



# West Hull Urgent Treatment Centre. Proposed move of Story Street walk-in service to Hull Royal Infirmary site.

November 2023

## Contents

### Introduction

- Background
- Why is this change necessary?
- Business needs
- The case for change
- Benefits

### Methodology

### Survey results

### Engagement reach

### Conclusions

### Recommendations and next steps

### Appendix

## Introduction

NHS Humber and North Yorkshire Integrated Care Board (ICB) is a statutory organisation accountable for NHS spend and performance for 1.7million people.

The ICB is a core member of the [Humber and North Yorkshire Health and Care Partnership](#), alongside NHS providers, local councils, health and care providers and voluntary, community and social enterprise (VCSE) organisations.

## Background

Humber and North Yorkshire Integrated Care Board, in collaboration with City Health Care Partnership CIC and Hull University Teaching Hospitals NHS Trust, has developed plans for an urgent treatment centre to be located close to the emergency department at Hull Royal Infirmary. The new service will meet the requirements of the national specification and be fully designated by 31 March 2024.

The urgent treatment centre will be delivered in two phases:

Phase 1: Relocation of the current minor illness and injury pathway and staff at Story Street Walk-in from Wilberforce Health Centre to the Hull Royal Infirmary site, by November 2023.

\*Note\* Due to building works not being able to be completed to the initial timeline a new date for the service to move was established for January 2024.

Phase 2: Additional minor injuries and diagnostic pathways will be implemented to provide a fully designated urgent treatment centre at the hospital site, from April 2024.

This is one of only four schemes in the North-East and Yorkshire area to receive investment from the £250m fund set aside nationally to increase capacity.

The plans align with the Humber and North Yorkshire ICB Urgent and Emergency Care priority to deliver enhanced, effective, and accessible urgent treatment to support the recovery of services and manage demand this winter.

## Why is this change necessary?

The plans to move Story Street Walk-in provides an opportunity to integrate local NHS urgent care services for residents, and visitors, in Hull and the East Riding in time for winter - putting these services where the demand is and making it simpler for patients to access them.

A significant number of people attend the emergency department with an illness or minor injury who could be treated at an urgent treatment centre. An audit undertaken in the Emergency Department in winter 2021-22 identified that 45-60 people in the emergency department each day could be seen more appropriately elsewhere.

The location of urgent treatment centres and hospital emergency departments on a single site is a well-established and recognised way of providing emergency and urgent care across the country, with patients being able to access the services through a single triage point.

Integrating the emergency department and urgent treatment centre on a single site will ease pressure on the emergency department, reducing overcrowding and patient waiting times.

The new urgent treatment centre will have a larger clinical space for patients to be seen with better access to x-ray and other diagnostic services not currently available for patients at Story Street. The new urgent treatment centre within the Hull Royal Infirmary site will keep the current operating hours of 8 am to 8 pm, seven days a week.

## **Business Needs**

The development of urgent care services has continued across Hull and East Riding. Current provision includes Urgent Treatment Centres (UTC), GP Out of Hours (GPOOH), GP Walk-in service and more recently 2-hour Urgent Community Response (2-UCR).

In Hull the main UTC is based in the north of the city and is well utilised, however there is a gap in UTC provision in the east, west and central areas. The GP-walk in centre based at Wilberforce Health Centre in Hull does provide urgent primary care provision, but predominately minor illness presentations and not the full range of services and diagnostics that is available at a UTC.

The lack of provision in the West Hull area has resulted in a higher footfall of Type 3 attendances (minor injuries and illnesses) to the Hull Royal Infirmary Emergency Department, with patients choosing to attend here rather than travel to Story Street or other UTCs (estimated at 45-60 adult and children per day, based on an urgent care audit undertaken in the ED in winter 2021-22).

Urgent and Emergency Care (UEC) Services at Hull remain challenged. Hull Royal Infirmary is a Specialist Hospital with a Major Trauma Centre (MTC). In addition to its role as a Major Trauma Centre, Hull provides highly specialised (tertiary services) for neurosurgery, vascular, specialist cardiology and cancer services. Most of these services are provided from Hull Royal Infirmary, but emergency care is also provided from Castle Hill Hospital, Cottingham, for cardiology, cardio-thoracic and urology acute and specialist service.

The Emergency Department at Hull Royal Infirmary does not currently meet the 4 hour waiting time standards and it was noted in the Care Quality Commission's Urgent and Emergency Care inspection report (March 2023) that "people could not always access the service when they needed it and did not always receive the right care promptly". It was noted performance against the 4-hour waiting time standard had deteriorated due to overcrowding in the ED and that delays to patient flow were impacting on ambulance turnaround times and patient safety.

A revised programme of work has been developed across Hull and East Riding, to address the current challenges across the system. An options appraisal has been completed to address the current challenges. The outcome of the appraisal was that an Urgent Treatment Centre should be implemented, co-located with the Emergency Department at Hull Royal Infirmary.

## The case for change:

- The co-location of urgent and emergency care on a single site is a well-established and recognised model across the country.
- The plans present an opportunity to integrate local NHS urgent care services for residents and visitors in Hull and the East Riding - putting these services where the demand is and making it simpler for patients to access them.
- The Story Street walk-in at Wilberforce Health Centre does not provide the full range of services and diagnostics available at an urgent treatment centre.
- We see a significant number of minor illness and injury attendances at the Emergency Department (ED). An audit undertaken in the Emergency Department in winter 2021-22 identified that 45-60 people in the emergency department each day could be seen more appropriately elsewhere.
- The expectation is that integrating the emergency department and urgent treatment centre on a single site will ease pressure on the emergency department by reducing overcrowding, inappropriate attendances and patient waiting times.
- The new location, within a building on the Hull Royal Infirmary site close to the ED, will have an enhanced, larger clinical space for patients to be seen.
- It is important to stress that there will be no reduction in primary care provision under the proposed plans. GP practices at Wilberforce Health Centre will not be affected by the relocation of the walk-in service.
- There will be no reduction in staff as the current workforce at the Walk-in will transfer to the new service, and no reduction in the current operating hours of 8 am to 8 pm, seven days a week. Likewise, there will be no reduction in staff within the Emergency Department.

## Benefits:

The following benefits have been identified.

- Provide a different offer for patients at the ED front door and improves patient experience.
- Reduces the risk of harm from overcrowding and long waits, in the ED.
- Patients who do need to be in an emergency department are seen more quickly: with the ambition to improve to 76% of patients being admitted, transferred, or discharged within four hours by March 2024, with further improvement in 2024/25.
- Maximise the use of specialist expertise from all organisations appropriate to the patients need.
- Provide an opportunity for patients to be triaged/assessed once at the start of their journey and put on the right care pathway for their need.
- Aim to support the reduction in ambulance handover times, with improved ambulance response times for Category 2 incidents to 30 minutes on average over 2023/24, with further improvement in 2024/25 towards pre-pandemic levels.
- Provide economies of scale and efficiencies by consolidating services at Hull Royal Infirmary site.
- Provide opportunities for work-force collaboration and development across the urgent and emergency care system.
- Support the Hull and East Riding response to system escalation and response.



## Methodology

The views of people who currently use Story Street Walk-in, local urgent treatment centres and the Emergency Department in Hull are important, and engagement with the public via an online survey commenced on 22 August 2023 and concluded on 13<sup>th</sup> October 2023.

### Public survey:

The launch of the survey was boosted by media coverage, posters in Story Street, Emergency Department and GP practices, and social media postcode boosting as well as through our community networks.

An example of the social media post is below:

Plans are being developed for a new urgent treatment centre for minor illness and injury in time for Winter 2023.

This would involve the current Story Street Walk-in service moving to a new location close to the Emergency Department at Hull Royal Infirmary. We want to hear any views you might have with the relocation of the Story Street Walk-in to Hull Royal Infirmary from 8 January 2024.



For more information visit: <https://humberandnorthyorkshire.org.uk/.../get-involved/...>

👉 Complete our survey today: <https://www.smartsurvey.co.uk/s/DEHOMN/>

Our equalities impact assessment identified groups who may potentially be negatively impacted if the Story Street walk-in minor injury and illness service is relocated to the Hull Royal Infirmary site approximately one mile away. These include:

- people living in the city centre near the walk-in centre.
- people who share protected characteristics from the most impacted groups or from health inclusion groups.
- people who link in with support agencies (including addictions and homeless support)

Targeted engagement was undertaken with these groups to allow us to understand any key barriers or difficulties they may experience with the move, to allow us to mitigate for these barriers.

The Humber and North Yorkshire ICB engagement team visited several places to conduct face to face engagement and invite people to complete the survey. These included:

Humber All Nations Alliance breakfast morning

Emmaus Hull and East Riding

Oasis Church

The Peel Street Project community health fair

Hull University fresher fair

Additional areas of focus for the public survey were:

- people in other areas that may be impacted, including areas east of the city in Holderness, and west of the city in North Ferriby, Hessle, and Brough.
- voluntary groups through our community networks in Hull and East Riding
- local MPs and councillors

The public survey was sent to our partners and stakeholders and asking them to share the survey with their staff, volunteers, service users and via their social media and newsletters.

### Story Street Walk-in users survey:

A second survey was available for those who attended Story Street between 22nd August and concluded on 13<sup>th</sup> October 2023. Paper copies of the survey were available in the waiting room at Story Street and service users were encouraged to take part by the receptionist. Posters for the service user survey were also on display around the Story Street reception and waiting room.

The poster was translated into the most common languages used by Story Street patients where English is not their first language:

1. Kurdish Sorani
2. Romanian.
3. Spanish
4. Farsi
5. Ukrainian
6. Polish
7. Latvian

Humber and North Yorkshire Health and Care Partnership NHS

**Have Your Say** on local urgent care services

Plans are being developed for a new urgent treatment centre for minor illness and injury in time for Winter 2023.

This would involve the current Story Street Walk-in service moving to a new location close to the Emergency Department at Hull Royal Infirmary.

We want to hear any views you might have with the relocation of the Story Street Walk-in to Hull Royal Infirmary from November 2023

Have your say by scanning this code or ask for a paper questionnaire. Closing date 13th October 2023

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The poster below, including other language formats, was displayed in various locations advertising the survey.



This would involve the current Story Street Walk-in service moving to a new location close to the Emergency Department at Hull Royal Infirmary.

We want to hear any views you might have with the relocation of the Story Street Walk-in to Hull Royal Infirmary from November 2023



Have your say by scanning this code or ask for a paper questionnaire. Closing date 13th October 2023





## Survey Results

The percentage of people who respond to a survey is called the response rate. High survey response rates help to ensure that survey results are representative of the target population. A survey must have a good response rate in order to produce accurate, useful results and, clearly, the aim is to have the largest number of people possible to respond. Larger response rates generally tend to lead to increased precision when comparing with the overall target population.

According to Cohen et al (2005, p.93): "A question that often plagues novice researchers is just how large their samples for the research should be." But they suggest that a minimum of thirty is regarded as statistically viable by many researchers.

Other research shows that there are many statistical calculations available to help determine what a good response rate might look like. Generally, the ideal response rates vary based on a number of factors:

- What margin of error can you accept?
- What confidence level do you need?
- What is the overall population size?
- What is the response distribution?

The following website provides more information regarding explanations for the above factors and also provides a calculator to show the ideal response rate.

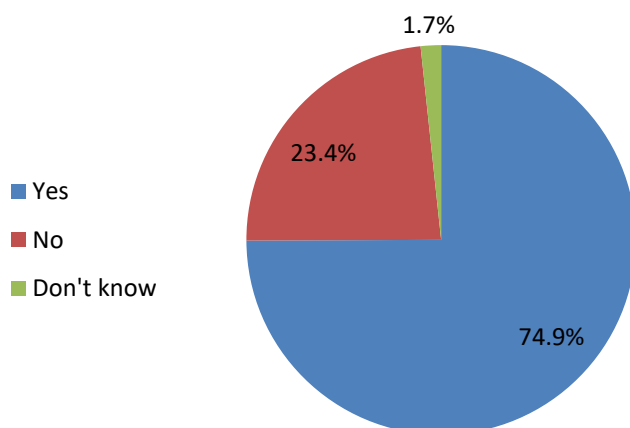
<http://www.raosoft.com/samplesize.html>

Based on Hull's population, a recommended sample size would be 384.

In total there, were 492 responses collected, and we would like to thank everyone for supporting the survey and taking part.

Please note that respondents did not have to answer every question and the analysis on each chart reflects this.

In the public survey we asked, '**Have you ever used the Story Street walk-in centre?**'



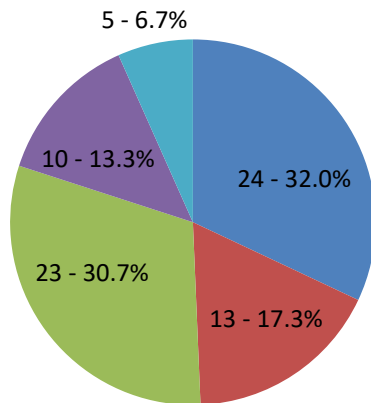
Three out of four, 74.9%, respondents have used the walk-in centre at Wilberforce Health centre.

23.4% have never used the walk-in centre and 1.7% don't know.

Those that have never used the service were sent straight to the question about their support of the service move.

In the Service user Survey we asked, **'Who advised you to attend Story Street walk-in centre?'**

- No one, I decided that I needed to attend.
- NHS 111
- My GP Practice.
- A friend or family member
- Other (please specify):

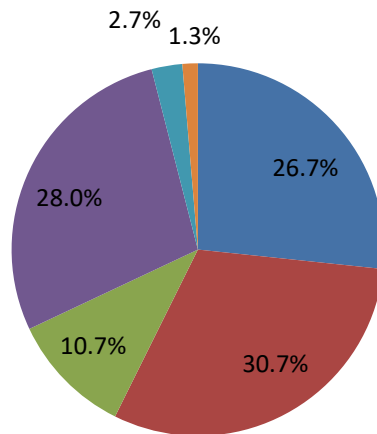


32% of people said they decided they needed to attend themselves and 30.7% were advised by their GP.

The five responses where 'other' was selected were:  
 Work/employer x 2  
 Pharmacy x2  
 Hospital cardiac x1

We asked the Service user respondents **'How did you get to Story Street for your visit?'**

- Walked
- Own car
- Someone else drove me.
- Bus
- Taxi
- Cycled



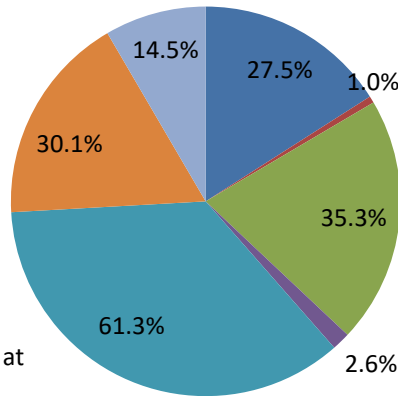
The three main reasons selected were Own car 30.7%, Bus 28% and walked 26.7%

There were two additional options available, train and other which have been removed from the graph as they returned no responses.

All the remaining questions throughout the two surveys were the same and have been presented together to capture a combined picture of responses.

**Why did you choose Story Street walk-in centre over other services? (Tick all that apply)**

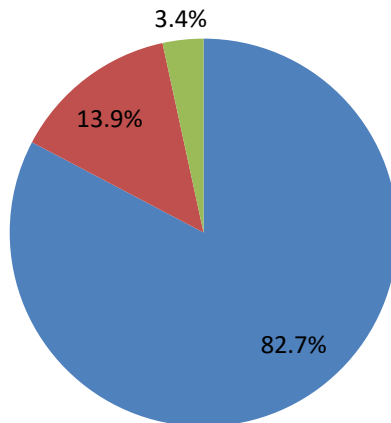
- Advised by a healthcare professional.
- I am not aware of any other services.
- It's convenient.
- I don't have a GP.
- I couldn't get an appointment at my GP surgery.
- Longer opening hours
- I thought that the walk-in centre was for any health problem.



61.3% of those that responded went to Story Street because they couldn't get an appointment with their own GP. 35.3 said it's because it's convenient, 30.1% for the longer opening hours and 27.5% were advised to attend by a healthcare professional.

**Which service did you use at Story Street walk-in centre?**

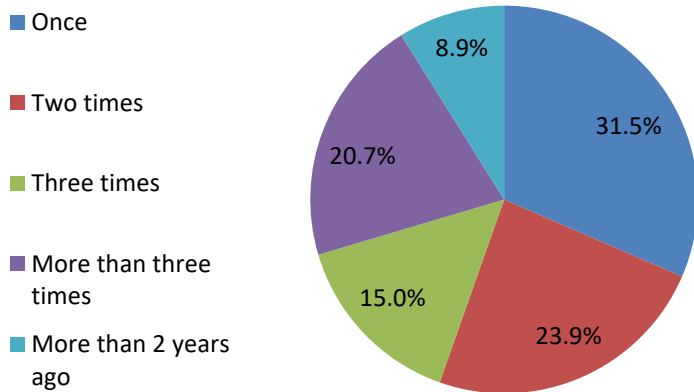
- Walk-in GP service for illness (for example high temperature, allergies, rashes, pain)
- Minor injury
- Don't know.



The majority, 82.7% of all responses were from people using the Walk-in GP service and 13.9% using the low-level minor injuries service.

3.4% of respondents didn't know which service they were triaged to.

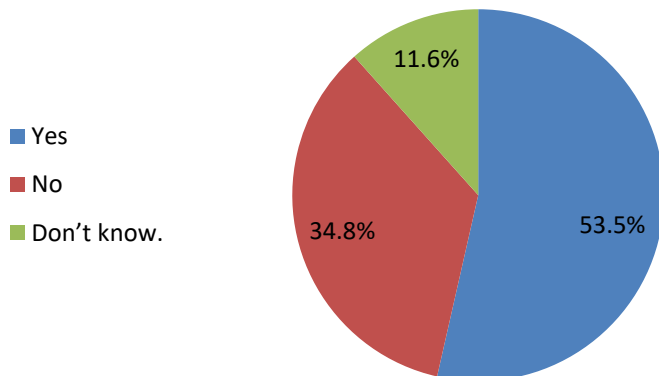
**How many times have you attended the Story Street walk-in centre in the last two years?**



The highest response rate was for those only using the service once in the last two years with 31.5%. 23.9% have used the service twice, 15% three times and 20.7% having used the service more than three times in the last two years.

8.9% said their visits were over two years ago.

**Would you support a walk-in centre being set up at Hull Royal Infirmary (where additional services like x-ray and other health specialists are based) instead of at Story Street?**

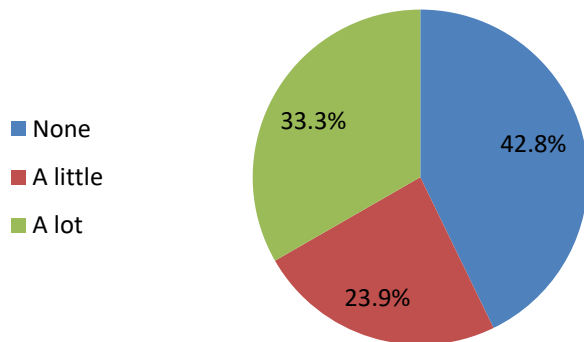


More than half of respondents are in support of the service moving, 53.5%.

A third of people are not in support 34.8%, and 11.6% are undecided.



**Hull Royal Infirmary is exactly 1 mile from Story Street. How much impact would a move to Hull Royal Infirmary have on you regarding travel to the walk-in centre being based there if you needed you use it?**



42.8% of responses are people who say there would be no impact to them when the service moves to Hull Royal Infirmary. 23.9% would have a little impact and 33.3% say there would be a lot of impact to their travel in accessing the service at Hull Royal Infirmary.

From the provided comments, several themes and opinions can be identified regarding the proposal to move the Story Street Walk-In Centre to Hull Royal Infirmary (HRI).

The following comments and themes were raised by people completing the survey who indicated that overall, there would be no impact to them from the proposed move. The number in brackets indicates the number of respondents from this group commenting under each theme:

1. **Proximity and Convenience (33 comments):**
  - Many commenters mention that the new location at HRI is closer to their homes, making it more convenient for them.
  - Some people appreciate the ease of access to the new location and mention that it's within walking distance.
2. **Transportation (20 comments):**
  - Some individuals express that they have access to transportation, such as cars or buses, which allows them to travel to either location.
  - A few commenters discuss the convenience of bus routes and bus stops near HRI.
3. **Parking Issues (18 comments):**
  - A significant number of comments highlight concerns about parking, especially at HRI. Some express frustration with parking difficulties and the cost associated with it.
  - A few mention the safety concerns related to parking in the dark.
4. **Potential Impact on A&E (5 comments):**
  - Several comments express concerns that moving the service to HRI might lead to overcrowding in the A&E department and longer wait times for patients.
  - Commenters stress the importance of maintaining adequate capacity.
5. **Accessibility for People with Mobility Issues (3 comments):**
  - A few comments point out the challenges faced by individuals with limited mobility and how the move may impact their ability to access healthcare services.
6. **Need for More Information (3 comments):**
  - Some comments call for more details and public engagement to fully understand the implications and benefits of the proposed move.
7. **Preference for Keeping Services in the Town Centre (2 comments):**
  - Two comments express a preference for keeping the services in the town centre, considering it more accessible for a majority of people.

8. **Travel and Cost (2 comments):**
  - A couple of comments mention the financial impact of travel, such as taxi costs, and the need to consider costs when deciding on the new location.
9. **Support for Centralisation (2 comments):**
  - A couple of comments support the idea of centralising services for the convenience of patients and staff.
10. **Mixed Opinions/Unsure (4 comments):**
  - Some comments either express mixed opinions about the proposed move or state that they are unsure about its impact.

The following comments and themes were raised by people completing the survey who indicated that overall, there would be little impact to them from the proposed move. The number in brackets indicates the number of respondents from this group commenting under each theme:

1. **Parking Concerns (45 comments):**
  - Many commenters express concerns about parking at Hull Royal Infirmary (HRI). They highlight that parking is difficult, expensive, and limited at HRI, while Story Street provides better parking options.
2. **Access and Convenience (38 comments):**
  - Several commenters mention that Story Street is more accessible, located in the city centre with good public transport connections and ample parking close by.
  - Some people appreciate the convenience of the central location, proximity to workplaces, and easy access for those without transportation.
3. **Preference for Central Location (15 comments):**
  - A recurring theme is the preference for keeping healthcare services centrally located in the town centre, which is seen as more convenient for a majority of people.
  - Some commenters point out that central locations are safer and feel less like going to a hospital when it's not needed.
4. **Concerns About Overcrowding (6 comments):**
  - A few commenters express concerns that adding an urgent care service at HRI could lead to overcrowding and confusion, potentially increasing the workload at the hospital.
  - Some mention that the original purpose of walk-in centres was to direct patients away from the hospital.
5. **Public Transportation (6 comments):**
  - Several comments mention the ease of access to Story Street through public transport, emphasising the need for reliable public services.
  - A few comments state that the move would result in having to take two buses instead of one.
6. **Personal Mobility (4 comments):**
  - Some commenters express concerns about mobility issues, noting that the move would mean a longer or more challenging journey for those with limited mobility or disabilities.
7. **Cost Considerations (4 comments):**
  - A few comments mention the cost associated with parking and how it could be saved if the service were to remain at Story Street, which has free parking after 6 pm.
8. **Preference for Story Street (4 comments):**
  - Some comments express a general preference for Story Street due to its location, accessibility, and familiarity.
9. **Safety Concerns (2 comments):**
  - Two comments mention concerns about the safety of the area around HRI, particularly regarding traffic and road safety.

#### 10. **Positive Impact of Central Location (2 comments):**

- A couple of comments express that the central location of Story Street is more convenient for bus routes and parking facilities, which would have a positive impact.

The following comments and themes were raised by people completing the survey who indicated that overall, there would be a significant impact to them from the proposed move. The number in brackets indicates the number of respondents from this group commenting under each theme:

#### 1. **Accessibility and Convenience (61 comments):**

- Many people mentioned the convenience of the current Story Street location, which is easily accessible by public transport and close to the city centre.
- They expressed concerns about the difficulty of reaching Hull Royal Infirmary (HRI), especially for those without cars, as it would require taking multiple buses.
- Several comments emphasised that the Story Street site is central and accessible, while parking at HRI is problematic and expensive.
- There were concerns that moving the walk-in centre to HRI would make it harder for people with mobility issues to access the service.

#### 2. **Parking Issues at HRI (48 comments):**

- A recurring concern was the insufficient parking at HRI, with comments indicating that parking was often full, expensive, or far away from the entrances.
- People were worried that adding the walk-in centre to HRI would exacerbate existing parking problems and make it even more challenging for patients and visitors.

#### 3. **Overcrowding and Longer Waiting Times at HRI (19 comments):**

- Many comments expressed concerns that moving the walk-in centre to HRI would lead to overcrowding and longer waiting times, as more patients would use the facilities.
- There were fears that patients who couldn't access a GP would turn to A&E if the walk-in centre was busy, further straining resources.

#### 4. **Impact on Vulnerable Populations (14 comments):**

- Several comments highlighted the potential impact on vulnerable populations, such as those with disabilities, limited access to transport, or those who live in the city centre.
- They pointed out that the Story Street location was more accessible and provided an essential service for these individuals.

#### 5. **Scepticism About the Relocation (9 comments):**

- Some comments expressed scepticism about the reasons for relocating the walk-in centre, suspecting it was an attempt to offload patients from A&E rather than improve service.
- Others questioned the need for the move, arguing that if the current system works well, there is no need to change it.

#### 6. **Traffic Congestion and Safety Concerns (8 comments):**

- Concerns were raised about the traffic congestion around HRI, making it more challenging to reach the hospital.
- Safety concerns were voiced, particularly for those who would have to walk long distances or cross busy roads if the walk-in centre was moved.

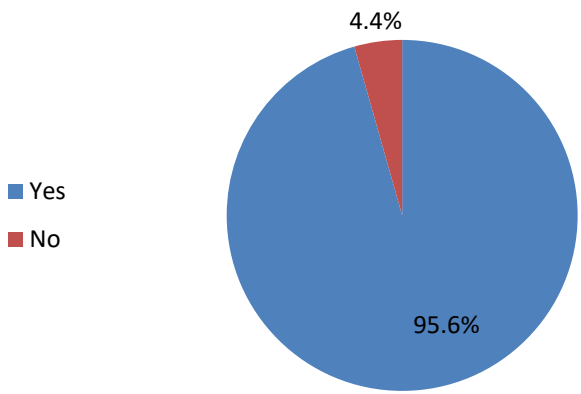
#### 7. **Economic Impact (7 comments):**

- Several comments mentioned the financial impact of relocating the service, as patients might incur additional costs when using public transport or taxis to reach HRI.

Please note that the comments reflect a variety of perspectives and experiences regarding the proposed relocation of the Story Street Walk-In Centre to Hull Royal Infirmary. These themes provide an overview of the key concerns and considerations expressed by the commenters.

All comments received for this question can be made available upon request.

**Are you currently registered with a GP? If so, please let us know which one.**



A large majority of respondents are registered with a GP, 95.6%, with 4.4% not currently registered with any practice which equates to 21 individuals.

There were also 13 people who have no fixed abode who completed the survey. Only four of these are registered with a GP, those being The Quays x2, The Hub x1 and Clifton House x1.



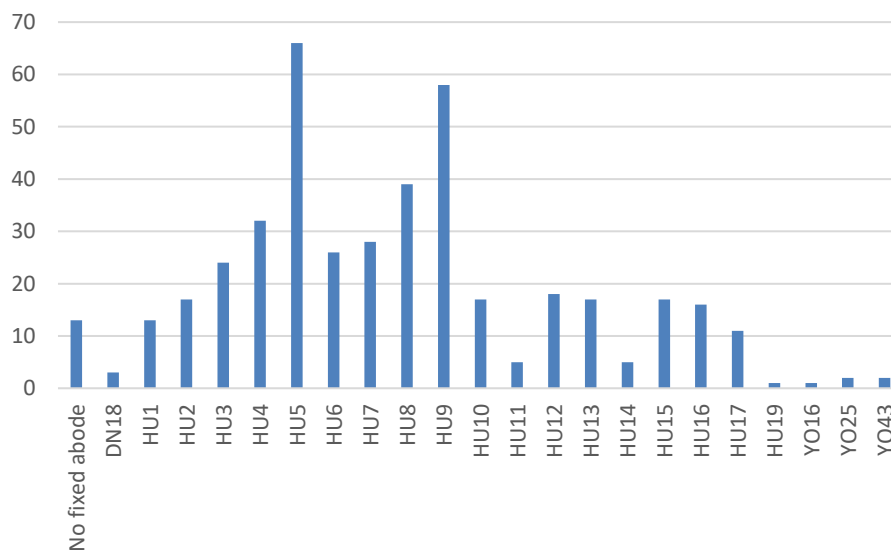
## Demographic questions

Demographic questions are routinely asked to help Humber and North Yorkshire ICB address health inequalities and improve outcomes for patients and ensure the views being gathered are representative of the population, or users of a particular service.

The next set of questions were asked to better understand the context of the answers given to this survey.

Respondents did not need to answer any or all these questions, and assurance was given that any information provided will be securely stored and is completely anonymous.

### What is your postcode?



The current address for the walk-in service is: Story St, Hull HU1 3SA. HU5 and HU9 postcode areas have the greatest response rates for our survey.

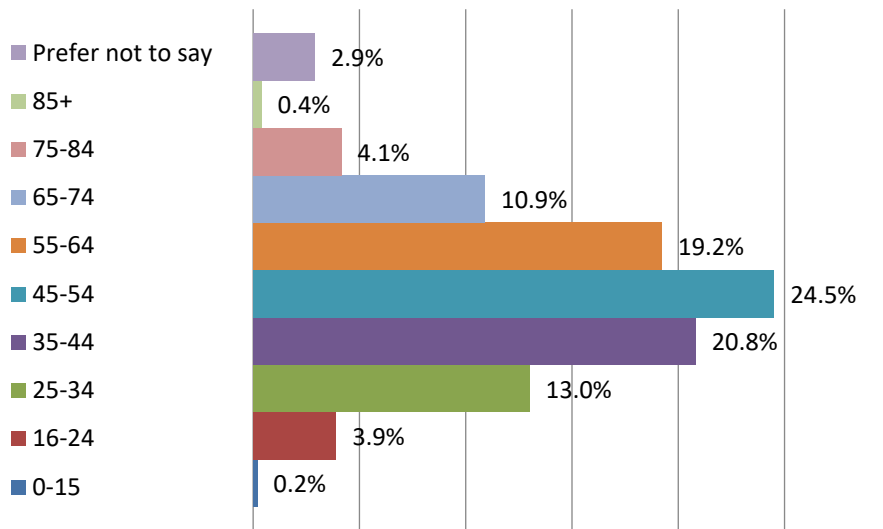
No fixed abode	13
DN18	3
HU1	13
HU2	17
HU3	24
HU4	32
HU5	66
HU6	26

HU7	28
HU8	39
HU9	58
HU10	17
HU11	5
HU12	18
HU13	17
HU14	5

HU15	17
HU16	16
HU17	11
HU19	1
YO16	1
YO25	2
YO43	2

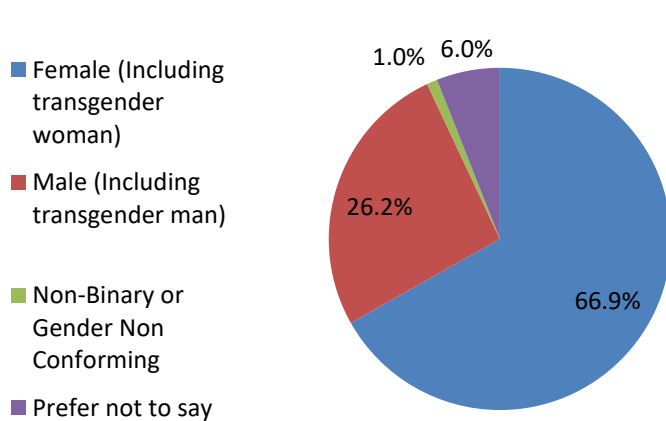


### What is your age?



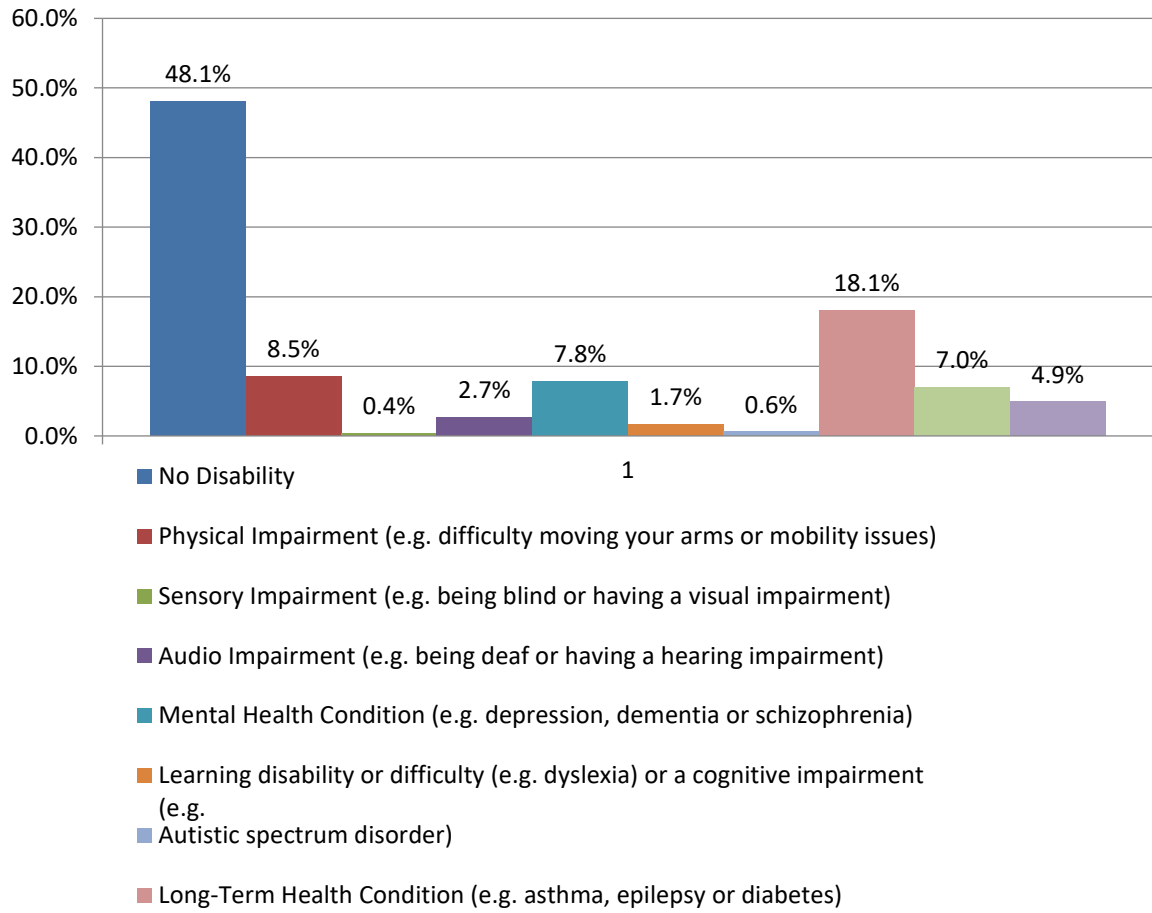
The three age brackets with the highest responses were 45-54 with 24.5%, 35-44 with 20.8% and 55-64 with 19.2%.

### What is your gender?



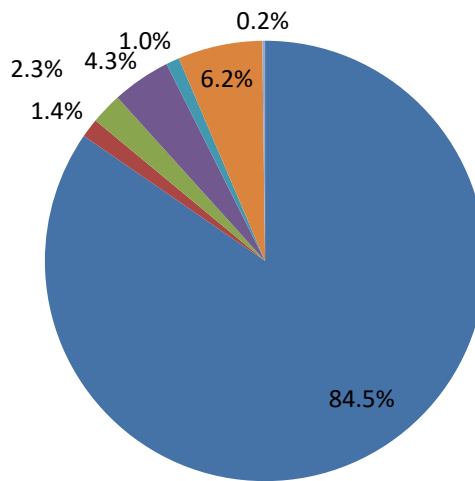
The majority of respondents were female with 66.9% completing the survey. There were 26.2% male responses, 1% were non-binary or gender non-conforming and 6% of people preferred not to say their gender.

## Do you have a disability, long-term illness, or health condition?



**Which of the following best describes your ethnic background?**

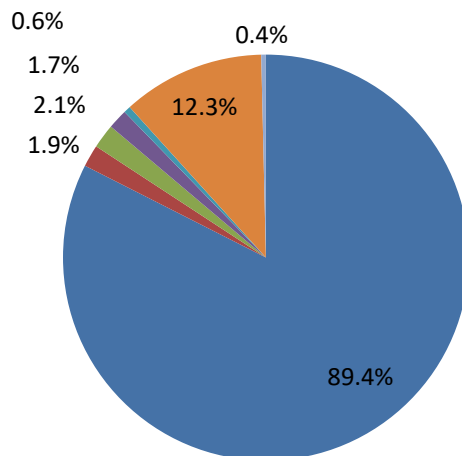
- White – other white
- Mixed / Multiple ethnic group
- Asian / Asian British
- Black / African / Caribbean / Black British
- Chinese
- Prefer not to say
- Other (please specify):



84.5% of respondents are white – other white.  
 6.2% prefer not to say.  
 4.3% are Black / African / Caribbean / Black British.  
 2.3% Asian / Asian British, 1.4% mixed / multiple ethnic group and 1% Chinese.  
 The 1 other response received stated Arab as their ethnic background.

**Which of the following best describes your sexual orientation?**

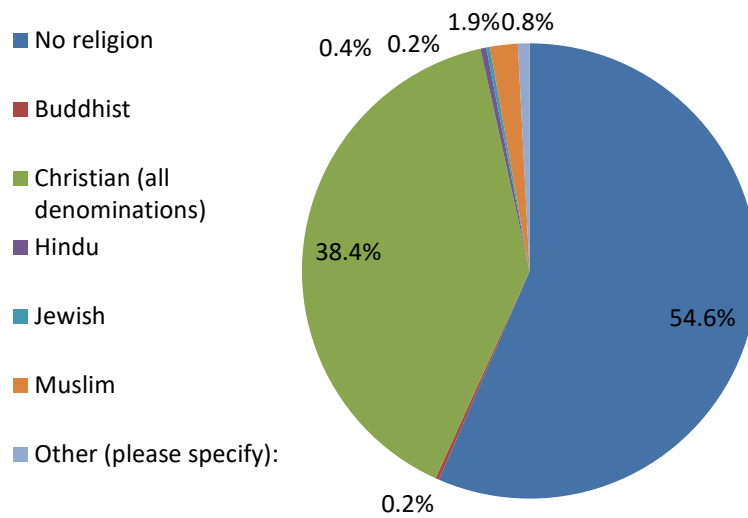
- Heterosexual or straight
- Gay man
- Gay women or lesbian
- Bisexual
- Asexual
- Prefer not to say
- Other (please specify):



Heterosexual or straight was the sexual orientation that received most responses with 89.4%.  
 12.3% preferred not to say.  
 2.1% are gay women or lesbian, 1.9% gay men, 1.7% bisexual and 0.6% asexual.  
 There were two responses (0.4%) for other. Both of these were specified as pansexual.



### What is your religion or belief?



54.6% of all respondents identify with no religion or belief.

38.4% are Christian, 1.9% Muslim, 0.4% Hindu, 0.2% Buddhist and Jewish.

0.8% selected other and they were:

Catholic x1

Church of England x1

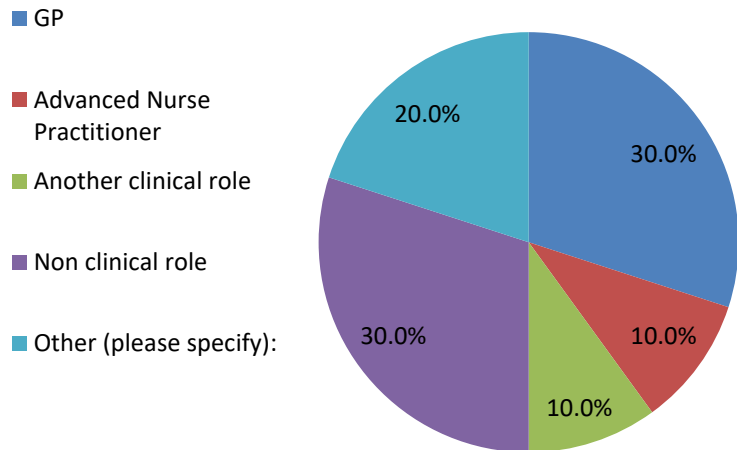
Agnostic x1

Pagan x1

## Primary Care UTC survey

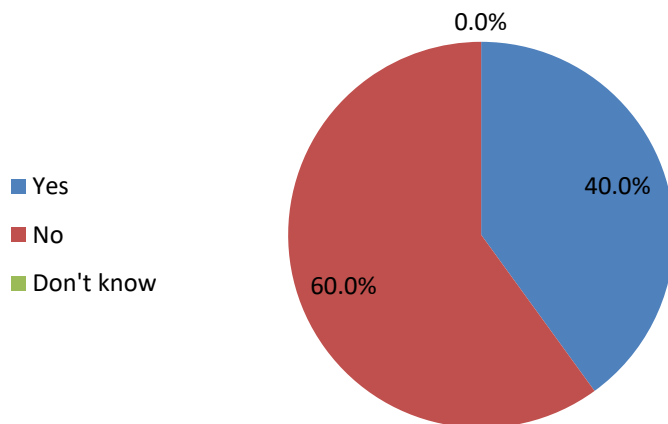
A third survey was created to capture the views of staff working within Primary Care. There were 10 responses and the results presented below.

### What is your job role within the practice?



The two responses where other was selected identified as a PCN Manager and a Social Prescriber.

### Do you anticipate any issues for your patients in moving the Primary Care Walk In service to the Hull Royal Infirmary (HRI) site? If so, please let us know what you anticipate these to be.



60% don't anticipate any issues for patients by moving the walk in service to the HRI site, with 40% believing there may be.

The comments left to back up their responses can be found below.

- Patients may continue to attend Bransholme -- to find it closed = otherwise I think it's a good idea.
- Patients without access to transport or mobility issues will be negatively impacted.
- I don't anticipate any issues for our patients who mostly reside in the west of the city, but those living in Bransholme, and surrounding areas will have further to travel. If they don't have access to a car with need to use public transport (2 buses) or taxis with increased costs.
- The present location is easily accessible by walking, transport, car, bus routes, there is ample parking around the city centre.

- Parking is a problem at the proposed site at the hospital, traffic congestion, reduced transport routes.
- Having a city centre walk in centre benefits the people of Hull it is easily identified by the public in as a primary care service.
- The walk-in centre is purpose built in the Wilberforce building.
- Moving the walk-in centre to a secondary care site is confusing for the public and may increase not decrease footfall to the emergency department.
- Parking, people won't always know how long they will be and may not afford the length of their stay.

**Are there any opportunities for service improvement with the relocation of the Primary Care Walk In Centre and associated development of a UTC on the HRI site offer?**

- Better for patients to be directed to walk in if inappropriate for A&E without the need to travel to another location.
- have the teams work together and monitor outcomes closely.
- Should and A&E setting be more appropriate for patients it will be better for patient safety.
- I see limited opportunity other than proximity to access referral to emergency transfer for patients.
- The audited amount of emergency admissions from the walk-in centre to HRI would need to be accounted for
- As definition the walk-in centre contract is more minor ailments and not urgent care "
- Yes, it is a welcome development.
- No

**Do you have any other comments you wish to make regarding the relocation of the Primary Care Walk In Centre and development of a UTC the HRI site?**

- It's about time!
- One of the main reasons for relocation of the UTC is to reduce inappropriate ED attendances. Rather than shift attendances into a new UTC have there been consideration that part of the issue may stem from a lack of primary care provision throughout the city. And could the money being spent on relocating a UTC be better spent enhancing primary care services.
- moving the walk-in centre is a loss to the city centre of Hull and will have a negative impact on the core reasons of minor ailment provision as a primary care domain.
- It is long overdue.
- No
- I think it is a great idea makes perfect sense to me.

## Engagement Reach

### Face to face

The engagement team visited several places to conduct face to face engagement and invite people to complete the survey. We visited:

Humber All Nation Alliance breakfast morning

Emmaus Hull and East Riding

Oasis Church, Newland Avenue, hull

The Peel Street Project community health fair

Hull University fresher fair

### Social Media

The results of the paid for social media on Facebook are as follows.

Start	End	Reach	Impressions	Amount spent (GBP)	Clicks (all)	Cost per click (all)	Link clicks	Cost per link click
23-Aug	10-Oct	244333	549887	£ 961.79	1675	£ 0.57	510	£ 1.89

### Terms:

**Impressions** are the number of times users saw the post.

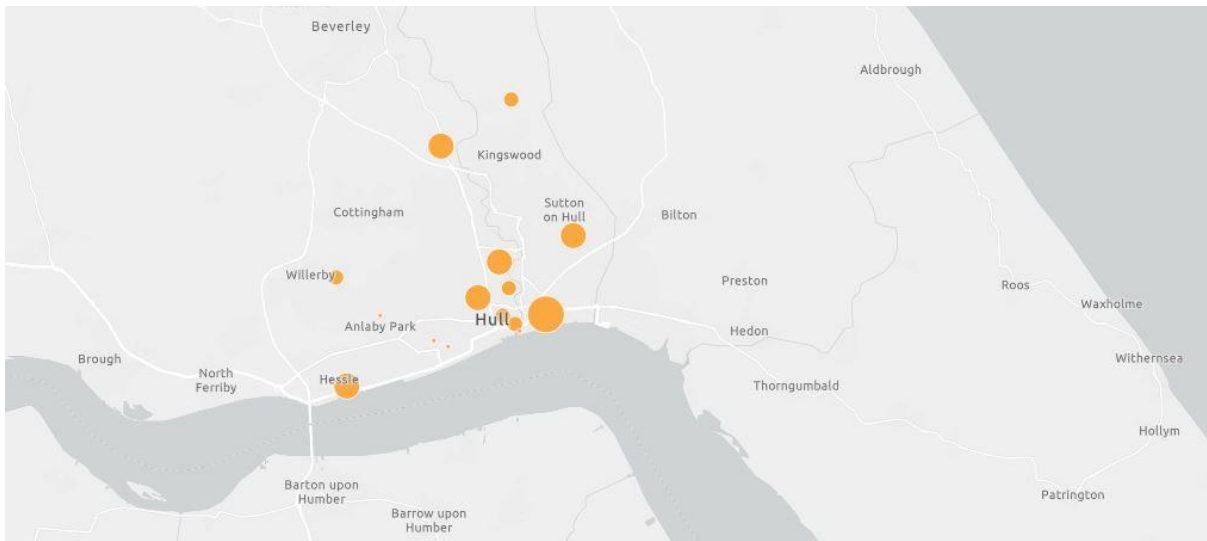
**Engagements** are the number of times users interacted with the Facebook post (all 'clicks' anywhere on the post including hashtag, username, links, shares, follows, likes etc.).

**Reach** is the number of unique people who saw the content on Facebook.

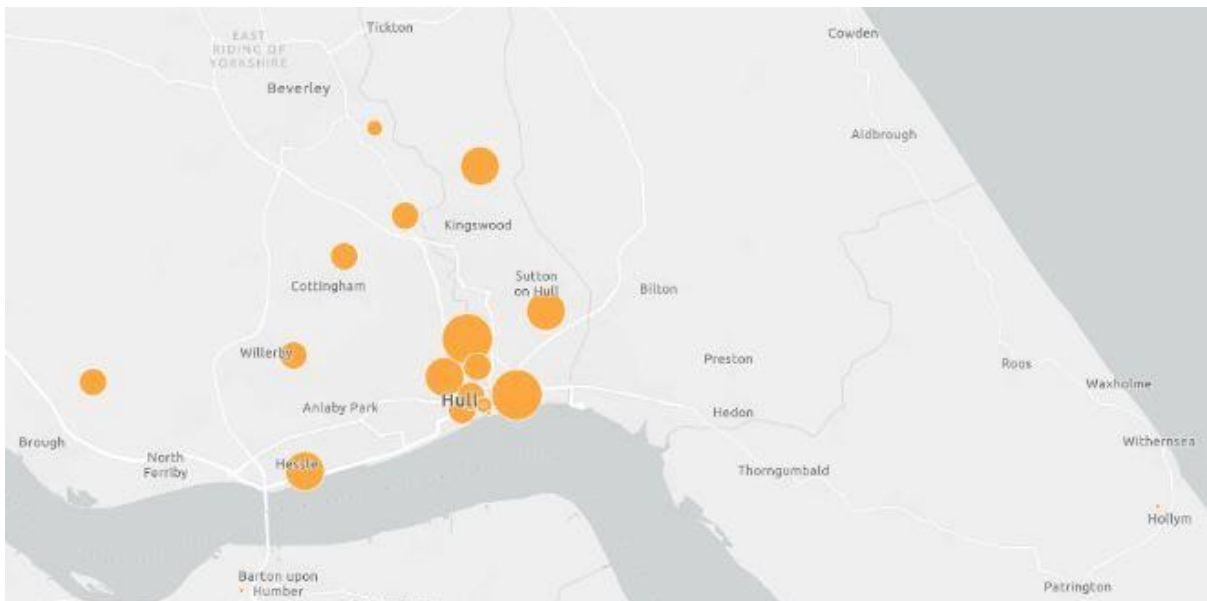


## Maps

The below heat maps show to postcode areas where responses came from:



The above map shows the postcode areas for those who completed the survey as a service user. (In Story Street).



The above map shows the postcode area for those who completed the public survey.

## Conclusions

In conclusion, the proposed relocation of the Story Street Walk-In Centre to Hull Royal Infirmary is a significant development aimed at improving the delivery of urgent care services for the residents of Hull and the East Riding. This decision is driven by the need to provide enhanced, effective, and accessible urgent treatment to support the recovery of services and manage demand, particularly during the winter months. The plans to move Story Street Walk-In to a co-located site with the Emergency Department at Hull Royal Infirmary align with a well-established and recognised model of co-locating urgent and emergency care services, which has the potential to ease pressure on the emergency department, reduce overcrowding, and improve patient waiting times.

The engagement process, including an online survey and targeted face-to-face interactions, provided valuable insights into the perspectives of the community. It revealed that a significant number of respondents have used the Story Street Walk-In Centre, and a majority of them support the proposed relocation. However, concerns were raised, particularly regarding accessibility, parking issues at Hull Royal Infirmary, and potential overcrowding in the Emergency Department. These concerns should be carefully considered in the planning and implementation of the relocation.

The analysis of demographic information shows that a diverse range of individuals participated in the survey, which helps in understanding the needs and preferences of the community. The engagement process has also been extensive, utilising both face-to-face interactions and social media outreach to ensure a broad reach.

Ultimately, the proposed relocation of the Story Street Walk-In Centre presents an opportunity to provide better and more comprehensive urgent care services to the residents of Hull and the East Riding. It is essential for the NHS Humber and North Yorkshire Integrated Care Board to address the concerns raised by the community and ensure that the transition is smooth and effectively meets the healthcare needs of the population. This project aligns with the broader goals of improving healthcare access and reducing the strain on emergency services, ultimately leading to better patient outcomes and experiences.



## Recommendations and next steps

Provide a detailed briefing update to all impacted **Health Overview and Scrutiny Committees** describing the results of this engagement and next steps.

**Parking Solutions:** To mitigate parking-related concerns, consider implementing a well-thought-out parking strategy at Hull Royal Infirmary. This could include providing affordable parking options, designated parking spaces for urgent care patients, and information on alternative transportation methods.

**Education and Awareness:** Launch an educational campaign to inform the public about the upcoming relocation. Provide clear information on the benefits of the move, such as access to additional services like x-rays and specialist expertise, and the potential for quicker care.

**Communication Channels:** Maintain open communication channels with the public, keeping them informed of the progress of the relocation. Regular updates through social media, local media, and the NHS website can help manage expectations and address any concerns.

**Workforce Collaboration:** Ensure that the workforce at both Story Street Walk-In Centre and Hull Royal Infirmary is fully prepared for the relocation. This includes training and orientation to the new facility and any changes in processes or procedures.

**Community Outreach:** Engage with local MPs, councillors, and voluntary groups in Hull and East Riding to ensure that they are informed about the relocation and can communicate this information to their constituents. Their support and collaboration can be invaluable.

**Maintain Primary Care Services:** Emphasise that the relocation of the Story Street Walk-In Centre will not lead to a reduction in primary care provision. Ensure that GP practices at Wilberforce Health Centre continue to operate unaffected.

**Patient Pathway Optimisation:** Explore opportunities to enhance the patient pathway, ensuring that individuals are triaged and assessed appropriately right from the start of their healthcare journey. This can help direct patients to the most suitable care pathway efficiently.

**Transparency and Information Sharing:** Maintain transparency in the decision-making process and share relevant information with the public. Provide clear explanations of how the relocation will benefit the community.

**Communication with NHS 111 Service:** Establish clear communication channels with the NHS 111 service to ensure that operators are well-informed about the upcoming relocation of the Story Street Walk-In Centre to Hull Royal Infirmary. Provide them with detailed information on the new location, services offered, and any changes in procedures. This will enable the 111 service to accurately direct callers to the appropriate urgent care services, contributing to a seamless experience for patients seeking medical assistance. Regular updates should be shared with the 111 service to keep them informed of any developments or adjustments during and after the relocation.

By following these recommendations and taking these next steps, the NHS Humber and North Yorkshire Integrated Care Board can ensure a smooth transition to the new location of the Story Street Walk-In Centre, while also addressing the concerns and needs of the community. This approach will ultimately lead to improved healthcare access and experiences for the residents of Hull and the East Riding.

## Appendix

### Below is a copy of the public survey.

Please note that the dates in the surveys were based on the proposed move date and the engagement had already started when the new January date was agreed.



**Humber and North Yorkshire**  
Health and Care Partnership



### Story Street Public Questionnaire.

Humber and North Yorkshire Integrated Care Board is developing plans for a new walk-in urgent care service for minor illness and injury. This would involve the current Story Street Walk-in service moving to a new location close to the Emergency Department at Hull Royal Infirmary, in time for winter 2023.

This is an opportunity to transform local NHS urgent care services, ensuring patients are seen and treated in a single place for minor illness and injury, as well as health emergencies. The views of the people who currently use Story Street Walk-in are important. We need to hear from you about your experience as a patient today, and any difficulties you might have in accessing this walk-in service, when it moves to a new location at Hull Royal Infirmary from November 2023.


Please return any completed surveys back to us using the FREEPOST address below, no stamp necessary, just pop it in an envelope and post it!

FREEPOST RTTL-HSBE-BLHL  
Health House  
Grange Park Lane  
Willerby  
HULL HU10 6DT

This survey is also available online, scan the QR code below to complete:



**1. Have you ever used the Story Street walk-in centre?**

- Yes
- No  (Go to Q5)
- Don't know.  (Go to Q5)

**2. Why did you choose Story Street walk-in centre over other available services? (Tick all that apply)**

- Advised by a healthcare professional.
- I am not aware of any other services.
- It's convenient.
- I don't have a GP.
- I couldn't get an appointment at my GP surgery.
- Longer opening hours
- I thought that the walk-in centre was for any health problem.

**3. Which service did you use at Story Street walk-in centre?**

- Walk-in GP service
- Low level minor injuries
- Don't know.

**4. How many times have you attended the Story Street walk-in centre in the last two years**

- Once
- Two times
- Three times
- More than three times
- More than 2 years ago

**5. Would you support a walk-in centre being set up at Hull Royal Infirmary (where additional services like x-ray and other health specialists are based) instead of at Story Street?**

- Yes
- No
- Don't know.

**6. Hull Royal Infirmary is exactly 1 mile from Story Street. How much impact would a move to Hull Royal Infirmary have on you regarding travel to a walk-in centre there if you needed to use it?**

- None
- A little
- A lot

Please give the reason/s for your answer.

**7. Are you currently registered with a GP? If so, please let us know which one.**

- No
- Yes

## About you

The next set of questions will help us to better understand the answers you have given, and the health and care needs and experiences of people across Humber and North Yorkshire. By answering these short questions, you will help us to work to address health inequalities, giving everyone the opportunity to receive care in a way that is most appropriate to them, and improving outcomes for patients.

You do not need to answer any or all of these questions, and any information you provide will be securely stored and completely anonymous.

### What is your postcode?

No fixed abode / I don't have a postcode.

### What is your age?

0-15

16-24

25-34

35-44

45-54

55-64

65-74

75-84

85+

Prefer not to say

### What is your gender?

Female (Including transgender woman)

Male (Including transgender man)

Non-Binary or Gender Non Conforming

Prefer not to say

I identify in another way (Please specify)

### Do you have a disability, long-term illness, or health condition?

No Disability

Physical Impairment (e.g. difficulty moving your arms or mobility issues)

Sensory Impairment (e.g. being blind or having a visual impairment)

Audio Impairment (e.g. being deaf or having a hearing impairment)

Mental Health Condition (e.g. depression, dementia or schizophrenia)

Learning disability or difficulty (e.g. dyslexia) or a cognitive impairment (e.g. autistic spectrum disorder)

Long-Term Health Condition (e.g. asthma, epilepsy or diabetes)

Prefer not to say

Other (Please specify)

### Which of the following best describes your ethnic background?

White – other white

Mixed / Multiple ethnic group

Asian / Asian British

Black / African / Caribbean / Black British

Chinese

Prefer not to say

Not on the list (Please specify)

**Which of the following best describes your sexual orientation?**

- Heterosexual or straight
- Gay man
- Gay women or lesbian
- Bisexual
- Asexual

- Prefer not to say
- Other (Please specify)

**What is your religion or belief?**

- No religion
- Buddhist
- Christian (all denominations)
- Hindu
- Jewish

- Muslim
- Sikh
- Other (Please specify)

Thank you for completing this survey.



Below is a copy of the service user survey.



**Humber and North Yorkshire**  
Health and Care Partnership



### **Story Street Service User Questionnaire.**

Humber and North Yorkshire Integrated Care Board is developing plans for a new walk-in urgent care service for minor illness and injury. This would involve the current Story Street Walk-in service moving to a new location close to the Emergency Department at Hull Royal Infirmary, in time for winter 2023.

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FREEPOST RTTL-HSBE-BLHL

Health House

Grange Park Lane

Willerby

HULL HU10 6DT

This survey is also available online, scan the QR code below to complete:



**1. Who advised you to attend Story Street walk-in centre?**

No one, I decided that I needed to attend.

NHS 111

999 / The ambulance service

Out of hours service

My GP Practice.

A friend or family member

Other (please specify)

**2. Why did you choose Story Street walk-in centre over other services? (Tick all that apply)**

Advised by a healthcare professional.

I am not aware of any other services.

It's convenient.

I don't have a GP.

I couldn't get an appointment at my GP surgery.

Longer opening hours

I thought that the walk-in centre was for any health problem.

**3. How did you get to Story Street for your visit?**

Walked

Own car

Someone else drove me.

Bus

Taxi

Cycled

Train

Other (please specify)

**4. Which service did you use at Story Street walk-in centre?**

Walk-in GP service

Low level minor injuries

Don't know.

**5. How many times have you attended the Story Street walk-in centre in the last two years, including today?**

Once

Two times

Three times

More than three times

**6. Would you support a walk-in centre being set up at Hull Royal Infirmary (where additional services like x-ray and other health specialists are based) instead of at Story Street?**

Yes

No

Don't know.

**7. Hull Royal Infirmary is exactly 1 mile from Story Street. How much impact would a move to Hull Royal Infirmary have on you regarding travel to a walk-in centre there if you needed to use it?**

None

A little

A lot

Please give the reason/s for your answer.

**8. Are you currently registered with a GP? If so, please let us know which one.**

No

Yes

## About you

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You do not need to answer any or all of these questions, and any information you provide will be securely stored and completely anonymous.

### What is your postcode?

No fixed abode / I don't have a postcode.

### What is your age?

0-15

45-54

85+

16-24

55-64

Prefer not to say

25-34

65-74

35-44

75-84

### What is your gender?

Female (Including transgender woman)

I identify in another way (Please specify)

Male (Including transgender man)

Non-Binary or Gender Non Conforming

Prefer not to say

### Do you have a disability, long-term illness, or health condition?

No Disability

Learning disability or difficulty (e.g. dyslexia) or a cognitive impairment (e.g. autistic spectrum disorder)

Physical Impairment (e.g. difficulty moving your arms or mobility issues)

Sensory Impairment (e.g. being blind or having a visual impairment)

Long-Term Health Condition (e.g. asthma, epilepsy or diabetes)

Audio Impairment (e.g. being deaf or having a hearing impairment)

Prefer not to say

Mental Health Condition (e.g. depression, dementia or schizophrenia)

Other (Please specify)

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- White – other white
- Mixed / Multiple ethnic group
- Asian / Asian British
- Black / African / Caribbean / Black British
- Chinese
- Prefer not to say
- Not on the list (Please specify)

**Which of the following best describes your sexual orientation?**

- Heterosexual or straight
- Gay man
- Gay women or lesbian
- Bisexual
- Asexual
- Prefer not to say
- Other (Please specify)

**What is your religion or belief?**

- No religion
- Buddhist
- Christian (all denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Other (Please specify)

Thank you for completing this survey



## Contact Us

For any further information about Humber and North Yorkshire Integrated Care Board please contact us in any of the following ways:

Mail:

Humber and North Yorkshire Integrated Care Board (ICB),  
Health House,  
Grange Park Lane,  
Willerby,  
HU10 6DT.

Website:

<https://humberandnorthyorkshire.icb.nhs.uk/>

Email:

[hnyicb.communications@nhs.net](mailto:hnyicb.communications@nhs.net)

