

Proposals for same-day healthcare in Rutland

Briefing paper April 2025

Proposals for same-day healthcare in Rutland

Acronyms

HWR	Healthwatch Rutland
ICB	Integrated Care Board
LLR	Leicester, Leicestershire and Rutland
MIMI	Minor Illnesses and Minor Injuries
MIU	Minor Injuries Unit
NHS	National Health Service
NHSE	National Health Service England
RCC	Rutland County Council
RMH	Rutland Memorial Hospital
SDA	Same Day Access

Introduction

This briefing paper has been prompted by concerns raised by local residents since the recent consultation on proposals for changes to urgent care services in Oakham. These services operate at different times, in the same facilities at Rutland Memorial Hospital.

The concerns raised by the public are:

- The proposals have not yet been fully scrutinised by Rutland County Council (RCC) Strategic Overview and Scrutiny Committee.
- There has been a lack of transparency and choice for the public.
- There is a 25% reduction in the operational hours that was not clearly stated during the consultation.

To examine these concerns, this paper details the proposals and draws on the ICB Same Day Access Business Case¹ and relevant Government and NHSE documents. It sets out the proposed changes and Healthwatch Rutland (HWR) representations of the public voice to the Integrated Care Board (ICB) in the context section. This is followed by setting out public consultation policies and responding to the concerns raised with HWR since the consultation survey was closed. The conclusion summarises the discussions and makes suggestions for future public engagement.

1. Context

1.1 Proposed services

The proposed services for same-day healthcare in Oakham include:

- Upgrades to the premises at Rutland Memorial Hospital
- Combining the separately operating UCC and MIU into a Minor Illness and Minor Injuries service with altered opening hours
- Patient access to be 'primarily appointment based' with 'minimal walk-in capacity' (LLR ICB Same Day Access Business Case)
- Availability of X-ray will continue on two days per week and discussions are being held to extend this

The current and suggested service offers for same-day care at RMH are shown in the table below:

¹ LLR ICB SDA Business Case accessed 3/04/2025 at:
<https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/Rutland-SDA-Business-Case-DRAFT-V6.pdf>

Service name	Hours per week	Operating times	Patient access
Current service offer			
Minor Injuries Unit	42.5	10.00–18.30	By appointment and walk-in
Urgent Care Centre	32.5	Mon–Fri 18.30–21.00 weekends and bank holidays 09.00–19.00	By appointment and walk-in
Proposed changes			
Minor Illness and Minor Injury clinic	56	13.00–21.00 7 days per week	Appointment based, minimal walk-in: “talk before you walk”

Table 1 Current and proposed changes to same day access services at Rutland Memorial Hospital (LLR ICB SDA Business Case)

In summary the proposed changes mean:

- Opening times would be 1pm to 9pm, 7 days per week. This is a reduction from 75 hours per week to 56 hours per week in overall clinic hours.
- Minor Injuries appointment availability would increase from 42.5 hours per week to 56 hours per week.
- The Minor Illness appointment availability would increase from 32.5 hours per week to 56 hours per week.
- The X-ray availability of two days per week would remain as it currently operates – on Wednesdays and Thursdays.

ICB modelling suggests that better control of patient flows through an appointment system (booked through the GP practice or NHS 111) will mitigate the reduced overall opening hours and increase both efficiency and patient throughput at a time when all NHS services have constrained resources and face an ever-increasing public need for care (LLR ICB SDA Business Case). The Business Case further states that the combined activity in 2023/2024 of the UCC and MIU was 6785 patient episodes (p25). The forecast activity for 2025/2026 is 7644 patient episodes (p46).

1.2 Healthwatch Rutland input

The Leicester, Leicestershire and Rutland (LLR) ICB has reviewed provision of same day (not life-threatening) urgent care across the LLR Integrated Care System. This has involved considering closures of some urgent care centres

and the development of facilities elsewhere. Healthwatch Rutland was involved in the initial discussions in order to represent the public voice where we argued for the retention of a facility, open for 7 days a week, in Rutland. HWR was not involved in the development of the clinical model proposals.

To inform and evidence the need for a comprehensive service in the county, HWR has completed Enter and View exercises at the following urgent care services used by Rutland residents:

- [Oakham Minor Injuries Unit \(MIU\)](#)
- [Oakham Urgent Care Centre \(UCC\)](#)
- [Stamford Minor Injuries Unit](#)
- [Corby Urgent Care Centre](#)

HWR widely publicised the ICB consultation, distributed hard copies and collated comments about the proposed changes from Rutland residents via its website and through face-to-face engagement. This feedback was included in the [HWR formal response](#) to the consultation. Since the consultation closed, HWR has received representations from members of the public asking for their further concerns to be considered. These include:

- The proposals have not yet been fully scrutinised by Rutland County Council (RCC) Strategic Overview and Scrutiny Committee
- There has been a lack of transparency and choice for the public
- There is a 25% reduction in the operational hours that was not clearly stated during the consultation

2. Addressing Public Concerns

2.1 Legal duties and statutory guidance

There are legal duties and guidance for NHS commissioners and providers to follow when proposing substantial changes. However, there is no legal definition of 'substantial' service change but it is broadly considered as a change in geographical area for the delivery of services or changes in the way

that existing services are delivered². But some duties also apply when there is a perception by patients of a change in services³.

The Government stipulates four tests to be met when services are to be changed and if there are no bed closures involved⁴:

- Strong public and patient engagement.
- Consistency with current and prospective need for patient choice.
- Clear, clinical evidence base.
- Support for proposals from clinical commissioners.

2.2 Relevant ICB documents and information

The ICB published the following documents and information to support the consultation:

- *The Consultation Document: 'Improving access to health services in Rutland where treatment is needed on the same day'*⁵ gives an overview of the proposals for same day access to care in Rutland and the survey. For UCC and MUI specifically, the public were asked 'to what extent [they] agree or disagree' with (pp10-12):
 - a) The combining of minor illness and minor injury services into a single clinic
 - b) The proposed opening hours
 - c) The provision of an X-ray facility on two days a week (Wednesday and Thursday)
 - d) Booking appointments through their GP or NHS 111

For each question, free text comments were also invited.

This Consultation Document was widely advertised across all local media and organisations and was available in hard copy, on line and in 'easy read' format. Within the questionnaire there is an obvious 'more information' link to

² NHSE (2018) *Planning, Assuring and Delivering Service Change for Patients*
<https://www.england.nhs.uk/wp-content/uploads/2018/03/planning-assuring-delivering-service-change-v6-1.pdf>

³ https://www.capsticks.com/assets/NHSEI_legislation_for_service_change_guide.pdf

⁴ https://www.capsticks.com/assets/NHSEI_legislation_for_service_change_guide.pdf
<https://www.england.nhs.uk/wp-content/uploads/2018/03/planning-assuring-delivering-service-change-v6-1.pdf>

⁵ https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/004_06_Rutland-Consultation-Questionnaire-FINAL.pdf

the document: *'Proposals to improve access to health services in Rutland where treatment is needed on the same day.'*⁶ This web page provides almost identical contextual information to the Consultation Document but, towards the end, within a list of 'Key Documents', there is a link to the Business Case.

However, members of the public who accessed the consultation information in hardcopy only would have had greater difficulty in accessing the additional details contained therein and in the following document:

- The *Business Case*, which has not been widely promoted but contains much detail including: the national, LLR and Rutland policy framework; geographical context and current urgent care situation; the Rutland Memorial Hospital physical estate; and detailed public and local authority engagement activities.

Other details also included: travel in Rutland and patient access to health care; digital exclusion; the environment; community pharmacy provision; population growth and Rutland demography; rurality and the impact on health; the COVID-19 impact; the ICB Strategy for improving health and care services for patients and their outcomes; alternative options that have been discarded; the Urgent Care footfall data from the recent past and future use; benefits and disbenefits for the public; and other urgent care facilities in neighbouring counties.

HWR suggests that:

1. Many people may not know what a business case might involve and it is not immediately clear for the public that further contextual and service utilisation details were included within it.
2. The need to click through several sub-levels on the consultation information web pages may have been a deterrent for the public.
3. The business case is long, full of technical terminology and not easily read and understood by the public. Those who do not use digital technology would not have found it easy to access the Business Case for greater detail.
4. However, our view is that the ICB Business Case does detail much of the information the public want, but feel to be missing.

⁶ <https://leicesterleicestershireandrutland.icb.nhs.uk/be-involved/rutland-same-day-access-consultation/#:~:text=About%20the%20Public%20Consultation,-The%20NHS%20in&text=The%20proposals%20would%20improve%20services,week%20in%20Rutland%20Memorial%20Hospital.>

2.3 Local Authority Consultation

The guidance documents reviewed by HWR, including, specifically, the Department of Health and Social Care '*Local Authority Health Scrutiny*⁷', unanimously advise commissioners and providers to inform their Local Authorities of the service changes they are planning. There is little agreement on the timing of this provision of information.

For example, the document *Legal duties for service change: a guide prepared for NHSE and Improvement Primary Care and System*⁸ suggests that public consultation would be 'normally concluded' before consulting with the Local authority.

On the other hand, *Planning, assuring and delivering service change for patients v3 March 2018 (NHSE)*⁹ suggests earlier discussions.

HWR has found evidence of the following communications between the ICB and Rutland County Council:

- The Chief Executive of Rutland County Council approved the Business Case in October 2024 (p31)¹⁰.
- Proposals for changes to the same day access service in Rutland were submitted to the Local Authority Health and Wellbeing Board on 21/11/2025. These were considered and approved and the minutes were recorded and formally approved on 14/1/2025¹¹.
- The RCC Scrutiny Committee was informed of proposed same-day access changes on 28/11/2024¹². The Chair of RCC Scrutiny Committee has subsequently verbally advised HWR that the final proposal for the changes will be fully scrutinised when available.

⁷ DHSC (2024) *Local Authority Health Scrutiny* <https://www.gov.uk/government/publications/advice-to-local-authorities-on-scrutinising-health-services/local-authority-health-scrutiny>

⁸ https://www.capsticks.com/assets/NHSEI_legislation_for_service_change_guide.pdf

⁹ <https://www.england.nhs.uk/wp-content/uploads/2018/03/planning-assuring-delivering-service-change-v6-1.pdf>

¹⁰ <https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/Rutland-SDA-Business-Case-DRAFT-V6.pdf>

¹¹ <https://rutlandcounty.moderngov.co.uk/documents/g2950/Public%20reports%20pack%2014th-Jan-2025%2014.00%20Rutland%20Health%20and%20Wellbeing%20Board.pdf?T=10>

¹² Agenda and reports pack *Rutland Same Day Access Focus 2* (28/11/2025)

<https://rutlandcounty.moderngov.co.uk/documents/g2945/Public%20reports%20pack%2028th-Nov-2024%2019.00%20Strategic%20Overview%20and%20Scrutiny%20Committee.pdf?T=10>

- The ICB provided a verbal update to the RCC Health and Wellbeing Board on 1/4/2025 stating: The survey responses are being independently analysed, with results expected at the end of April 2025; there appears to be 4 main themes emerging: the reduction in opening hours; the 2 day only X-ray facility; the move to primarily booked appointments; concerns about the need to book an appointment via NHS 111. The consultation process should not be considered as a referendum (meeting minutes not yet available).

2.4 Public consultation

When proposing service changes, NHS commissioners and providers have a statutory duty to engage the public at all stages of the planning, assuring and delivering of them in order to hear about, be influenced by and understand the public's opinions, experiences and the impacts they foresee for themselves¹³. It is not a referendum which is defined by the UK Government as: *'[W]hen a question is decided by putting it to a public vote'¹⁴*.

It is advised that all public consultations abide by the following '4 Gunning Principles'¹⁵:

1. The consultation must take place when the proposal is still at a formative stage
2. There is sufficient information and reasons must be put forward for the proposal to allow for intelligent consideration give intelligent consideration and response
3. There is adequate time for consideration and response
4. The product of consultation must be conscientiously taken into account

The ICB survey ran from January to March 2025.

2.5 Responding to the concerns raised by the public since the Consultation survey closed

• Comments on the lack of RCC Overview and Scrutiny Committee involvement:

¹³ https://www.england.nhs.uk/wp-content/uploads/2018/03/B0595_addendum-to-planning-assuring-and-delivering-service-change-for-patients_may-2022.pdf

¹⁴ <https://www.parliament.uk/site-information/glossary/referendum/>

¹⁵ <https://www.england.nhs.uk/wp-content/uploads/2017/05/patient-and-public-participation-guidance.pdf>

Health Overview and Scrutiny appears to have died in Rutland,

I think I have been blindsided or maybe Scrutiny has been hoodwinked. I had looked at a year's worth of Agenda items, nothing to suggest it had been looked at in the agendas [...] [N]ow I see they were consulted – it was stuck in as item 2 on a presentation on the Joint Health and Well-being Strategy on [November] 28. It appears that it was a presentation on some fairly low-key changes. I would still contend that it was slid by Scrutiny rather than brought to them as a statutory consultee but it is a get out clause for the ICB

'This [Joint Health Overview and Scrutiny Committee] is a standing Joint Committee of Leicester City Council, Leicestershire County Council and Rutland County Council which meets to scrutinise health issues and consultations which have an impact on the whole area of Leicester, Leicestershire and Rutland. As such I would NOT expect the joint committee to consider the proposal unless it forms part of a larger strategy/change of service delivery across the whole of LLR.

As the comment above suggests, the proposal for change was not a separate item on the agenda for the Scrutiny Committee meeting. It was included within Agenda Item 12 'Health and Wellbeing Strategy Update' and included in a wider presentation, with the subtitle 'Rutland Same Day Access – Focus 2'¹⁶ with little detail about changes to the UCC and MIU. Likewise, the minutes suggest there was discussion about the ICB communications involved in the (then) forthcoming consultation and little interrogation of the proposals for the UCC and MIU.

• Comments on a lack of transparency and choice for the public

[The proposal] constitutes a major service change which needs to follow due legal process that has not been transparently communicated to the public

The proposal contains substantial drawbacks which have not been clearly articulated [...], The effective closure of the Urgent Treatment Centre as it

¹⁶ Rutland County Council Strategic Overview and Scrutiny Committee (28/11/2024) *Agenda and Reports Pack* <https://rutlandcounty.moderngov.co.uk/documents/g2945/Public%20reports%20pack%2028th-Nov-2024%2019.00%20Strategic%20Overview%20and%20Scrutiny%20Committee.pdf?T=10>

*currently operates should be explicitly acknowledged and other options
openly discussed with the public*

Most of the detail pertinent to the above concerns, including discounted options, is contained within the less publicly-promoted and less accessible ICB Business Case and not in the public-facing and widely promoted consultation document, 'Improving access to health services in Rutland where treatment is needed on the same day'¹⁷.

• Comments that there is a 25% reduction in the operational hours that was not clearly stated during the consultation

The proposed reduction from 75 hours to 56 hours per week represents a 25% decrease in service availability, with no provision between 9:00 pm at night and 1:00 pm the following afternoon.

The consultation document claims efficiency gains will be made through an appointment-only system, yet this shift prioritises financial efficiency over patient access. Reducing hours significantly limits same-day access, particularly for urgent cases arising outside of new operating times (1pm-9pm)

The two main disbenefits of the proposal were not highlighted to the panel. There was no mention of a 25% reduction in hours and there is little information about changing to all-appointment system.

There was no mention of a 25% reduction in hours and there is little information about changing to all Appointment system.

The consultation document states: "Although opening hours would be slightly reduced under these proposals, we would increase the number of appointments offered from 6,785 to 7,644 per year. This would be possible due to providing one centralised service more efficiently than two. (p5)"

¹⁷ https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/004_06_Rutland-Consultation-Questionnaire-FINAL.pdf

Elsewhere the Consultation Document provides current opening times of both UCC and MIU and a proposed service delivery for Minor Illness and Minor Injuries of 8 hours per day. The opening times are not explicitly stated as 75 hours per week currently, with the proposal for 56 hours per week. This is a 25% reduction. ICB modelling suggests greater efficiency by using a primarily booked appointment system, with 'minimal walk-in' resulting in 859 more appointments each year (16.5 appointments per week, 2.4 per day) for combined services.

3. Conclusion

Throughout this paper we have drawn on the relevance of the business case and the greater depth of detail it contains. In response to the comments we have received from the public since the closure of the consultation and after more in-depth research, HWR concludes that:

- The Local Authority has been kept informed of the developing plans.
- The developing plans have considered the public voice as represented and informed in the early stages by HWR and other local organisations and the ICB has carried out a public consultation as required.
- Public engagement has taken place but with only 'overview' information readily available and easily accessible in the consultation document. The Business Case is a lengthy document which is not written with the public in mind and not well promoted as a source of detailed information. Also, members of the public accessing consultation information in hardcopy only, might have experienced difficulty in accessing the further detail within the Business Case. This has led to criticisms of lack of transparency, inadequate attention to due processes and lack of trust.
- The RCC Strategic Overview and Scrutiny Committee was consulted in November 2024 but the public notification of this as an agenda item was not transparent and, according to the minutes, there were no or limited discussions about proposed changes to the UCC and MIU specifically. The Chair of the Scrutiny Committee has advised that the proposal will be further scrutinised.
- The public perception of lack of transparency is because much of the more in-depth detail is contained within the business case. This was not easily accessible, might not have been interpreted as a document that would contain the detail Rutland people were seeking and is a lengthy read with a lot of technical detail.

- The 25% reduction in hours was not explicitly stated in the consultation document.
- Taking the business case into account, the first 3 Gunning Principles of Public Consultation have been met in principle although this has been compromised for some members of the public by the obscurity of the business case.
- It is hoped that the 4th principle of conscientiously taking into account the results of the consultation will be delivered.

Therefore, HWR makes the following suggestions:

- As part of the publication of results of the consultation, a clear explanation of the proposed changes should be provided, accompanied by the detailed utilisation and modelling data that went into formulating the proposals.
- The additional concerns raised by the public after the closure of the consultation should be taken into account and addressed within any analysis and reporting.
- In order to allow the public transparency and the opportunity to engage on the issues, all future ICB and Local Authority meetings in public concerning the same-day healthcare developments should be addressed as specific agenda items.

Noted by HWR since the closure of the consultation

1. On 31/3/2025 RCC introduced the first stage of a Call Connect Public Transport service connecting some of the more remote Rutland villages to Oakham and Melton Mowbray. This service operates until 7pm Monday-Friday and 6pm on Saturdays. Other public buses run infrequently in the evenings and weekends. This new public bus service, and some existing established bus routes, therefore, would not run concurrently with the proposed opening hours of the Minor Illness and Minor Injuries service and risks claims of creating more rural health inequalities in terms of access to health care.
2. There are no proposals for changes to the 2 days per week X-ray service (Wednesdays and Thursdays 08.30 to 16.30). Therefore, these facilities would not be running completely concurrently with MIMI opening hours of 13.00 – 21.00hrs.

Appendix 1: References

LLR ICB (2025) *Improving access to health services in Rutland where treatment is needed on the same day. A public consultation on proposed improvements*
https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/004_06_Rutland-Consultation-Questionnaire-FINAL.pdf

LLR ICB *Proposals to improve access to health services in Rutland where treatment is needed on the same day.*
<https://leicesterleicestershireandrutland.icb.nhs.uk/be-involved/rutland-same-day-access-consultation/#:~:text=About%20the%20Public%20Consultation,-The%20NHS%20in&text=The%20proposals%20would%20improve%20services,we ek%20in%20Rutland%20Memorial%20Hospital.>

LLR ICB SDA Business Case accessed 3/04/2025 at:
<https://leicesterleicestershireandrutland.icb.nhs.uk/wp-content/uploads/2025/01/Rutland-SDA-Business-Case-DRAFT-V6.pdf>

NHSE (2020) *Legal Duties for Service Change: A Guide* prepared for NHSE and Improvement Primary Care and System
https://www.capsticks.com/assets/NHSE/legalisation_for_service_change_guide.pdf

NHSE (2018) *Planning, Assuring and Delivering Service Change for Patients v 3*
<https://www.england.nhs.uk/wp-content/uploads/2018/03/planning-assuring-delivering-service-change-v6-1.pdf>

NHSE (no date) *Patient and public participation in commissioning health care: Statutory guidance for clinical commissioning groups and NHS England*
<https://www.england.nhs.uk/wp-content/uploads/2017/05/patient-and-public-participation-guidance.pdf>

NHSE (2018) *Addendum to Planning, Assuring and Delivering Service Change for Patients v 3*

https://www.england.nhs.uk/wp-content/uploads/2018/03/B0595_addendum-to-planning-assuring-and-delivering-service-change-for-patients_may-2022.pdf

UK Parliament 'Referendum' <https://www.parliament.uk/site-information/glossary/referendum/>

NHS England and Improvement (2020) *Legal duties for service change: a guide for those considering, and involved in, NHS service change*
https://www.capsticks.com/assets/NHSEI_legislation_for_service_change_guide.pdf

Rutland County Council (2024) Agenda and reports pack *Rutland Same Day Access Focus 2* (28/11/2025)
<https://rutlandcounty.moderngov.co.uk/documents/g2945/Public%20reports%20pack%2028th-Nov-2024%2019.00%20Strategic%20Overview%20and%20Scrutiny%20Committee.pdf?T=10>

Rutland County Council (January 2025) *Minutes of the Meeting of the Rutland Health and Wellbeing Board held in the Teams on Thursday 21st November 2024 at 3pm.*
<https://rutlandcounty.moderngov.co.uk/documents/g2950/Public%20reports%20pack%2014th-Jan-2025%2014.00%20Rutland%20Health%20and%20Wellbeing%20Board.pdf?T=1>