Report of Head of Scrutiny and Member Development

Report to Scrutiny Board (Health and Well-Being and Adult Social Care)

Date: 18 April 2012

Subject: Urgent Care Services – consultation

Are specific electoral Wards affected? ☒ Yes ☐ No
If relevant, name(s) of Ward(s):

Are there implications for equality and diversity and cohesion and integration? ☐ Yes ☒ No

Is the decision eligible for Call-In? ☐ Yes ☒ No

Does the report contain confidential or exempt information? ☒ Yes ☐ No
If relevant, Access to Information Procedure Rule number:
Appendix number:

Summary of main issues

1. The purpose of the report is to provide a brief update on the outcome of the engagement and consultation around Urgent Care Services in Leeds and the subsequent decision of the NHS Airedale, Bradford and Leeds (ABL) Board.

2. At the Health Service Developments Working Group (HSDWG) meeting on 9 January 2012, it was confirmed that the proposals around Urgent Care Services in Leeds represented a Level 4 (major/substantial) service changes. As such, the Scrutiny Board was required to be formally consulted on the proposals and provided with an opportunity to formally respond.

Outcome of previous Scrutiny Board meeting (25 January 2012)

3. At the meeting held on 25 January 2012, representatives from NHS Leeds attended the Scrutiny Board (Health and Wellbeing and Adult Social Care) and outlined the consultation options detailed in the documentation presented at that meeting.

4. The Scrutiny Board was advised that the 14-week public consultation period commenced on 5 December 2011 and was due to run until 4 March 2012. Members were advised that the 14-week consultation period was more than the statutorily required 12-week consultation period.

5. The Scrutiny Board was also advised that the NHS Airedale, Bradford and Leeds Trust Board would make a decision on the future provision of urgent care services following analysis of the consultation response.
6. A discussion on the options presented in the consultation document followed and a number of matters highlighted, including:

- Confirmation that urgent care relates to both physical and mental health;
- While much of the focus of the consultation document was around the geography or location of future urgent care services across the City, it was important to ensure sufficient consideration of the future quality of services in all urgent care settings across the City;
- The potential differences in interpretation of ‘urgent’ between professionals and patients/ the public;
- Potential to improve the current signage around Lexicon House;
- Some support for Option C with future provision in East Leeds and the City Centre to replace current provision at Lexicon House.

7. In summarising the discussion at the meeting, the Chair of the Board welcomed the consultation and, in particular the extended consultation period. The Chair recognised that within the Scrutiny Board there had been no clear consensus on a preferred option and therefore a formal consultation response could not be submitted. However, all members of the Scrutiny Board were encouraged to submit individual consultation responses.

**NHS Airedale, Bradford and Leeds analysis**

8. Following the end of the consultation period on 4 March 2012, NHS Airedale, Bradford and Leeds analysed the outcomes on the engagement activity and presented this to the Trust Board for decision on 22 March 2012. A summary report from NHS Airedale, Bradford and Leeds is attached at Appendix 1.

9. Appropriate representatives from NHS Airedale, Bradford and Leeds have been invited to attend the meeting to present the report and address any questions raised by members of the Scrutiny Board.

**Recommendations**

10. To note the information presented and determine any additional scrutiny activity that may be required.

**Background documents**


---

1 The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.