can help to assess and direct to the appropriate service/s.</p>