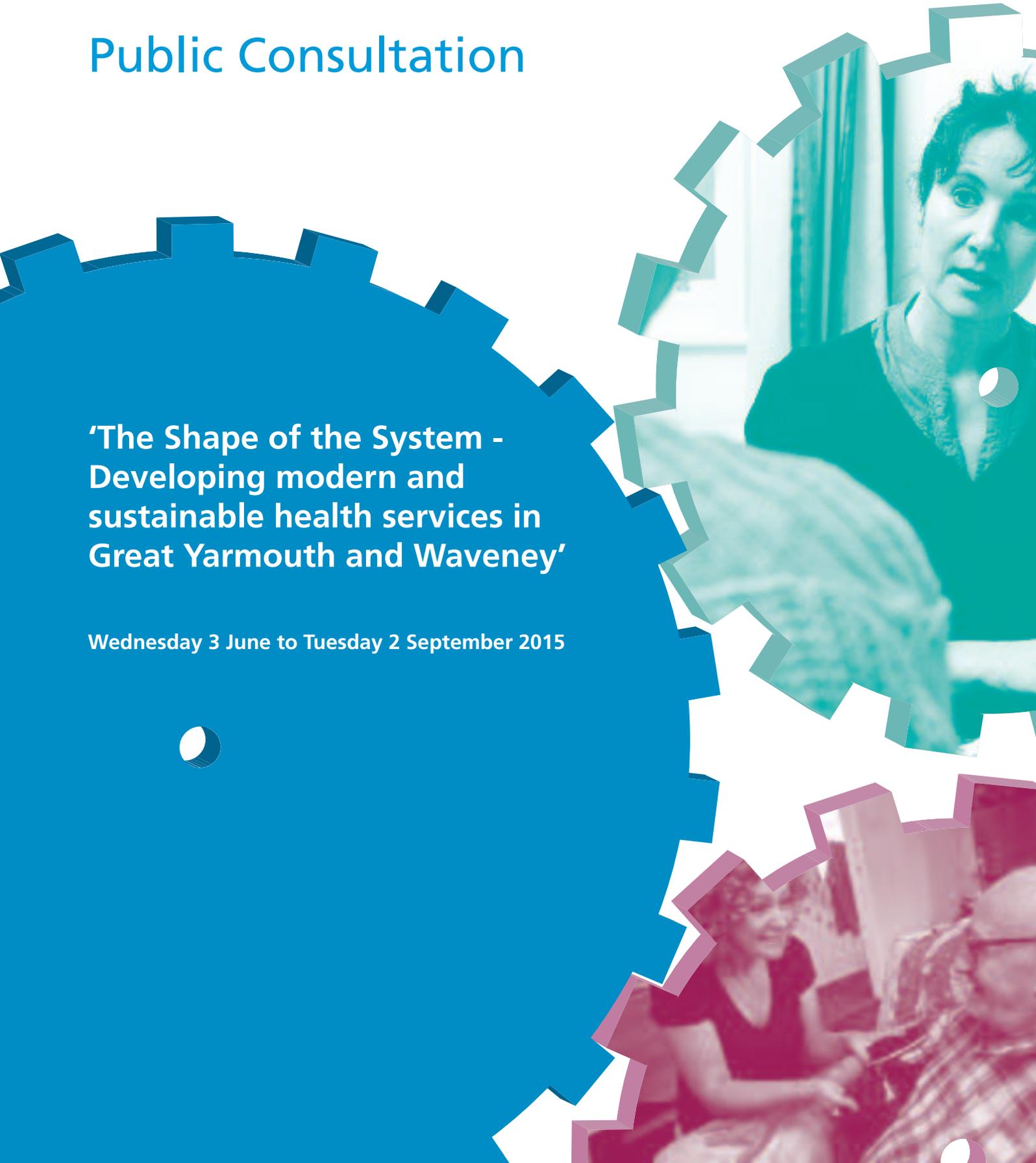


Public Consultation

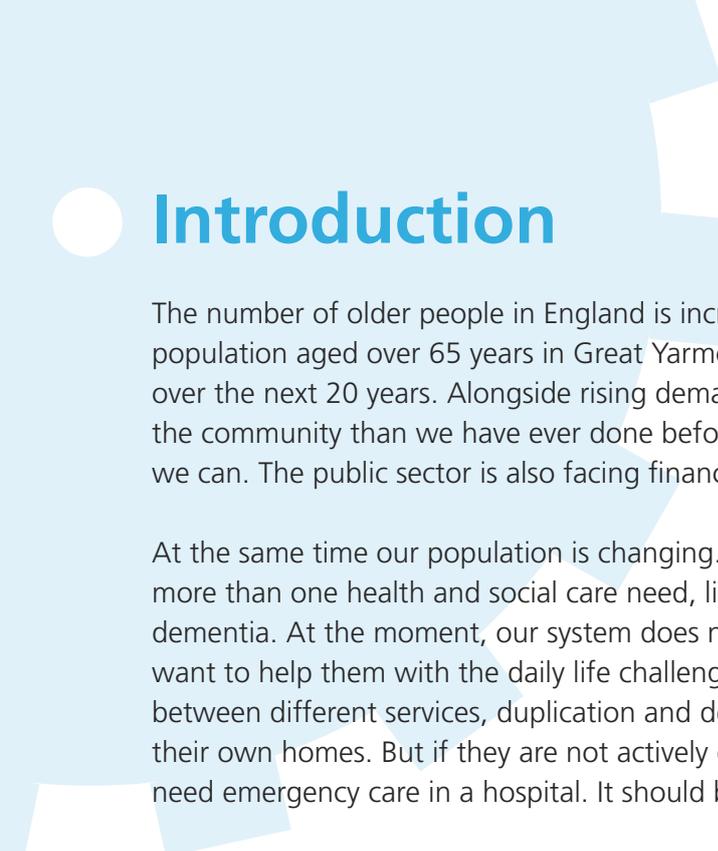
**'The Shape of the System -
Developing modern and
sustainable health services in
Great Yarmouth and Waveney'**

Wednesday 3 June to Tuesday 2 September 2015



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Introduction

The number of older people in England is increasing and will continue to do so. The percentage of the population aged over 65 years in Great Yarmouth and Waveney is currently 24% and this is set to double over the next 20 years. Alongside rising demand, as a health service we are capable of doing much more in the community than we have ever done before, and we owe it to our patients to provide the best care that we can. The public sector is also facing financial constraints and we need to spend what we have carefully.

At the same time our population is changing. People are not only living longer, many of them live with more than one health and social care need, like diabetes, heart disease and all the difficulties of living with dementia. At the moment, our system does not always deliver the joined up care that people need and want to help them with the daily life challenges they face alongside their health issue. There are gaps between different services, duplication and delays for patients. Most people could be treated very well in their own homes. But if they are not actively cared for, their illness could get worse and they could then need emergency care in a hospital. It should be the exception that people have to be admitted to hospital.

Finally, a lack of 'joined-up care' is a huge source of frustration for patients and carers, as well as for health and social care professionals. If health and social care, working together, can deliver integrated services, this will really improve quality and safety for all those that use these services. We will also get better value for taxpayers money by joining up or 'integrating' services better.

This document is about our 'Shape of the System' consultation. We are talking to you about making substantial changes to the way we deliver better healthcare for patients in Great Yarmouth and Waveney.

The proposals in this document have been developed by NHS Great Yarmouth and Waveney Clinical Commissioning Group ('the CCG', and often known locally as 'HealthEast'). The CCG is a clinically-led organisation with clinicians including GPs, nurses and hospital consultants sitting on the CCGs Governing Body.



This document has been developed in partnership with:

- Patients and the public through a series of public engagement workshops across Great Yarmouth and Waveney attended by members of the public, local councillors, Patient Participation Group representatives, voluntary organisations and Healthwatch.
- East Coast Community Healthcare (ECCH)
- James Paget University Hospitals NHS Foundation Trust (JPUH)
- Norfolk and Suffolk NHS Foundation Trust (NSFT)
- Norfolk County Council (NCC)
- Suffolk County Council (SCC)
- Waveney District Council (WDC)
- Great Yarmouth Borough Council (GYBC)
- NHS England (NHSE)

The Governing Body of the CCG, as the planner and commissioner of services for Great Yarmouth and Waveney, will listen to your views and will make the final decision on any changes to services. No decisions have been taken yet.

The services covered by this consultation are:



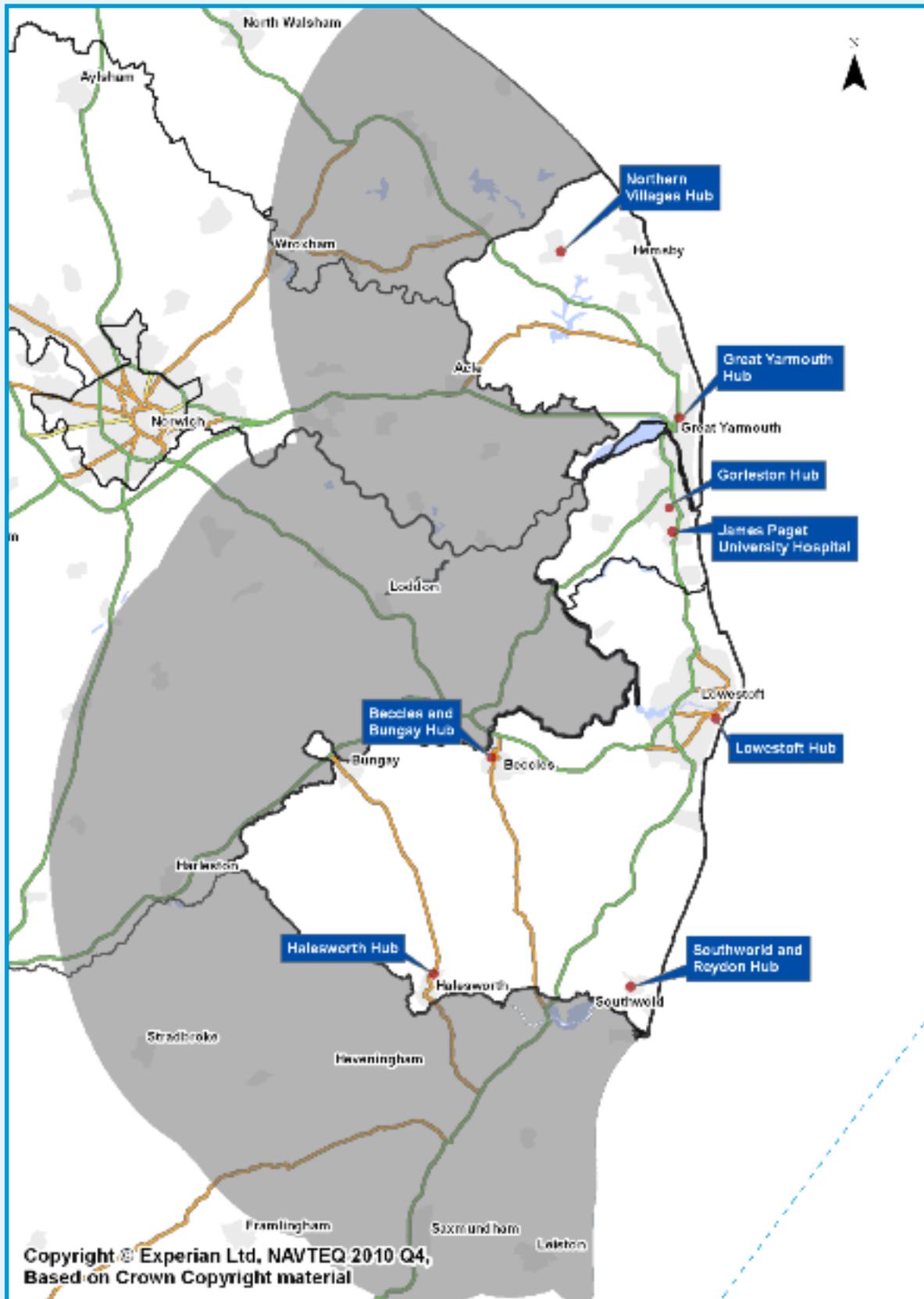
- Community based services for Great Yarmouth and Waveney, with new out of hospital teams and integrated community hubs
- GP beds in community hospitals in Southwold, Halesworth (Patrick Stead Hospital), Beccles, Northgate Hospital in Great Yarmouth and All Hallows Hospital in Ditchingham

The consultation is all about:



- How care is provided in communities and in community hospitals
- Where services are based across the CCG area to ensure equity for everyone who lives in Great Yarmouth and Waveney

Please keep reading to see what changes we are proposing, and an explanation of why we believe they are necessary.



The area in white shows the CCG boundaries. However the GP registered population extends to the shaded areas.

● Why are we consulting?

This is the third public consultation that the CCG has run since it was formed in April 2013. By consulting, we believe we can have genuine two-way conversations with our residents when we are planning changes to services.

By hearing and listening to the views of the public about the services we plan and commission, we can learn to do things better.

During both previous consultations your views helped to influence us to change our proposals and we made different decisions as a result.

This consultation is your opportunity to have your say on the future shape of health services in Great Yarmouth and Waveney.

● So why do we want to make these changes?

We believe that we should be developing services to care for people in their communities because that is the best place for people to be. To do this, we need to have more services based there, closer to people's homes.

Our ambition is to provide care to people in their own homes or as close to their homes as possible.

We now also know that treating someone in a hospital bed is not always the best place for them to be. In particular older people who are kept in a hospital bed during treatment can lose their mobility and their independence. This can affect their overall health and increase their likelihood of having no option but to go into long term care in a residential or nursing home.

Obviously there are times when it is necessary and appropriate for people to be admitted to hospital and hospital beds will always be available for people who need them, when they need them. But where it is safe and appropriate to do so, we will try to ensure that people are cared for at home rather than having to go into hospital, and that is why we are developing community based services.

People don't really care which specific organisation is providing their health and care, they just want to receive a service that supports them to get better and remain as independent as possible. So we want our providers of health services to work more closely together with social care and voluntary services and of course patients and their carers. We know that people want to receive joined-up services that support them to get better and to remain as independent as possible.

We believe that by everyone working together we can cut out waste and maximise the care that our residents receive. We also want to take this further and have District Councils offering benefits and housing advice and County Councils to offer social care, all in a joined up way with healthcare services.

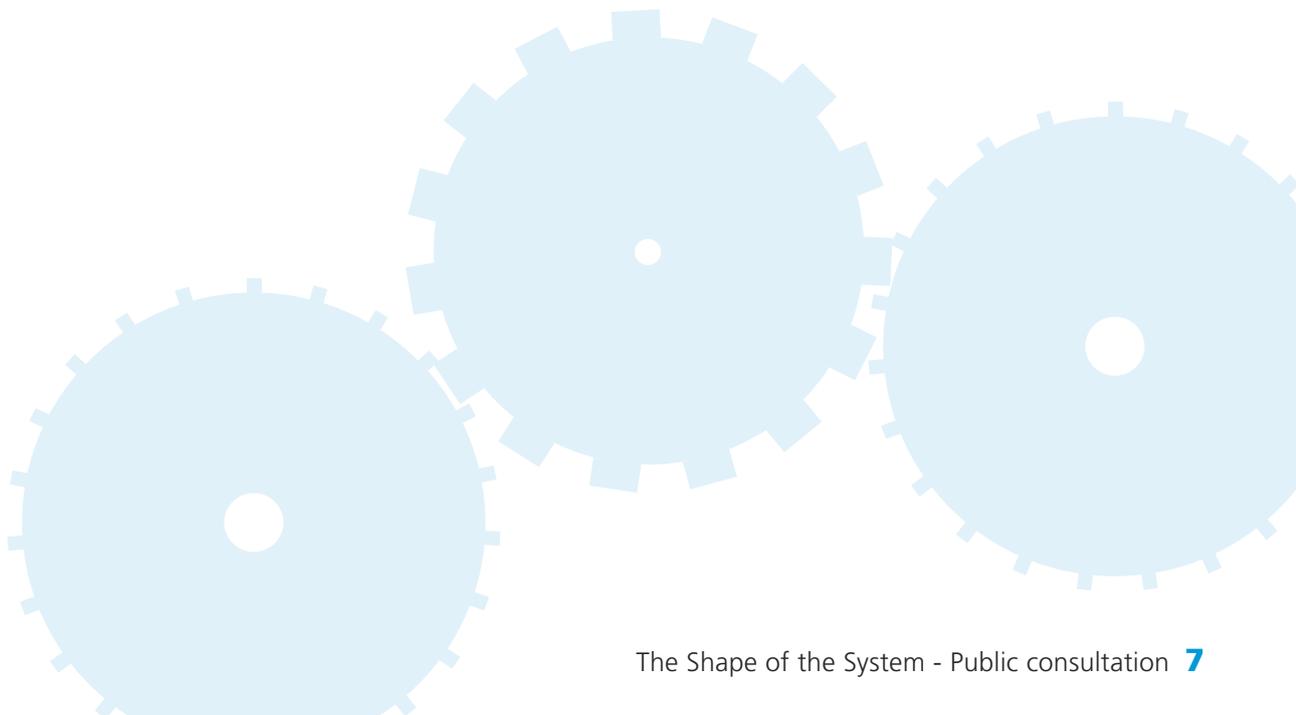


We are making these changes because we want:

- To care for people in the best place
- Services to be closer to people's homes
- Services to be joined up, responsive and flexible to patients' and families' needs
- Services to support our ageing population
- Services that can cope with the rising demand for health and social care
- Patients to receive healthcare delivered from modern buildings
- We want these buildings to be accessible
- Services that are affordable

We know that these changes will work

We have already tried this new model of care in Lowestoft. We have a new community hub called Kirkley Mill Health Centre from which we deliver a wide range of community services including an out of hospital team. This was after a full public consultation in Lowestoft where 67.8% of people who expressed a preference supported this new way of caring for patients. This team of health and social care professionals has helped more older people and people with long term health conditions to remain independent in their own homes and avoid going into hospital or ending up in long term care. Patient, family and carer satisfaction with the team is high - almost 90%. Emergency admissions of patients into a district general hospital from Lowestoft have reduced. This bucks the national trend. This is the model the CCG wants to see right across Great Yarmouth and Waveney.



What about staff?

This new way of working is not about reducing costs through job losses, but it will result in positive changes to the way local public sector staff work. Staff will work more flexibly with other public sector organisations and with services from the voluntary sector. We all serve the same patients, so it makes sense for us to do this as simply as possible, removing organisational barriers and providing better, joined up care for the people who most need it.

We know that it can be tough to recruit NHS staff, but we believe that this new way of working will help us to recruit the staff we need. In fact, staff members in the new team in Lowestoft are very enthusiastic about this different way of organising care for patients. And the proposals in this consultation are becoming well recognised as the best way to provide care across the country.





The Proposals

Proposal one: developing more community based services

We know that people are living longer. We know that for many people if they become ill the best place to be treated and given care is in their own homes where they can remain as independent and as healthy as possible. Healthcare services in Great Yarmouth and Waveney currently do not support this as well as they can so Proposal One is about introducing community based care with out of hospital teams and community hubs. To do this we will need to change the shape of health services to support people at home and in their own community better. This new system works alongside the healthcare already provided by your GP and community services.

This proposal is to develop more community based services by:

- **Introducing** out of hospital teams across the whole of Great Yarmouth and Waveney. Pilots are already in place in Lowestoft and in Great Yarmouth and the northern villages.
- **Supporting** the out of hospital teams with **NHS funded** 'beds with care' provided in local nursing and residential homes. These will provide short term care and treatment and help people recover and regain their independence, supported by professionals from the out of hospital teams.
- **Basing** the out of hospital teams in new community hubs across the area (see map on page five)

Out of hospital teams

An out of hospital team is a team of staff with health and social care skills that works 24 hours a day, seven days a week to help support people going through a crisis. The team will be able to react quickly and take referrals from health and other professionals to:



- Avoid a patient being admitted to a hospital bed in the first place
- If a patient is admitted, get the right support in place (often called 'rehabilitation') at home so they can get home sooner

The motto of the team is 'it's never not my job'. The team works closely with the patient's GP to give all the care a patient needs in their own home. Patients receive care which is designed to meet their individual needs. The team also has access to NHS 'beds with care' within a care home environment when a patient needs a little extra support.



Each team is made up of:

- A team leader
- Community nurses
- Social workers
- Physiotherapists
- Occupational therapists - these therapists are trained to support people whose health prevents them from carrying out everyday tasks and to help them remain independent
- Assistant practitioners – these are people who are trained to deliver health and social care to patients, supporting more specialist roles e.g. an occupational therapy assistant or an assistant practitioner in mental health care. They can also carry out less complicated assessments of patients' needs
- Health care assistants – these are generic workers who have been trained to deliver a wide range of health and social care tasks for patients e.g. taking bloods, assessing for a walking stick, carry out an exercise programme with a patient
- Administrative support

The out of hospital team will work very closely with all local GP practices, and every patient will continue to get their GP care from their own GP practice.

The out of hospital team will work very closely with specialist nurses and other specialist staff to make sure patients have access to this care when they need it e.g. heart failure nurses, podiatrists, respiratory nurses and palliative care nurses.

We also plan to have mental health workers based alongside this team to support wellbeing and recovery, and people in crisis.

We know out of hospital teams work because...

We have run an out of hospital team in Lowestoft for over a year. We have monitored their impact very closely, and we know that:

- 
- Emergency admissions of patients into a district general hospital from Lowestoft have reduced. This bucks the national trend
 - Because social care are part of the team, they get involved with patients sooner
 - Patient, family and carer satisfaction is high – almost 90%

- Patients feel very well supported because they can stay at home and maintain their independence
- Clinical reviews have shown that patients are getting the care they need at the right time in the right place, usually at home
- Staff on the team tell us that this is a very rewarding way to work with patients
- If a patient is admitted, they get home faster with better support in place

What are 'beds with care'?

Beds in this setting will be used when a patient needs more care than can be safely provided at home. This could be due to a worsening of an existing condition, as part of a rehabilitation pathway or to support palliative or end of life care. These beds will usually be in a residential or nursing home setting. The admission, monitoring and discharge of patients will be carried out by the out of hospital team, so there will be full nursing support.

Beds with care will be delivered to NHS standards of care and patients will be monitored by the out of hospital team. They will be in patient's communities with local medical and nursing support. GP Surgeries will work with the out of hospital team to provide medical care to patients and your GP will be kept fully informed of what is happening. This is a more modern and appropriate way of providing care. It provides better care for patients closer to the communities in which they and their families already live and it's a more cost effective model.

The CCG will ensure that these nursing and residential homes comply with the quality standards expected across the NHS.

The CCG believes that there will be increasing need for care home capacity in the area, and we commit to having enough beds with care to meet the demand.

An out of hospital team just like this is already working in Lowestoft with beds with care supporting them. The feedback has been very positive – you can read some patient stories on our website:

www.greatyarmouthandwaveneyccg.nhs.uk

These changes are about creating more community based services. To do this we want to develop 'community hubs'.

All about 'community hubs'

Hubs are local buildings where treatments and health consultations take place. They are bases for staff, where patients can be seen but also where staff will travel from to see patients in their own homes. These hubs will offer a modern environment for patient care, and for the teams who will provide the majority of out of hospital and community care.



The teams will focus on:

- Supporting patients and carers to prevent admission to hospital and support discharge back home
- Providing a much needed link between district general hospital care, community teams and your local GP

Some examples of community hubs that are already working really well in your area are the Shrublands site in Gorleston, the Sole Bay Health Centre in Reydon and the Kirkley Mill Health Centre in Lowestoft. The hubs link with existing services that are already valued in our communities like churches, community centres, dementia cafes and local community transport schemes.

Some of the benefits of community hubs are:

- Better access to lots of different services in the same place, closer to home
- Bases for teams from different organisations across public sector services and the voluntary sector to work closely together
- Some new, improved, energy efficient buildings, like Kirkley Mill in Lowestoft

We are bidding for money to build more new community hubs which will be cheaper to run.

These proposals offer more choice for patients. At the moment, patients who are very ill have to be admitted to hospital. This is because most of the time, current community teams and GP services do not have the capacity to support patients at home during a crisis. With new out of hospital teams, patients will be able to:



- Stay at home supported by the out of hospital team
- Where this isn't safe, be admitted to a bed with care close to their home
- Get more complex care in an intermediate care bed (see 'Beccles Hospital' page 14 for more details)
- Be admitted to an district general hospital bed only if they really need it

Proposal two: community hospitals

Community Hospitals have been used by health services for many years to support people in the local community. We know that where there are out of hospital teams the best place for care to be provided is at home. National and local evidence shows that when these teams are in place fewer community hospitals and general hospital beds are needed.

There will always be times when it's necessary and appropriate for people to be admitted to a district general or specialist hospital and we always have this type of hospital bed available. But where it is safe and appropriate to do so, we will try to care for people at home rather than have to go into hospital. Our out of hospital team in Lowestoft have already shown that, by providing better care at home, we can reduce the numbers of people needing to go into a hospital bed. Our plans show that if these teams are available across Great Yarmouth and Waveney, then fewer people will need to be admitted to hospital as services move out of the hospital and into the community.

This proposal is to:

- **Permanently close** the **GP community hospital beds** at Southwold, Patrick Stead, Northgate and All Hallows Hospitals and replace with out of hospital teams and local NHS 'beds with care', as set out in proposal one. GP community hospital beds are beds where the medical support is provided by GPs.
- **Change the use** of Beccles Hospital inpatient beds to provide an intermediate care facility for Great Yarmouth and Waveney (see 'Beccles Hospital' page 14 for more details).
- **Over time** reduce the numbers of people being admitted to the James Paget University Hospital as some services move into the community.

It's important to note that we can't have GP beds in community hospitals AND out of hospital teams. This is because we will use the money we spend now on staffing and keeping the GP beds in community hospitals open to set up and run the new out of hospital teams. We hope that staff working in the community hospitals now will become members of the new out of hospital teams. For these staff, training, education and upskilling will be provided to prepare them for this transition.

Looking at each site in more detail:

Northgate Hospital, Great Yarmouth (15 GP community beds only). The proposal is to close the 15 GP community beds downstairs in the Herbert Matthes building on the Northgate hospital site.

If these plans are approved, the 15 community beds could close from April 2016. Beds with care in local care homes will be used to support patients when needed.

Southwold Hospital, Southwold (12 GP beds). In 2014, outpatient clinics and therapy services were moved from Southwold Hospital to the new Sole Bay Health Centre. So if the beds are closed, there will be no more services operating from this site and the hospital building will be surplus to NHS requirements.

If these plans are approved, the 12 community beds could close from April 2016. There are plans to develop a new nursing home next to Sole Bay Health Centre. Beds in local care homes would be used to support patients when needed in the time between closing hospital beds and opening the new nursing home.

Patrick Stead Hospital, Halesworth (12 GP beds)

We are working closely with Halesworth Health to support their plans to develop a new nursing home on the Patrick Stead site. This is planned to open in late 2016 / early 2017. If these plans are approved, the hospital would be surplus to NHS requirements.

The GP beds in Patrick Stead Hospital could close in April 2016. Beds in local care homes would be used to support patients when needed in the time between closing hospital beds and opening the new nursing home.

All Hallows Hospital, Ditchingham (five GP beds)

If these plans are approved, these five beds could close from January 2016. Care of long stay patients at All Hallows hospital is not affected by this public consultation. People in Bungay and the surrounding villages will be able to access beds with care in local care homes, supported by the out of hospital team.

Beccles Hospital, Beccles (21 beds)

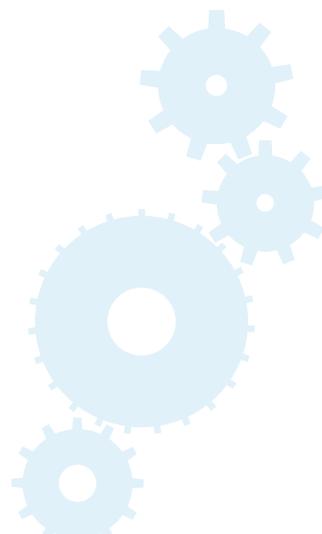
At Beccles Hospital, beds will stay open, but they will be used differently. More patients who need intermediate care across Great Yarmouth and Waveney will be looked after here. The traditional 'community hospital bed' services will change. Patients will be admitted through the out of hospital teams. Medical cover for these beds will be provided by local GPs.

Intermediate care is for patients who have longer term needs due to medical and/or social care issues which need to be sorted out before the patient can go home, like patients with:



- Complex end of life care needs
- Intravenous therapies or transfusions
- Care after complex cancer treatment
- Short term but intensive rehabilitation
- Some needs for periods of one to one support

These beds could be used differently from December 2015.



● How much will it all cost?

Over the past few years the CCG has been very successful in getting funding to improve healthcare buildings for patients in the Great Yarmouth and Waveney area. Some examples include the recent opening of the £6 million Kirkley Mill Health Centre in Lowestoft and the £5 million Sole Bay Health Centre in Reydon.

The CCG has put in a bid to NHS England to try and secure another £20.5 million to develop more new healthcare buildings for patients in Great Yarmouth and Waveney. However, our proposals are not dependent on our bid for this money being successful. We have contingency arrangements that would allow us to continue with our plans using existing NHS buildings.

Costs of the new services

Savings of up to £7.9 million in the costs of current services will be made through the closure of community hospitals and through fewer patients being admitted to the James Paget University Hospital. £3.6 million of these savings will be re-invested in setting up the new services described in this consultation - out of hospital teams and beds with care in nursing and residential homes, plus intermediate care beds in Beccles Hospital. This means that these plans will deliver a net saving every year of £4.3 million which will help the CCG meet its savings target set by NHS England for this year and next.



• Where can I get more information about this consultation?

If you want to find out more, please go to our website at www.greatyarmouthandwaveneyccg.nhs.uk

Here you can find lots of other useful documents including:

- Patient stories all about their experience of the out of hospital team
- Short three minute videos to explain why we are making these changes
- Letters of support
- Definitions of how the different types of beds will be used
- A full business case which sets out the clinical evidence and background to the proposals
- Information about how pre – consultation helped shape this document
- More information on money in the business case
- Equality impact assessments

• What happens next?

Throughout the consultation the CCG's Governing Body will be kept informed of how the consultation is progressing and of the comments received.

The final decisions relating to these proposals are expected to be taken by the CCG's Governing Body in November 2015. A copy of these decisions will be sent to all those who included their email address when they sent their views. It will also be published in full on the CCG website.

Will what I say make any difference?

Yes. This is your opportunity to let the CCG know your views. The CCG is aware that people may become anxious about the news that services available to them are going to change. We hope that by securing your involvement in the development of these proposals, and taking into account your views, we will build your confidence in the future of the services.

How can I give my views?

There are six ways you can provide us with your views:

1. **Complete the online version of the consultation questionnaire:**
www.greatyarmouthandwaveneyccg.nhs.uk
2. **Download the consultation feedback form from the CCG website:**
www.greatyarmouthandwaveneyccg.nhs.uk complete it and then email it to gywccg.your-views-matter@nhs.net (or mail to the freepost address below).
3. **Complete the questionnaire and post it to:**
Freepost RSUL-UGLK-JJRA
Shape of the system consultation
NHS Great Yarmouth and Waveney CCG
Beccles House
1 Common Lane North
Beccles NR34 9BN
4. **Give us your views in person by attending one of the public meetings we have set up. At these meetings you will also be able to ask questions about the proposals. Please note the doors will open to the public ten minutes before the meeting start time.**

Public meeting 1 – Stella Peskett Millennium Hall, Southwold	Wednesday, 10 June 2015 2pm to 4pm
Public meeting 2 – Room 3, Beccles House, Beccles	Thursday, 18 June 2015 6pm to 8pm
Public meeting 3 – The Kings Centre, Great Yarmouth	Monday, 6 July 2015 10am to 12 noon
Public meeting 4 – The Comfort Hotel, Great Yarmouth	Wednesday, 15 July 2015 6pm to 8pm
Public meeting 5 – The Cut, Halesworth	Tuesday, 7 July 2015 7pm to 9pm

5. **Write a letter and send it to the freepost address:**
Freepost RSUL-UGLK-JJRA
Shape of the system consultation
NHS Great Yarmouth and Waveney CCG
Beccles House
1 Common Lane North
Beccles NR34 9BN

6. Get involved on social media

As part of the consultation we are going to run a series of twitter chats for people who are unable to attend the consultation meetings. These will be available on twitter using the hashtag #shapeofthesystem on the following dates and times:

Friday 12 June – 2pm until 3 pm

Thursday 2 July – 7pm until 8 pm

Thursday 13 August – 10.30am until 12noon

• When do I have to make my comments by?

You can start making comments from 9am Wednesday 3 June 2015

The consultation closes at 5pm Tuesday 2 September 2015

Monitoring

This CCG is committed to the principle of ensuring effective consultation on these proposals. We will be following all current guidelines on public consultation. An independent academic will assist us by monitoring the consultation process and providing an independent analysis of the feedback we receive.

All partners involved in this consultation operate the NHS Complaints System. If you have any comments about this consultation process, please contact the Patient Advice and Liaison Service (PALS):

PALS

By telephone: 01502 719567

By email: GYWCCG.PALS@nhs.net

By post to:

**Complaints and PALS
NHS Great Yarmouth and Waveney CCG
Beccles House
1 Common Lane North
Beccles
Suffolk NR34 9BN**

Questionnaire

Shape of the System Public Consultation

1. Developing modern and sustainable health services in Great Yarmouth and Waveney

1. I am responding on behalf of:

- Myself A group or organisation

2. Please provide your postcode:

3. Name of group or organisation if applicable:

4. Who does the group or organisation represent if applicable?

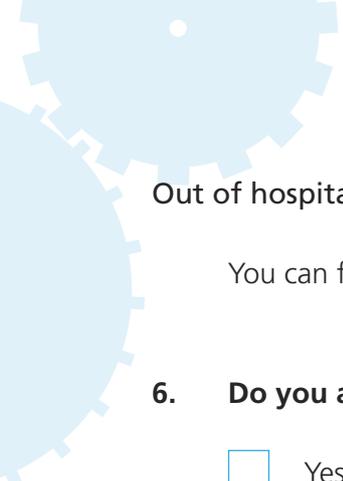
5. We want to make sure that you have the opportunity to fully understand the proposals in this consultation before commenting on them. Based on the information you have read in the consultation document, do you understand the two proposals?

- Yes No Unsure

2. Proposal One: developing more community based services

You can find out more about this proposal on page 9.

- Introducing out of hospital teams across the whole of Great Yarmouth and Waveney.
- Supporting out of hospital teams with NHS funded 'beds with care' provided in local nursing and residential homes.
- Basing the out of hospital teams in new community hubs across the area.



Out of hospital teams

You can find out more about out of hospital teams on page nine.

6. Do you agree with the proposal to introduce new out of hospital teams in the community?

Yes

No

Unable to say

Comments:

Beds with care

You can find out more about beds with care on page 11.

7. Do you agree with the proposal to provide 'beds with care' in a care home environment?

Yes

No

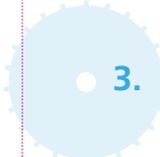
Unable to say

Comments:

Community hubs

You can find out more about community hubs on page 11.

8. Please give your views about this proposal here:



3. Proposal 2: community hospitals

You can find out more about this proposal on page 13.

9. Do you agree with the proposal to permanently close GP hospital beds at the following hospitals with the introduction of the out of hospital teams?

	Yes	No	Unable to say
Southwold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patrick Stead, Halesworth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Northgate, Great Yarmouth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Hallows hospital, Ditchingham	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Comments:

Southwold

Patrick Stead, Halesworth

Northgate, Great Yarmouth

All Hallows hospital, Ditchingham

11. We propose to change the use of Beccles Hospital inpatient beds to provide an intermediate care facility for Great Yarmouth and Waveney.

You can find out more about intermediate care beds on page 14.

Please give your views on this proposal here:



4. About You

12. I am

- | | | | |
|-----------------------------------|----------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Under 25 | <input type="checkbox"/> 25 - 34 | <input type="checkbox"/> 35 - 44 | <input type="checkbox"/> 45 - 54 |
| <input type="checkbox"/> 55 - 64 | <input type="checkbox"/> 65 - 75 | <input type="checkbox"/> 76 and over | <input type="checkbox"/> Prefer not to say |

13. How would you describe your sexual orientation?

- | | | |
|--|--|--|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Lesbian woman | <input type="checkbox"/> Gay man |
| <input type="checkbox"/> Bisexual | <input type="checkbox"/> Transgender | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Prefer not to say | | |

14. Which ethnic group do you consider yourself to belong to?

- | | |
|---|---|
| <input type="checkbox"/> White British | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Mixed White and Black Caribbean | <input type="checkbox"/> Mixed White and Black African |
| <input type="checkbox"/> Mixed White and Asian | <input type="checkbox"/> Asian or Asian British Indian |
| <input type="checkbox"/> Asian or Asian British Pakistani | <input type="checkbox"/> Asian or Asian British Bangladeshi |
| <input type="checkbox"/> Black or Black British Caribbean | <input type="checkbox"/> Black or Black British African |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Other (please specify in the box below): | |

15. Do you consider yourself to have a disability?

(i.e. 'A physical or mental health problem which has substantial and long term adverse effects on a person's ability to carry out normal day to day activities')

- Yes No Prefer not to say

HealthEast
NHS Great Yarmouth and Waveney CCG
Beccles House
1 Common Lane North
Beccles
Suffolk NR34 9BN

Tel: 01502 719500

Website: www.greatyarmouthandwaveneyccg.nhs.uk



If you would like a copy of this publication in another format such as Braille, large print, audio or in another language please contact NHS Great Yarmouth and Waveney CCG on Tel: 01502 718629

Only one of these needs treatment at the Emergency Department (A&E)



Cut finger

Earache

Severe chest pain

Flu

Morning after pill

Minor sports injury

James Paget University Hospitals NHS Foundation Trust,
Lowestoft Road, Gorleston, Great Yarmouth, Norfolk NR31 6LA

Walk-In Centre is at Greyfriars Health Centre in Phoenix House,
Howard Street South, Great Yarmouth open from 8am to 8pm
every day. Cutlers Hill Surgery, Halesworth. Tel 01985 874518.
Beccles Hospital, Beccles. Tel 01502 719821

See your own GP or Dentist if you have an illness or injury
that will not go away. You can access the out of hours
service by calling 111.

Find your local pharmacy on NHS Choices
www.nhs.uk

Available 24 hrs 365 days a year.
Call 111 for advice.

Self-care is the best choice to treat very
minor illnesses, injuries and ailments.

999 (A&E)

Minor Injuries

GP, Out of Hours Service
or Dental Service

Pharmacist

NHS 111

Self-Care

