

- Urgent care close to home: NHS 111 advice, GPs and primary care, *urgent care centres*, paramedics at home and pharmacies.
- The *NHS Five Year Forward View*⁵ provides relevant new models of care:
 - A *Multispecialty Community Provider (MCP)* would bring together primary care practitioners including GPs, nurses, therapists and others to deliver a wider scope of services than traditional GP surgeries. These might take over district general hospitals.
 - *Primary and Acute Care Systems (PACS)* are a new variant of integrated care, allowing single organisations to provide NHS list-based GP and hospital services, together with mental health and community care services. Hospitals will be permitted to open their own GP services.
 - *Urgent and Emergency Care Networks* with linked hospitals, seven-day services, integrated mental health services and strengthened clinical triage and advice.
 - *Viable smaller hospitals* through three sets of actions: revised funding arrangements, new models of staffing and new organisational models. In particular, “a local acute hospital and its local primary and community services could form an integrated provider.”
- The direction of travel established by NHS England is compatible with independent thinking from health consultants Durrow, refined in the report I commissioned⁶.

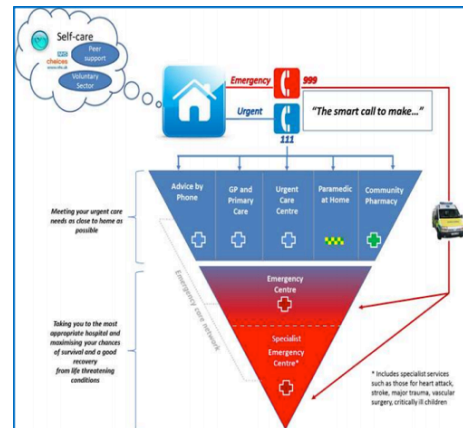


Figure 2 - NHS England's urgent and emergency care model

Recommendations

- Our hospital must be open for 24 hours, 365 days per year delivering confidence-inspiring care close to home in an NHS *Urgent Care Centre* integrated with the heart and stroke units.
 - A minority of patients would be transferred by ambulance to centres delivering specialist care. The experience of Haverstock Healthcare indicates that over 80% of patients might be treated locally.
 - Co-location of all blue-light services should be explored.
- The Centre should be staffed and organized in line with the new care models described in the NHS Five Year Forward View.
 - My preference would be for our NHS Trust to employ GPs and deliver the service directly as a PACS. In due course, the Trust should become a Foundation Trust, delivering various enhancements and opening the way to local mutual control.
- Through excellent services and superb communications, the public must be given at least the confidence and peace of mind which would come from having an old-style A&E department.

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⁵ *NHS Five Year Forward View*, NHS England, October 2014

⁶ *A better future for Wycombe hospital*, Durrow, 2014