



Improving Healthcare Together 2020 to 2030

Urgent treatment centres

What is the difference between an urgent treatment centre (UTC) and an emergency department (ED)?

Urgent treatment centres are where you should go if you need urgent medical attention, but you are not in a life-threatening situation.

Under our proposals, all of the UTCs would be open 24 hours a day, 365 days of the year.

They would be able to diagnose and treat many of the most common injuries and illnesses that people go to an emergency department (also known as casualty or A&E) for.

You would be referred to a UTC by NHS 111 or by a GP. You would also be able to just turn up and walk in.

Conditions that would be treated at the UTCs include:

- sprains and strains
- minor head injuries
- cuts and grazes
- bites and stings
- minor scalds and burns
- ear and throat infections
- skin infections and rashes
- eye problems
- coughs and colds
- high temperatures in adults or children
- abdominal pain, and
- vomiting and diarrhoea.



UTCs provide services to meet patients' urgent care needs within a local setting. The services would be provided by senior clinicians, with access to specialist doctors and specialist services. This would make sure you were treated in the right place at the right time and by the right people for your condition.

Under our proposals, most of your urgent care needs would continue to be met at your local hospital, in the UTC. There would be a UTC at Epsom Hospital and St Helier Hospital, and also at Sutton Hospital if that is chosen as the location for the specialist emergency care hospital.

Emergency departments deal with genuine life-threatening emergencies, such as:

- loss of consciousness
- acute confused state and fits that are not stopping
- chest pain
- breathing difficulties
- severe bleeding that cannot be stopped, and
- severe allergic reactions.

Under our proposals, the emergency department would be at the new specialist emergency care hospital, which could be built at any one of the three hospital sites – Epsom, St Helier or Sutton. Providing this service at one central location for people who are very sick or who are at risk of becoming very ill would provide better outcomes for patients as there would be senior clinicians on-site to make decisions about their care more quickly. The South West London Elective Orthopaedic Centre (SWLEOC) would still be based at Epsom Hospital, and kidney dialysis services would stay at St Helier Hospital.

What services would be provided at a UTC?

National guidance sets out the minimum standards (which came into effect in December 2019) that a UTC must meet, including standards relating to access, diagnostics, staffing, and transferring patients to other hospitals. We have considered these standards and believe that we should provide services that go beyond the national guidelines. We would develop the services that are already in place at Epsom Hospital and St Helier Hospital to provide fully equipped UTCs. Under our proposals, there would be experienced staff, services and tests available to all patients at the UTCs.

At the UTCs, you would have access to specialist care, knowledge and advice, with the aim of getting you home and not having to stay in hospital unnecessarily. We would use our experienced clinicians in this local setting to make sure people receive joined-up care, and would have links for caring for people in the community and improving resources for caring for people in their own home.

You would use the UTC nearest to you, with experienced clinicians available to provide care locally without needing to go to the emergency department.

If you needed urgent medical attention but were not in a life-threatening situation

Epsom Hospital and St Helier Hospital would both have a UTC that would be open 24 hours a day, 365 days of the year. If the new specialist emergency care hospital were built at Sutton Hospital, there would be another UTC (also open 24 hours a day, 365 days of the year).

The UTCs would be staffed by doctors and emergency nurses. You would also go to the UTCs for X-rays and blood tests. You would be able to walk in, without an appointment, or you could be referred by NHS 111, your own GP or a different health or care professional.

All UTCs would have clear processes in place if staff assessed that you needed treatment at an emergency department rather than at the UTC. In this situation, you would be taken to the specialist emergency care hospital by ambulance.

If you went to the UTC but needed treatment at the specialist emergency care hospital

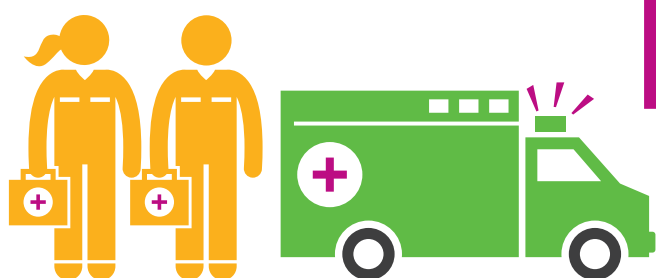
At the UTC there would be experienced clinicians who would assess and manage your condition while making arrangements for you to be transferred by ambulance to the specialist emergency care hospital. This process is already in place for patients at Epsom who need emergency surgery at St Helier.

If you needed emergency surgery

If you needed emergency surgery you would be taken to the specialist emergency care hospital by ambulance. Here, specialists would be available to provide you with the specialist care you needed.

Where would ambulances go?

Ambulances would take you to the most appropriate place for you to receive the care you needed. This would be the hospital which had the specialist doctors and nurses needed to treat your illness, and so would not always be the hospital nearest to you. If you needed the services provided in an emergency department, you would be taken to the specialist emergency care hospital. Otherwise, you would be better cared for and treated in a local UTC. This already happens, as ambulance staff can assess and treat patients, make sure their condition is stable, and make sure they get to the right place to receive the care they need.



Quality care
24 hours a day,
365 days of the year

