



Equality Impact Assessment

The future of the NHS
Walk-in Centre and
improving provision and
access to primary care

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1. Organisation

Lewisham Clinical Commissioning Group

2. Purpose of an Equality Impact Assessment (EqIA)

2.1 The objective of this initial EqIA is to identify potential positive and negative impacts that may result of the changes, with particular emphasis on fulfilling the Public Sector Equality Duties (PSED) within which NHS Lewisham CCG has a duty to;

2.1.1 *Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited under the Equality Act 2010;*

2.1.2 *Advance equality of opportunity between people who share a protected characteristic and those who do not;*

2.1.3 *Foster good relations between people who share a relevant protected characteristic and those who do not share it.*

2.2 In addition, to align outcomes to community based care, which is;

- **Proactive and Preventative:** by creating an environment which promotes health and wellbeing, making it easier for people to find the information and advice they need on the support, activities and opportunities available to maintain their own health and wellbeing and to manage their health and care more effectively;
- **Accessible to all:** by improving access to local health and care services, including increasing children's access to community health services and early intervention support. And for everyone to have access to urgent care when needed;
- **Co-ordinated:** So that people receive personalised health and care services which are coordinated around them, delivered closer to home, and which integrate physical and mental health and care services, helping them to live independently for as long as possible.

2.3 The focus of this report is to assess the potential impact of the closure of the NHS Walk-in Centre, New Cross (as a result of the contract expiring) against improving access to primary care via the alternative GP Extended Access Service; on individual patients and relatives/carers who share one of more of the nine following protected characteristics (in no particular order);

- I. Age
- II. Disability
- III. Gender reassignment
- IV. Marriage and Civil Partnership
- V. Pregnancy and maternity
- VI. Race
- VII. Religion or belief
- VIII. Sex
- IX. Sexual Orientation

- 2.4 This report should be reviewed in conjunction with the full consultation document, which is located here: http://www.lewishamccg.nhs.uk/get-involved/consultation/WiC_Consultation_FINAL_09082017.pdf
- 2.5 This Equality Impact Assessment has been reviewed by the CCG Equality and Diversity Group and it will be refreshed to encompass any additional areas resulting from the responses to the consultation.
- 2.6 The report will then be submitted to the CCG Governing Body in November 2017.

3. The Service/s

3.1 *NHS Walk-in Centre*

- 3.2 The Walk-in Centre opened in March 2010. The Centre is for patients who are unable to get an urgent appointment with their GP and who have a minor injury or medical condition that is not life-threatening but needs to be seen. This is a walk-in service and is available from 8am to 8pm, 7 days a week, including public holidays.
- 3.3 The Centre does not offer any advice or consultations by telephone and does not have access to GP medical records for any patients, which is not uncommon for walk-in services.
- 3.4 In 2016/17 there were **29,528** attendances to the service, which is located in the Waldron Health Centre, New Cross.
- 3.5 More than half of all attendances to the service 2016/17 are not identified as Lewisham residents registered with a Lewisham GP.
- 3.6 In 2016/17 only **43.5%** (12,726 attendances) could be identified as Lewisham residents registered with a Lewisham GP.
- 3.7 **28.6% (8,367)** of all attendances in 2016/17 could not be attributed to any Clinical Commissioning Group either GP details are unknown or the patient was not registered with a GP.
- 3.8 We have estimated that only **2,300** patients who attended the Walk-in Centre, where either the GP details were unknown or the patient was not registered with a GP were **Lewisham residents**.
- 3.9 The CCG adopted the Walk-in Centre contract from NHS England and the contract was further extended in 2015 for 24 months. The CCG will not be able to extend the contract again.
- 3.10 If the CCG were to continue to provide a walk-in facility, it would need to procure a new and different service. However, walk-in centres are not considered the best way to provide proactive, co-ordinated and accessible care for the people of Lewisham.
- 3.11 Lewisham CCG has the last remaining Walk-in Centre service in south London. Neighbouring Clinical Commissioning Groups in Southwark, Lambeth and Greenwich have all closed their Walk-in Centres and replaced them with GP Extended Access Hubs.

3.12 GP Extended Access

3.13 In delivering on the Lewisham Primary Care Strategy¹ – Developing GP Services, to develop innovative ways to improve access to urgent and unplanned care within primary care; the CCG set out its model care for integrated urgent and primary care.

3.14 To deliver the integrated urgent and primary care model the CCG commissioned a GP Extended Access service, which commenced on 1st April 2017.

3.15 This is in line with the General Practice Forward View², NHS England and Our Healthier South East London Sustainability Transformation Plan, which have agreed to;

- Extend access to General Practice services so that these can be accessed between 8am – 8pm, seven days per week across London;
- Make broader improvements to access general practice, such as better use of technology, better patient choice;

3.16 The service allows patients to access a primary care health professional 12 hours per day from 8am – 8pm for pre-bookable and urgent primary care appointments seven days a week (including Bank Holidays) at the University Hospital Lewisham site.

3.17 Appointments are bookable up to 7 days in advance.

3.18 The service aims to;

- Ensure improved and consistent access to high quality primary care services from 8am – 8pm, seven days per week.
- Support patients to find the right service at the right time, through integration of access routes to urgent and core primary care services, with consistent redirection at all points from GP practices, A&E and any other urgent access points to NHS services.

3.19 Access to the service is currently by patients contacting the GP surgery where they are registered. The service is not intended to be a walk-in service, where patients arrive and queue – appointments are booked through the patients' registered practice if the practice does not have appointments available that are convenient for the patient.

3.20 Patients can also access the service when they contact the Integrated Urgent Care (formerly NHS 111) service. In addition, it is planned nationally for patients to be able to book an appointment on-line up to two weeks in advance to see either a GP or Nurse.

3.21 From December 2017 when patients attend the Urgent Care Centre at University Hospital Lewisham, they will be redirected to the GP Extended Access after an assessment by a clinician.

3.22 The service provides **25,426** bookable appointments per year with GP face-to-face consultations, GP video consultations and nurse appointments. In 2018, this will increase to **29,914** bookable appointments.

¹ Lewisham CCG – Primary Care Strategy: Developing GP Services 2016-2021 – 26/10/16

² <https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf>

- 3.23 Unlike, the Walk-in Centre the GP Extended Access team delivering the service are able to access, review and update medical records for patients using the service.
- 3.24 Not all of the appointments in the GP Extended Access service are being taken up and the service has the capacity to see patients who are currently using the Walk-in Centre – in addition to providing identical opening times.
- 3.25 The service is located at the University Hospital Lewisham on Lewisham High Street. Lewisham Hospital provides acute and community health services and is a key part of the fabric of Lewisham’s health economy. The high street is centrally located within the borough of Lewisham and ideally close to local amenities. The hospital is easily accessible with good public transport links and well served by several bus and cycle routes. There are pay and display parking zones on the hospital grounds including bays for drop-off, pick-up, waiting and disabled parking. There are also pay and display parking spaces on nearby streets surrounding the hospital.
- 3.26 In January 2017, the CCG commissioned Healthwatch³ Lewisham to seek the views of *seldom heard* groups in Lewisham to support the development of the Primary Care Extended Access service organised around the needs of patients and populations.
- 3.27 The CCG wanted to seek direct views and experiences from the following groups;
- Black African and Caribbean backgrounds (who are disproportionately high users of urgent and emergency care)
 - People with a learning disability
 - People with a physical or sensory disability
 - Peoples with mental health issues
 - People living in areas of deprivation
- 3.28 Healthwatch spoke to 71 participants over a period of 5 weeks from the following groups and organisations, reflective of the seldom heard groups identified by the CCG;
- South East London Vision (Sensory Impairment)
 - Africa Advocacy Foundation (Black and Minority Ethnic)
 - Family Health Isis (Mental Health)
 - Stroke Association Group (Areas of deprivation)
 - Lewisham Nexus Services (Learning disabilities)
- 3.29 There were a number of common themes from across all participants and key views for the service are summarised below;
- *People wanted the centre to be in an accessible and central location within the borough, with good public transport links and available car parking, at a reasonable price;*
 - *It was felt that quicker access routes to routine appointments (via the centre) would help ease patient anxiety and encourage a good relationship between the service user and provider;*

³ <http://www.lewishamccg.nhs.uk/about-us/how-we-work/Meeting%20papers/Primary%20Care%20Commissioning%20Committee%2015th%20August%202017.pdf>

- *The importance of understanding and reading a patient's medical history was of paramount importance to patients, in order to prevent misunderstanding when patients had complex medical conditions;*
- *For some, the sharing of medical records was a concern, with patients stressing the importance of informing the public that this would happen if they accessed care at the centre;*
- *A wider understanding of provision within the borough and extra facilities to support patients, would be useful for GPs practices at the centre;*
- *Booking methods for the extended access service should be clearly communicated to the public, with booking by telephone remaining the most popular method;*
- *Doctors with specialisms and in depth knowledge of long term conditions (e.g. HIV, learning disabilities) should be available to the extended access centre;*
- *The infrastructure and non-clinical staff at any new centre should be trained in supporting vulnerable patients and those who may have difficulties access or navigating a new service.*
- *Patients with long term conditions and those with physical or learning would like to be offered longer appointments to accommodate for their additional needs*
- *Communication around the new extended access service should be available in multiple formats, that are easy to read and accessible;*
- *Community groups and leaders should be involved in the promotion and awareness raising of the service.*

3.30 The Healthwatch recommendations have been incorporated into the development of the GP Extended Access Service.

4. Population

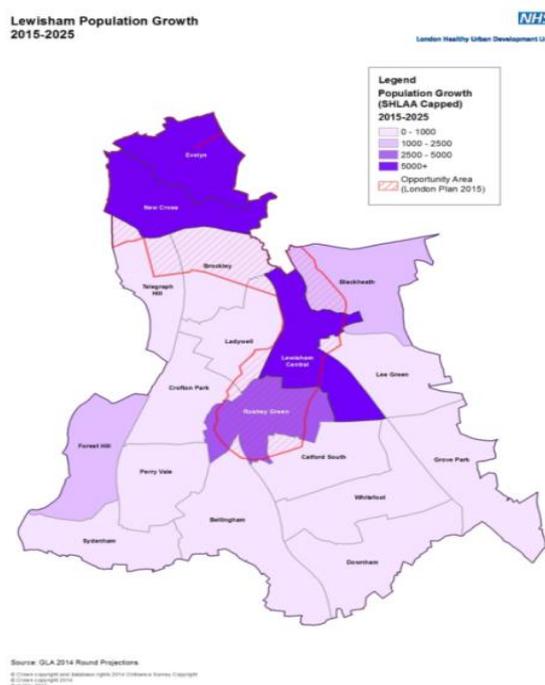
4.1 The population density in New Cross and Lewisham Central is expected to increase by a third. In 2015, the resident population of Lewisham stood at 294,096. According to the 2014 Round of GLA population projections, the population of the borough has increased to 294,096 in 2015 and will increase further by 31,100 between 2015 and 2025, or 10.6% the next ten years. By ranking population growth between 2015 and 2025 across London boroughs, Lewisham is considered to be a 'medium growth' borough (ranked 11th out of 33 boroughs).

Figure 1: Lewisham Population Growth

4.2 Lewisham has a higher population density than London as a whole (at 8,365 persons per sq km), but lower than Inner London. Over a fifth of the borough is parkland or open space.

4.3 Population growth in Lewisham is uneven and concentrated in different parts of the borough. This presents different challenges for service and estates planning. High population growth is concentrated in the north and centre of the borough where there has been greater investment in health infrastructure than in the South has benefited less. Waldron Health Centre is located in New Cross Ward.

4.4 The distribution of deprivation across Lewisham is uneven, with every ward having LSOAs (Lower Super Output Area) in at least 4 Lewisham deciles of deprivation, there is less variation in Lewisham than in many other places. Of the 166 LSOAs in the borough, 38% are in the most deprived fifth of England, 86% in the most deprived two fifths, and only 1% in the least deprived two fifths.



5. New Cross⁴

5.1 New Cross ward includes areas of New Cross, New Cross Gate and Deptford. In the 2011 census the population of New Cross was 15,756 and is made up of approximately 50% females and 50% males. The average age of people in New Cross is 32, while the median age is lower at 30. 51.3% of people living in New Cross were born in England. Other top answers for country of birth were 7.2% Nigeria and 3.9% Jamaica.

5.2 74.6% of people living in New Cross speak English. The other top languages spoken are 2.3% French, 1.9% Spanish, 1.8% All other Chinese, 1.7% Polish, 1.5% Portuguese, 1.4% Vietnamese, 1.0% Somali, 0.9% Italian and 0.8% Cantonese Chinese.

5.3 The religious make up of New Cross is 51.0% Christian, 24.3% No religion, 9.7% Muslim, 3.0% Buddhist, 1.4% Hindu, 0.3% Jewish, 0.2% Sikh, 0.1% Atheist. 1,421 people did not state a religion. 60 people identified as a Jedi Knight.

5.4 23.6% of people are married, 10.2% cohabit with a member of the opposite sex, 2.3% live with a partner of the same sex, 46.1% are single and have never married or been in a registered same sex partnership, 11.6% are separated or divorced. There are 848 widowed people living in New Cross.

5.5 The top occupations listed by people in New Cross are Professional 17.0%, Elementary 16.4%, Elementary administration and service 15.7%, Associate

⁴ <https://new-cross.localstats.co.uk>

professional and technical 13.8%, Administrative and secretarial 11.5%, Caring, leisure and other service 11.0%, Sales and customer service 9.5%, Skilled trades 8.8%, Administrative 8.7%, Managers, directors and senior officials 7.9%.

6. Who uses the Walk-in Centre service

6.1 *Overview:* A clinical review of the presenting conditions of those patients attending the Walk-in Centre found that the majority were for wide range of acute minor medical problems, which would normally be dealt with by self-care, a pharmacist or consulting a GP or Nurse.

6.2 Of the clinically reviewed sample, the majority of patients attended for wound care (dressings etc.), limb pain, sore throats, coughs and rashes. This is in keeping with Monitor Review⁵ of Walk-in Centres of across the country where commonly people were treated for coughs, colds, flu like symptoms, skin conditions or infections.

6.3 *Ethnicity:* Users of the service who identified their ethnicity as White British or White Other (43.5% of attendances) were the largest users of the service in 2016/17. Those who identified their ethnicity as Black, Black British, African or Caribbean (37.7% of attendances) were the second highest users of the Walk-in Centre. This is in contrast to 3 years ago where those who identified their ethnicity as Black, Black British, African or Caribbean were the main users of the service.

Figure 2: Walk-in Centre Activity 2016/17 by Ethnicity

Ethnicity	Percentage
White British	26.2%
Not Recorded	15.9%
White other	15.3%
Black or Black British African	11.2%
Black or Black British Caribbean	8.7%
Declined	3.4%
Other Asian	3.4%
Other Black background	3.1%
Other ethnic groups	2.6%
Chinese	2.0%
Mixed White and Black Caribbean	1.9%
White Irish	1.4%
Mixed White and Black African	1.4%
Mixed other	1.1%
Asian or Asian British Indian	0.9%
Asian or Asian British Bangladeshi	0.6%
Asian or Asian British Pakistani	0.6%
Mixed White and Asian	0.3%

6.4 *Sex:* In 2016/17 56.4% of all attendances to the Walk-in Centre were female and 43.5% were male and this is consistent with the Monitor Review of Walk-in Centres.

⁵ Monitor: Walk-In-Centre Review: Final Report and Recommendations

- 6.5 Age: The Walk-in Centre is mostly used by people between the ages of 25 – 49 years followed by those between the ages of 16 – 24 years. This is reflective of the Monitor Review of Walk-in Centres, which found that younger people are the predominant users, with people between the ages of 16 – 45 years attending at higher rates than other age groups.
- 6.6 The majority of children under 5 years of age attending the Walk-in Centre were predominantly from the 4 GP practices located in the Waldron Centre, which took place in hours; Monday to Friday 08:00 – 18:30.
- 6.7 Hours: The overwhelming majority (64%) of all attendances at the Walk-in Centre took place in hours when GP practices are open, with 17% on Saturdays and 13% on Sundays and the remainder (6%) during the evenings.
- 6.8 The majority of Lewisham registered patients using the Centre are registered with GP practices located in the north of the borough.
- 6.9 In 2016/17 of those Lewisham patients using the Walk-in Centre and registered with a GP, **28.5%** attendances were already registered with one of the four GP Practices; Clifton Rise Family Practice, Amersham Vale Training Practice, Dr Batra's Practice or the New Cross GP Led service, all located in the Waldron Health Centre.
- 6.10 The highest users of the Walk-in Centre are patients already registered with the New Cross GP Led Service, which is co-located with the Walk-in Centre.
- 6.11 GP Extended Access is the alternative service for residents in Lewisham when the Walk-in Centre contract expires on 31st December 2017. For those registered with a Lewisham GP – access to the service will be as per 3.12 and 3.13.
- 6.12 For those patients registered with a GP in London, they will have access to the GP Extended Access Services/Hubs provided in those boroughs. These were introduced as a part of the national GP Forward View⁶ initiative in April 2017 across London to improve access to General Practice.
- 6.13 It is recognised that the GP Extended Access service is not the same service as the Walk-in Centre because it provides access to patients' medical records and the service is bookable. Access to this service requires patients to be registered with a GP in Lewisham.
- 6.14 Therefore, unregistered patients will not be able to access the service unless they register with a GP practice in Lewisham.
- 6.15 However, there is sufficient GP practices of good quality and capacity of **25,300** (See Figure 3) located within less than one mile of the Walk-in Centre (both in Lewisham and neighbouring boroughs), which could support increased registration of an estimated additional **2,300** patients currently attending the Centre.

⁶ <https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf>

Figure 3: GP practice capacity for new registrations located near the Waldron

Practice Name	Code	Contract	Distance from Waldron (miles)	Raw List	Additional new patients that practice able to register
Dr. Jeyanathan and Partners	G85026	PMS	0	4,477	2,000
Amersham Vale Practice	G85698	PMS	0	9,013	2,000
Dr BK Batra's Practice	G85717	PMS	0	6,025	3,000
Mornington Surgery	G85008	PMS	0.1	4,152	3,000
Deptford Surgery	G85711	PMS	0.2	4,734	1,500
Dr Mog Sarder's Practice	G85736	GMS	0.2	3,007	300
New Cross Health Centre	G85076	PMS	0.3	5,826	5,000
Kingfisher Medical Centre	G85020	GMS	0.4	4,981	1,000
Dr R Berman's Practice	G85105	PMS	0.7	5,888	1,500
St Johns Medical Centre	G85038	PMS	0.7	14,485	3,000
Plumbridge Medical Centre	G83641	GMS	0.8	2,426	3,000
*Total capacity within 1 mile of the Walk-in Centre					25,300

- 6.16 The activity data on the Walk-in Centre use for 2016/17 indicates that there are approximately **28.6%** attendances (8,367), where the GP is unknown or the patient is not registered with a GP.
- 6.17 Consequently, there are a number of assumptions that can be made; (i) those who have attended have chosen not to disclose this information; (ii) those attending were not asked to provide this information; or (iii) they are genuinely not registered with a GP anywhere.
- 6.18 However, even if no GP details were provided for one of the 3 reasons listed in 6.17; the expectation is that the provider of the Walk-in Centre should as a minimum have obtained the patients address.
- 6.19 In order to provide a reasonable estimate of the actual number of potential patients (and not attendances) that might not be registered with a GP and live in Lewisham; the first part of the patients' postcode and multiple attendances were considered in reviewing activity data for the Walk-in Centre.
- 6.20 A partial postcode was used in order to ensure patient confidentiality. However, as a consequence this has meant that where partial postcodes are shared with Lewisham and at least one of the five neighbouring south east London boroughs have been included in the count. Therefore, the quantum number of unknown GP/unregistered with a GP patients will be inflated.
- 6.21 The review demonstrated that for those where either the GP details were unknown or the patient was not registered with a GP (as per 6.16); **70% of those patients did not have a Lewisham postcode and therefore do not live in the borough.**
- 6.22 The remaining **30% (estimated 2,300 patients over a 12 month period)** where either the GP details were unknown or the patient was not registered with a GP – either live in Lewisham and have a partial postcode that is exclusive to the London Borough of Lewisham e.g. SE4, SE6 and SE14; or they have a partial

postcode, which is shared with Lewisham and at least one of the five neighbouring south east London boroughs (Lambeth, Southwark, Bromley, Bexley and Greenwich) and Croydon e.g. SE3, SE8, SE9, SE10, SE12, SE13, SE19 and SE26.

6.23 Therefore, 2,300 is the quantum estimated number of patients who potentially might need to be registered with a GP.

6.24 It is also recognised that a proportion of those where the GP is unknown or the patient is not registered with a GP could be homeless.

6.25 Homelessness acceptances in Lewisham are higher than the London average at 5.9 per 1,000 people compared to 5, but have risen much less than average since 2009.

6.26 The review demonstrated that there were an estimated 188 patients in a 12 month period where either the GP details were either unknown or the patient was not registered with a GP and no postcode was provided.

6.27 The patients could either be homeless or this could be down to poor data collection or the patient declined to provide this information. However, the 188 patients could provide a maximum proxy for Homeless users of the Walk-in Centre.

6.28 The local authority (Lewisham Council) commissions 80 beds in the New Cross Ward for the homeless, which equates to a conservative estimate of **327** individuals (total client impact) per year including *Rough Sleepers and Street* activity; recognising that these will be some of the most vulnerable people with regard to physical health, mental health and substance misuse.

6.29 The Care Quality Commission expects GP practices to register people who are homeless, people with no fixed abode, or those legitimately unable to provide documentation living within their catchment area who wish to register with them. Homeless patients are entitled to register with a GP using a temporary address which may be a friend's address or a day centre. The practice may also use the practice address to register them.

6.30 It is recognised that Goldsmiths College is located close by and their students are directed to the Walk-in Centre; it is therefore possible to assume that a large proportion will be students. This is supported by the Monitor Review, where high numbers of students are users, who tend not to be registered in with a GP in the area in which they are attending University.

6.31 The NHS Choices advice to students is;

If, like most students, you spend more weeks of the year at your college address than your family's address, you need to register with a GP near your college as soon as possible.

7. Summary

7.1 In assessing the potential impact of the closure of the NHS Walk-in Centre, New Cross (as a result of the contract expiring) against improving access to primary care via the alternative GP Extended Access service on individual patients and relatives/carers who share one of more of the nine protected characteristics – the key areas where there could be a negative impact and mitigation is required;

- (i) People who reside in the borough and *are not registered with a Lewisham GP* and therefore would be unable to access the alternative GP Extended Access service.
- (ii) People who live in another borough and *are registered with a GP practice in another borough or elsewhere in the country* and therefore are unable to access the alternative GP Extended Access service in Lewisham.

For Lewisham CCG the priority will be our population and mitigation for those who live in the borough and are not registered with a GP.

7.3 Equality Analysis checklists

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
DISABILITY	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 • Neighbourhood Profiles and Picture of Lewisham (JSNA, London Borough of Lewisham) 	<ul style="list-style-type: none"> • CCG Walk-in Centre User survey in January and February 2017 • CCG Commissioned Healthwatch SELDOM Heard Report on GP Extended Access • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected. • There is no data available on the numbers of service users who identify themselves as having a disability. 	<ul style="list-style-type: none"> • The GP Extended Access service is located at the University Hospital Lewisham site, which will be compliant with all required regulations on accessibility. • In addition, the new purpose built suite will be Disability & Discrimination Act compliant. • The University Hospital Lewisham site is accessible and has good transport links. 	October 2017
GENDER REASSIGNMENT	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 	<ul style="list-style-type: none"> • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected. • There is no data available on the numbers of services users who identify themselves as being with these protected characteristics. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. • The service has access to the patient's records and therefore, this would support continuity of care for these users and ensuring that they only had to tell their story once. 	Not applicable.

7.4 Equality Analysis checklists

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Timeframe
MARRIAGE & CIVIL PARTNERSHIP	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 • Neighbourhood Profiles and Picture of Lewisham (JSNA, London Borough of Lewisham) 	<ul style="list-style-type: none"> • CCG Walk-in Centre User survey in January and February 2017 • CCG Commissioned Healthwatch SELDOM Heard Report on GP Extended Access • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected. • There is no data available on the numbers of services users who identify themselves as being with these protected characteristics. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. • The service has access to the patients' records and therefore, this would support continuity of care for these users and ensuring that they only had to tell their story once. 	Not applicable.
PREGNANCY AND MATERNITY	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 	<ul style="list-style-type: none"> • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected. • There is no data available on the numbers of services users who identify themselves as being with these protected characteristics. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. • The service has access to the patients' records and therefore, this would support continuity of care for these users and ensuring that they only had to tell their story once. 	Not applicable.

7.5 Equality Analysis checklists

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
RELIGION OR BELIEF	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 • Neighbourhood Profiles and Picture of Lewisham (JSNA, London Borough of Lewisham) • 2011 Census (ONS) • Walk-in Centre Review 2014 (Monitor) 	<ul style="list-style-type: none"> • CCG Walk-in Centre User survey in January and February 2017 • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected. • There is no data available on the numbers of services users who identify themselves as being with these protected characteristics. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. 	Not applicable.
SEX	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 • Neighbourhood Profiles and Picture of Lewisham (JSNA, London Borough 	<ul style="list-style-type: none"> • CCG Walk-in Centre User survey in January and February 2017 • CCG formal public and stakeholder consultation launched on 8th August to 30th 	<ul style="list-style-type: none"> • No disproportionate effect is expected based on Sex or Sexual Orientation of the Walk-in Centre closing and patients accessing the alternative GP Extended Access Service. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. • The service has access to the patients' records and therefore, this would support continuity of care for these users and ensuring that they only had to tell their story once. 	Not applicable.

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
	of Lewisham) <ul style="list-style-type: none"> • 2011 Census (ONS) • Walk-in Centre Review 2014 (Monitor) 	October 2017			
SEXUAL ORIENTATION	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 • Neighbourhood Profiles and Picture of Lewisham (JSNA, London Borough of Lewisham) • 2011 Census (ONS) • Walk-in Centre Review 2014 (Monitor) 	<ul style="list-style-type: none"> • CCG Walk-in Centre User survey in January and February 2017 • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • No disproportionate effect is expected based on Sexual Orientation due to the Walk-in Centre closing and patients accessing the alternative GP Extended Access Service. 	<ul style="list-style-type: none"> • The GP Extended Access service is available to all patients registered with a Lewisham GP. • The service has access to the patients' records and therefore, this would support continuity of care for these users and ensuring that they only had to tell their story once. 	Not applicable.
CARERS	<ul style="list-style-type: none"> • Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 	<ul style="list-style-type: none"> • CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> • There is no utilisation data available on the numbers of services users who identify themselves as being with these protected characteristics. 	<ul style="list-style-type: none"> • From October 2017 to January 2018 the CCG will provide dedicated Patient Advice & Liaison (PALS) Support in the Waldron Health Centre to help people register with a local GP practice of their choice and provide information on the GP 	November 2017

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
			<ul style="list-style-type: none"> As a part of the formal consultation concern was raised about how carers book appointments for those in supported housing. 	<p>Extended Access service.</p>	
<p>OTHERS E.G. Students/ Homeless</p>	<ul style="list-style-type: none"> Analysis of the utilisation and activity data submitted by the provider of the service in 2016/17 and 2017/18 Lewisham Borough Council (Single Homeless Unit); 	<ul style="list-style-type: none"> CCG formal public and stakeholder consultation launched on 8th August to 30th October 2017 	<ul style="list-style-type: none"> The GP Extended Access Service is only accessible to those registered with a GP in Lewisham, therefore Homeless people in New Cross. Estimated of 327 homeless people in a year. Similarly, students from nearby Goldsmiths College not registered with a Lewisham GP will be impacted. 	<ul style="list-style-type: none"> The CCG commissions two local GP practices (Honor Oak and Rushey Green) to deliver enhanced support the four hostels for homeless people. The CCG will review these two services. The CCG will meet with the providers of services and supports to consider improved messaging on registration. Getting registered with a GP support to Goldsmiths College. 	<p>November 2017</p> <p>October 2017</p> <p>September 2017</p>

Section 8: Action Plan

For any negative outcomes identified in Section 2, it is important to identify the steps you will take to mitigate consequences on the nine protected characteristics. Complete the Action Plan below to identify and record how you will address these.

Equality Group	Negative Outcome	Mitigating Action (Identify any resource/other implications)	Timeframe
ALL	<p>Users of the Walk-in Centre who are not registered with a GP practice in Lewisham will not be able to access the alternative GP Extended Access Service when the Walk-in Centre closes at the end of the year.</p> <p>There are on average an estimated 2,300 patients who use the Centre with a Lewisham postcode or a partial postcode, which is shared with at least one of the five neighbouring SEL Boroughs and Croydon, who are not registered with a GP.</p>	<p>1. The CCG will commission from October 2017 to January 2018 dedicated Patient Advice & Liaison (PALS) Support, located in the Waldron Health Centre to help people who live in the borough register with a local GP practice of their choice and provide information on the GP Extended Access service.</p>	October 2017 – January 2018
	<p>Homeless users of the Walk-in Centre service who are not registered with a GP practice will not be able to access the alternative GP Extended Access Service when the Walk-in</p>	<p>2. The CCG commissions two local GP practices (Honor Oak and Rushey Green) to deliver enhanced support to the four hostels for homeless people. The CCG will review these two services.</p> <p>3. Commissioners will meet with the providers of services and support to the Homeless</p>	<p>November 2017</p> <p>October 2017</p>

<p>Centre closes at the end of the year.</p>	<p>population to consider improved messaging and support on GP registration. The CCG will be running a Homeless Summit jointly with Lewisham Borough Council in October as a direct result of this process, which will include representatives from the 3 homeless charities supporting New Cross, the Healthy London Partnership, Lewisham & Greenwich Trust, Pathway (Healthcare for the Homeless) and SLAM.</p> <p>4. The CCG will implement an engagement and training programme for all GP practices on supporting Homeless patients in the borough using the Healthy London Partnership resource pack and on-line training tool published in August 2017. Resource pack https://www.myhealth.london.nhs.uk/healthy-london/latest/publications/homelessness-health-resource-pack Supporting GP receptionists to help people who are homeless https://www.myhealth.london.nhs.uk/healthy-london/latest/news/supporting-gp-receptionists-help-people-who-are-homeless</p>	<p>November 2017 – January 2018</p>
<p>Students who are users of the service and are not registered with a GP in Lewisham or any GP will not be able to access the alternative GP Extended Access Service when the Walk-in Centre closes at</p>	<p>5. The CCG will attend <i>Fresher’s Week</i> at Goldsmiths College to promote GP Registration to students.</p> <p>6. The CCG will develop periodic communication messages in line with new student intakes throughout the year on getting registered with a GP.</p> <p>7. Goldsmiths College have commissioned the</p>	<p>September 2017</p> <p>November 2017</p> <p>Not applicable.</p>

<p>the end of the year.</p>	<p>Amersham Vale Training Practice to provide GP services to their student population.</p>	
<p>Patients from the 3 GP practices, which are amongst the highest Lewisham users of the Walk-in Centre, located in the Waldron Health Centre could attend the A&E instead when the service closes.</p>	<p>8. The CCG will work with the Amersham Vale Training Practice, Dr Batra and Clifton Rise Family Practice to provide additional support – particularly for those who attend with children under 5 years old in hours.</p> <p>9. The CCG will develop communication programme on accessing urgent primary care (in-hours and out of hours) and self-management for patients; phase 1 will be to the GP practices with patients that are the highest users.</p> <p>10. In order to deliver the national requirement of Clinical Redirection and Streaming at all Urgent Care Centres; this additional service, which consists of a GP seeing and treating patients in the Urgent Care Centre, will be fully compliant at the University Hospital Lewisham from December 2017. Lewisham CCG has been running a Primary Care Assessment Pilot, with a GP in the Urgent Care Centre at the University Hospital Lewisham since October 2016.</p> <p>11. The CCG will work with the local pharmacists on supporting self-care for patients.</p>	<p>October – November 2017</p> <p>November 2017 – January 2018</p> <p>November 2017</p> <p>November 2017</p>
<p>Users of the Walk-in Centre who attended for wound dressings will attend A&E instead when the service closes</p>	<p>12. Each year Lewisham CCG invests an ‘additional premium payment’ of £3.4m to GP practices providing core services to patients. For 2018/19, the CCG agreed in May 2017 with the Local Lewisham Medical</p>	<p>January 2018</p>

	<p>because GP practices in Lewisham are currently not paid to provide this additional service.</p>	<p>Committee and the London-wide Medical Committee (which represents GPs) to include payment for wound dressings (post-operative wound care and suture removal) as GPs were not previously paid to provide this service.</p> <p>The CCG launched the premium to all GP practices on 27th June 2017. All GP practices in Lewisham received their premium offer on 29th September 2017, which will take effect from 1st January 2018. Therefore, patients in Lewisham requiring wound dressings care will be able to access this service from their local GP practices.</p>	
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Policy, Function or Service Development Details and Authorisation	
Name of Organisation:	NHS Lewisham Clinical Commissioning Committee
Name of the policy, function or service development being assessed:	The future of the New Cross Walk-in Centre and improving provision and access to primary care
Is this a new/existing/revised policy, function or service development?	Existing
Briefly describe its aims and objectives	The Walk-in Centre opened in March 2010. The Centre is for patients who are unable to get an urgent appointment with their GP and who have a minor injury or medical condition that is not life-threatening but needs to be seen. This is a walk-in service and is available from 8am to 8pm, 7 days a week, including public holidays.
Analysis Start Date:	04.08.2017
Lead Author of Equality Analysis:	Director of Commissioning & Primary Care
Date of approval: 14.09.2017	CCG Equalities & Diversity Group
Have any financial or resource implications been identified?	YES
Date of Governing Body Meeting where the Equality Assessment was ratified:	In line with the approval received from the CCG Governing Body on 13 th July 2017 to commence Public Consultation on the future of the New Cross Walk-in Centre and improving provision and access to primary care; the Equality Impact Assessment will be refreshed at the end of the consultation and submitted to the Governing Body in November 2017.