

Summary of key themes from Urgent Care Public Reference Group workshop

Task 1: Travel times and 'central' definition

Groups were asked to discuss

- a) what they would define as 'central' and why
- b) what they considered to be a reasonable travel time by car, public transport and walking for urgent care services in their local area (eg GP) and city-wide urgent care services.

How define 'central'

- Town Hall
- Inner ring road
- Hallamshire (one journey, can walk from centre)
- Where most people live
- No more than 1 bus journey (no changes)
- Max of 15 min from city centre.
- City Centre
- It could be S1 or S2 (Inner part)
- Accessibility – 'Somewhere where everybody can get to'
- Ease of access - parking / public transport eg Bottom of the Moor/Fargate/ Peace Gardens/castle gate/station, on tram route)
- Facilities

Reasonable journey times

	Walk	Public transport	Car
Local	Ranged from 3-30 mins Most mentioned: 20 mins	Not about time – 1 bus Ranged from 5 -30 mins Most mentioned: 30 minutes	Ranged from 5-30 mins Most mentioned: 10 mins
City-wide	Feeling probably not an option for urgent care	Ranged from 30 -60 mins Most mentioned: 30-45 mins	Ranged from 20-60mins Most mentioned: 30 mins

Factors to take into consideration

- Varies according to time of day
- Terrain (when walking) – eg hills make it more difficult
- Impact of disabilities
- Impact of travelling with children
- Impact of feeling unwell – makes travelling harder

- Not about distance, it's about time.
- Reduced travel times if feeling unwell
- Need to factor in parking time / time waiting for public transport etc
- Journey back home
- Expense of longer journeys
- Impact of bad weather – eg ice on hills
- Sometimes easier to get to Rotherham A&E / Walk-in Centre or Chesterfield due to traffic

Task 2: Review of alternative suggestions made during the consultation

The group discussed the pros and cons of some of the alternative approaches suggested in the consultation feedback and issues relating to access.

- Overall, very mixed views.
- No consensus on whether walk-in centre (WIC) or minor injuries unit (MIU) more important.
- No consensus on whether Broad Lane or Royal Hallamshire (RHH) more accessible.
- Lots of views that RHH better than Northern General (NGH) for access – but not everyone agreed.
- Differing views about what is accessible.
- Concerns re parking at RHH.
- Concerns re access to WIC by public transport.
- Differing views from different areas – concerns raised about access for people in East and West.
- Several comments about South being generally more affluent and having more car users so not the greatest area of need.
- Lots of discussion around tailoring services to communities of greatest need.
- Concerns raised re air pollution.
- People not confident in optometrists providing urgent care – although if they were, several felt local approach would be good.

Task 3: criteria

- When developing the original options for consultation, NHS Sheffield CCG used a set of criteria to assess possible options and select the top 3 to consult on.
- Groups were asked to rate these criteria in order of importance with no 1 being the most important.
- Groups approached this in different ways, with some rating them individually and others collectively. Taking all this into account, the overall ranking was:

1 st	Helps make sure that everyone can access care whatever their particular needs or circumstances are
2 nd	It will be simple for people to know where they should go for care
3 rd	People can easily get to services without long journey times
4 th	Patients will get the care they need at the first place they go
5 th	Supports closer working between different organisations
6 th	Makes the best use of staff, helping to maintain services in the longer term