 <b>Belfast Health and Social Care Trust</b> caring supporting improving together		<b>Paper Ref. Num.</b> P119-2025  <i>Note:- To be completed by HQ meeting organiser</i>			
<b>Belfast Health &amp; Social Care Trust Meeting Template Sheet</b>					
<b>Meeting</b> TB Public					
<b>If other meeting please specify</b>		Please enter text here			
<b>Purpose of paper</b>	<b>For Discussion</b>  <input type="checkbox"/>	<b>For Information</b>  <input type="checkbox"/>	<b>For Decision/Approval</b>  <input checked="" type="checkbox"/>	<b>Statutory Requirement</b>  <input type="checkbox"/>	<b>Other</b>  <input type="checkbox"/>
<b>If other purpose please specify</b>		Please enter text here			
<b>Presenter</b>	Brian Armstrong	Enter Other Presenter Name Here			
<b>Date of meeting</b>	06/03/25				
<b>Title of paper</b> (Maximum of 200 characters)  Summary of feedback report on the consultation undertaken by Belfast Health and Social Care Trust on the future provision of General Practice Out of Hours					
<b>Background (Maximum of 1000 characters)</b>  Summary and feedback and recommendations re consultation on GP OOH					
<b>Options for consideration (Maximum of 1000 characters)</b>  On basis of feedback, the proposal is not to close either GPOOH base at this time; to proceed with Multi Disciplinary Team alongside GPs to create Primary Care Out of Hours; to work with DOH and Pharmacy re scoping of electronic prescribing; to take more widespread promotion of Trust consultations and to carry out public education campaign re benefits of MDT and which service to access and when (similar to Choose Well)					
<b>Recommendations (Maximum of 1000 Characters)</b>  Trust Board is asked to consider the consultation feedback report and endorse the recommendations, prior to publication.					

**Note:-**

***Any papers accompanying this template should not exceed 10 pages in length.***

***Please ensure when submitting papers that orientation is set so that the content of the paper can be read***

# Summary of feedback report on the consultation undertaken by Belfast Health and Social Care Trust on the future provision of General Practice Out of Hours

## Introduction

This summary paper has been prepared for Executive Team/Trust Board to inform them on the feedback from the general public, staff and interested stakeholders in regard to the consultation on the future provision of General Practice Out of Hours. A more detailed [feedback report](#) has been produced to share publicly subject to endorsement on the proposed way forward. As part of our statutory consultation duties, it is imperative that we follow the Gunning Principles of consultation:

- **Gunning Principle 1:** Consultations must occur while proposals are still at formative stage.
- **Gunning Principle 2:** Sufficient information needs to be supplied for the public to give the consultation 'intelligent consideration'.
- **Gunning Principle 3:** There needs to be an adequate time for the consultees to consider the proposal and respond.
- **Gunning Principle 4:** Conscientious consideration must be given to consultation responses before decisions are made.

Belfast Trust is responsible for managing and providing the General Practice Out of Hours service for the population of Belfast. The service has been provided from 2 sites – one on the Crumlin Road and the other on Knockbreda Health and Wellbeing Centre – the locations of which originated from when the legacy North and West Belfast Health and Social Services and South and East Belfast Health and Social Services Trusts existed prior to the creation of Belfast Trust in 2007. The service faced certain challenges over a number of years – including populating the rota (notably over holiday periods), not meeting its key performance indicators in terms of response times and also facing a £1million overspend. Difficulties of securing adequate cover have lessened over more recent years and the introduction of a virtual one site GPOOH service improved equity and efficiency as it created one list for all of Belfast, as opposed to site specific lists.

The consultation ran from 3<sup>rd</sup> October 2024 until 2<sup>nd</sup> January 2025. The Trust also facilitated a two week extension for 2 different stakeholders to submit their response. The consultation paper launched in October 2024 proposed moving the GP OOH services to one site with a preferred option being on the existing Crumlin Road site. Secondly, it proposed introducing a multi-disciplinary team to work alongside GP colleagues in out of hours to reduce 100% reliance on one single discipline and to ensure that patients got to see the right person at the right time depending on the acuity of their condition.

The engagement and consultation were undertaken in accordance with our statutory responsibilities but also to ask the people who use and deliver the service their opinions on the proposal. The consultation paper and equality screening were hosted online on Citizenspace and the link was posted on the Trust website. During the 13 week consultation, the Trust received the following responses:

Category	Total
Citizenspace	861
Emails (n.b. Some individuals sent multiple emails)	21
Letters	4
Assembly Questions	2
FOI	2
TOF (DoH Enquiries)	4
Constituency Enquiries	9
Total	903

This feedback summary paper outlines the engagement discussions and feedback received during the consultation. On consideration of all of the feedback and the written responses, the Trust was able to identify common themes.



The Trust has taken all of these issues and concerns into account – and these have duly influenced and informed the Trust’s decision-making in regard to the future of the out of hours service.

## Current Services and the Case for Change

GP OOH service, as managed by Belfast Trust, provides an Out of Hour urgent care service to the population in the Belfast Trust catchment area (439,802), who are entitled to general medical services out of hours from 6pm – 8am weekdays and weekends over the 24-hour period, including bank holidays. The current service provision is mainly telephone consultation with either: telephone assessment, treatment and advice from a GP which may lead to:



The GP OOH service also works very closely with community district nurses and staff in nursing homes. They work together to deliver palliative care and are responsible for confirming and recording the end of life.

Based on the data available, the service is predominantly telephone prioritisation and consultation (85%), and the requirement to attend either of the bases to see a GP out of hours is relatively low (14%) and only one of contacts require a house visit by the GP. However, in the absence of electronic prescribing, 40% of the 85% who receive a telephone consultation may need to come to either of the bases to collect a prescription.

The Trust has introduced Phone First, which is a clinical triage advice and guidance service designed to make it easier and quicker for service users with an urgent need to get the right advice or treatment they need. It was initially introduced for patients over 16 but has now been extended to children so people of any age can access this service. Before attending an Emergency Department at the Royal Victoria Hospital, Mater Infirmorum Hospital or Royal Belfast Hospital for Sick Children people are asked to Phone First. When someone makes the call, they will be assessed on the phone by a healthcare professional and will then be given advice and, if required, directed to the most appropriate urgent or community service to meet their treatment or care needs. This could include direction to attend an Emergency Department, an Urgent Care Centre, a Minor Injuries Unit or being redirected to a GP, Pharmacist or other service.

## Why did the Trust propose the changes?

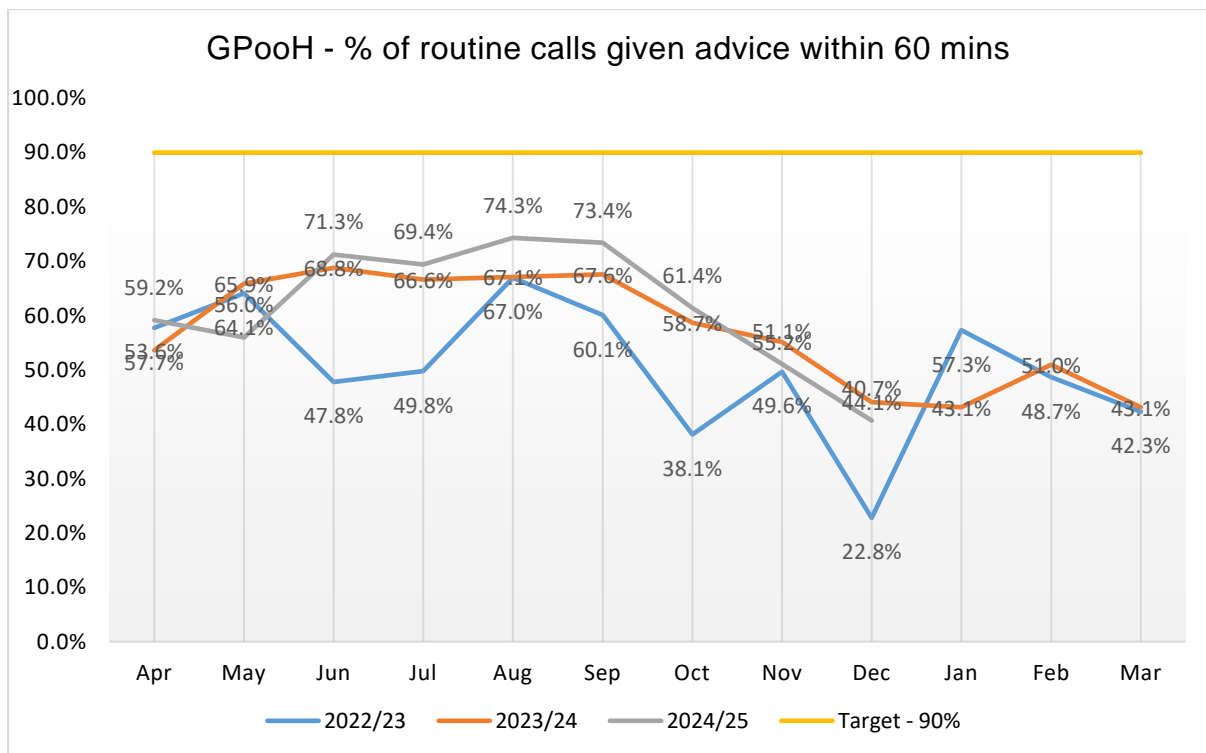
There were a number of strategic drivers that helped shape the proposal to have a multi-disciplinary team on one site on the Crumlin Road.

- [No More Silos](#)
- [Review of Urgent and Emergency Care Services in Northern Ireland,](#)
- [RQIA review](#) in April 2021

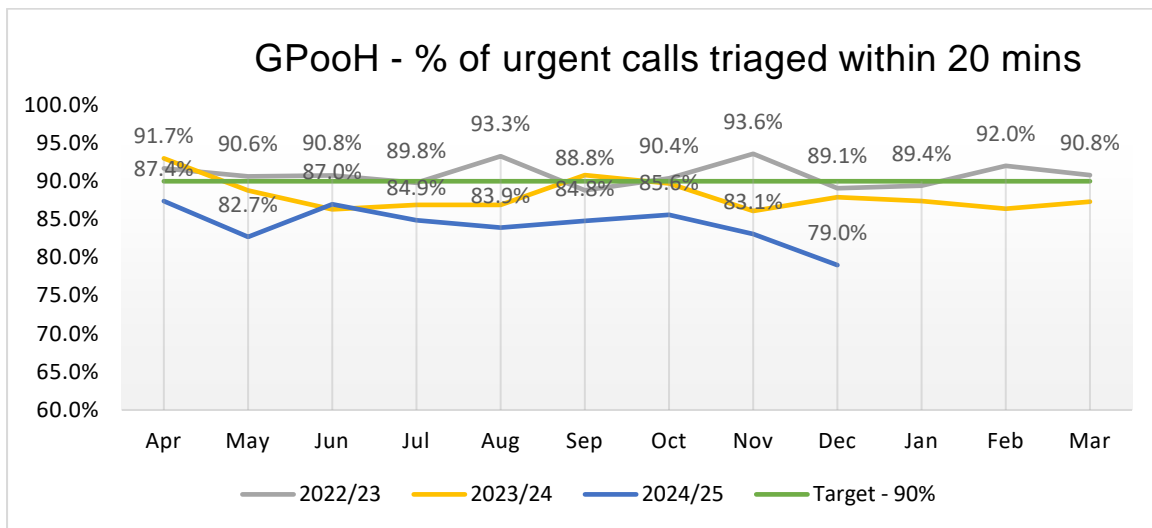
Alongside these strategic drivers, the Trust set out to reconfigure the current GP OOH service which was in response to the increasingly challenging financial landscape and the current performance targets in place. In considering the best use of public monies, the Trust issued this proposal to help address the annual overspend of £1 million on the service provided from the two sites.

From a performance perspective, the service has been failing to meet some of its Key Performance Indicators, as set by the Strategic Planning and Performance Group (SPPG) in terms of response time as outlined below. Figures 1 and 2 set out the current response times.

**Figure 1: percentage of routine calls given advice within 60 minutes**



**Figure 2: percentage of urgent calls triaged within 20 minutes**



These challenges are not unique to Belfast and can be attributed to several factors including demographic change with an ageing population with more chronic conditions, daytime service pressure in GP Practices, and increasing demand for services.

In essence, it is within this context, that the Trust is seeking to establish a sustainable, resilient primary care out of hours workforce for the future to provide an equitable and efficient service, and to ensure that the patient has access to the right person at the right time in the right place.

### The Consultation Process

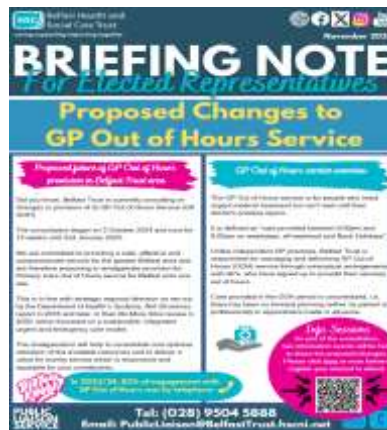
The consultation was launched on 3<sup>rd</sup> October 2024 and ran until 2<sup>nd</sup> January 2025. The Trust extended the consultation period from the recommended best practice consultation period of 12 weeks to 13 weeks to take into account the Christmas holidays. The Trust also offered an extension of a fortnight after that when a number of parties requested it.

The Trust used Citizen Space as an online forum on which to host its consultation – as the online Consultation and Survey tool recommended by the Northern Ireland Civil Service. A link to the Trust’s consultation on Citizenspace was added to the Trust’s internet page.

A range of communication and engagement was undertaken during the consultation period which included Trust social media, advertisement via Trust involvement communication channels, within local community newsletters e.g. East Belfast Community Development Association and via the Patient and Client Council weekly newsletter. Stakeholders who had attended previous engagement sessions were also informed.

On 6<sup>th</sup> November 2024, Trust representatives met with Royal College of General Practitioners Northern Ireland to discuss the consultation document and to make some resultant amendments.

A briefing for Members of the Local Assembly and Elected Representatives was developed and shared on 22<sup>nd</sup> November 2024.



During the consultation, the Trust was aware that misinformation about the proposal had been shared and widely promoted which included a misconception that the Knockbreda Health and Wellbeing Centre was closing in January 2025. This resulted in a number of individuals contacting the Trust. During the engagement sessions and all communication, it was clearly highlighted that the Centre was not closing and the proposal was to change the GP OOH service only and no other service. This proposal explicitly referred to the reconfiguration of GPOOH from the two current sites to the Crumlin Road site, but it had no bearing on the other services at the Knockbreda Centre.

The Trust arranged a series of consultation information sessions for external and internal stakeholders to ensure that people were aware of the ongoing proposal and the correct scope of the proposal. These took place on the afternoon of Thursday 28<sup>th</sup> November 2024 in Olympia Leisure Centre and during the evening on Thursday 5<sup>th</sup> December 2024 in Knockbracken Hall. The Trust sought different times and different venues to facilitate a choice of options and to maximise attendance. At the 28<sup>th</sup> November session in Olympia, 5 people attended. 57 people attended the consultation event in Knockbracken Hall. At both events, stakeholders included the public and elected representatives.

Two staff sessions were convened on the 17<sup>th</sup> and 18<sup>th</sup> December - one of which was online and the second took place in the Knockbreda Centre to offer different options to attend. A total of 40 staff attended these staff consultation information sessions.

At their request, a meeting was also convened with the Alliance Party on 18<sup>th</sup> November 2024 and a further meeting was held with the Democratic Unionist Party on 21<sup>st</sup> February 2025.

Whilst the majority of respondents were strongly opposed to the preferred location of the Crumlin Road site, there was a degree of consensus that a one site model could ultimately work – provided that it was in fit for purpose premises, with accessible car parking and security and in a central location for all of the population of Belfast. People queried why the Trust would move from a modern fit for purpose building to a portacabin with no dedicated or accessible car parking.

One clear factor, which would prevent all stakeholders being in favour of a one site model, was the inability to issue electronic prescriptions. Our data shows us that 85% of the activity within GP OOH across both sites is telephone based advice and consultation. However, without electronic prescribing whereby a GP could email or send a prescription electronically to a pharmacy close to the patient's home, a proportion of those patients who had been assessed and diagnosed over the phone would have to travel to the single base to pick up a prescription.

Some said that they would not go to the GP OOH location on the Crumlin Road but would instead go to the Emergency Department at the Royal Victoria Hospital or the Ulster Hospital, whilst recognising that this would add further pressure to a pressurised system. Some people felt that taking a service out of south and east Belfast would leave the area without any out of hours provision and that there was already Emergency Departments in north and west Belfast, so could not see the rationale. Some perceived that this was not taking into account the needs of the Protestant, Unionist and Loyalist People – many of whom live in south and east Belfast - The query was posed how a single site could be equitable for the population of Belfast.

A lot of respondents mentioned lack of access to General Practice in hours/during the day, and it was clear that many perceived that GP Out of Hours provided an alternative when they could not get to see their GP during the day. Many were in favour of the introduction of the Multi-Disciplinary team but felt that they should be brought in to complement the current GP workforce in Out of Hours as opposed to any proposed reduction in the GP workforce. There was concern that any such reduction would impact on trainees getting the opportunity to work in out of hours as part of their requisite experience.

**Snapshot of feedback** (comprehensive detail provided in feedback report)

“ Part of an enhanced solution could be to provide an easier way to collect prescriptions – e.g the Doctor writes the script that any local pharmacist can access online with a specific reference number ”

“ The change is sensible and I support it - however GP OOH is built upon regular GP provision – there is an emerging and significant gap between now, and when people could access GPs for routine or non-urgent care – Out of Hours is now being used inappropriately to deal with this. ”

“ If this was to go ahead in one location, then it must be centrally accessible, have adequate onsite parking with the correct level of staff and resources ”

“ The Out of Hours service has already become an extension of surgeries with patients reporting not getting through to their practices or getting to see a GP – surely more doctors need to be recruited for GP OOH to cope with the extra demand ”

“ Travel and transport to north Belfast for urgent care especially for those with no access to a car. People will go to A&E instead & put pressure on those services ”

One-site is not a bad idea – it is just the location

A single site model might work but a lot more thought would be needed to find a central site that is accessible and has adequate car parking.

One site may prove extremely difficult for all patients to access

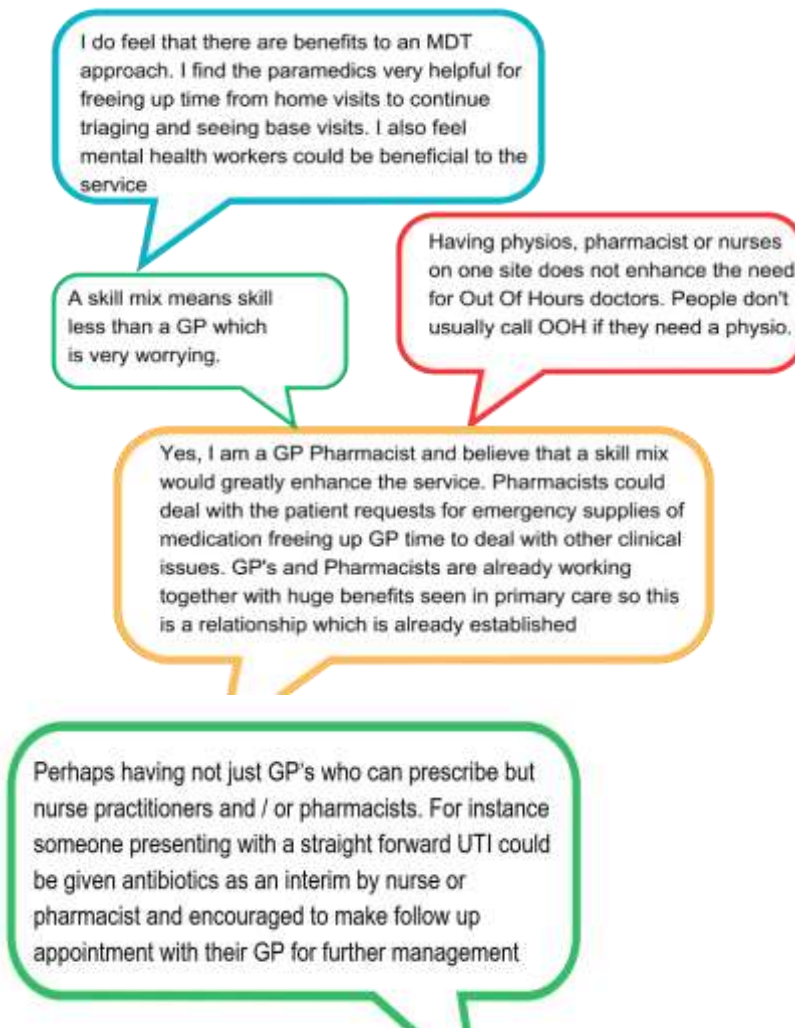
“ To get there by public transport is very difficult and time consuming. It requires 2 buses and there is only 1 every hour from here. What are the plans for those with no car and a need to attend in the night? ”

“ Consolidating the entire Out of Hours GP service for Belfast to one site will increase demand at Crumlin Road, risking longer wait times and reduced service quality. The proposal does not adequately explain how the single site will handle the increased volume of patients without negatively impacting service delivery. ”

Is there a more central location that the Trust can move to, to still allow for streamlining but to make it more convenient for all

Having used this service it is essential for local people... I think its removal would have a very negative impact on vulnerable, elderly, sick people. No direct transport to other site. Local service is essential

“ I don't think one out of hours service in a difficult to access location is nearly enough for a city the size of Belfast. The two current locations are very far apart ”



### Consideration of responses and Decision-Making process

All of the responses have been themed and analysed and fully considered. The Trust has listened to the people, who have engaged in this consultation, before making any decision in regard to the future of GP Out of Hours Provision. It acknowledges the level of concern expressed in regard to this proposal – all of which have informed its decision on the way forward.

Many people did provide feedback that the Trust had not been sufficiently proactive in its promotion of the consultation and that they had only come across it by chance. Feedback relating to communication about the consultation highlighted many people were unaware and only found it out through non-Trust led social media. There was a concern that those principally impacted by the proposal may not be regular users of social media. It was suggested that it would be better to have posters and information in GP surgeries and pharmacies to raise awareness. Some people stated that they thought that the consultation exercise was disingenuous and that the decision was '*fait accompli*' and had already been

made. The Trust notes and acknowledges that many people felt that publication of the consultation needed to be more widely advertised.

There was also feedback to indicate that the Trust needs to do more to educate the public about different services and levels of support provided, as well as promotion on the benefits of a multi-disciplinary team working along with GPs.

The Trust would seek to assure people that there was no attempt to be anything, but transparent in this consultation. Given the volume of responses, it is apparent that there was widespread knowledge about the consultation. Nonetheless, going forward in future consultations and as a learning organisation, the Trust will take a more proactive and extensive approach in raising awareness of its consultation activity. The Trust would be keen to stress that the purpose of the engagement and consultation was to garner the views of the public. The Trust will also do more to promote awareness of what service to use and when to ensure they access the right level of care and will consider how to raise understanding with the benefits of an MDT model.

As previously noted, there would be more support for a one site model in the future, provided it was in a centrally located, fit for purpose building with accessible and dedicated parking. The Trust also recognises that electronic prescribing would greatly reduce the need to come to a base to collect a prescription and the Trust is committed to working on this along with the Department of Health and Pharmacy colleagues.

Executive Team and Trust Board are asked to endorse the following recommendations on the way forward:

- (1) To not proceed with closure of either base at this point and both the Knockbreda and Crumlin Road GP OOH premises will remain open and operational.**
- (2) To move to a multi-disciplinary team with the introduction of nurses, paramedics and pharmacists working alongside GPs, thus transforming GP OOH into Primary Care OOH.**
- (3) To carry out public education campaign on when to access the appropriate service depending on the level of care needed and to highlight benefits of MDT working**