

Paper to the Health and Social Wellbeing Overview and Scrutiny Commission
Wards: All

12th July 2019

**MODALITY PARTNERSHIP
RELOCATION AND CONSOLIDATION OF GP SERVICES -
OUTCOME OF NHS HULL CCG PRIMARY CARE COMMISSIONING COMMITTEE**

1 PURPOSE

The purpose of this report is to provide the background and context to the decision of the NHS Hull CCG Primary Care Commissioning Committee held on 28th June in relation to the consolidation and relocation of services within GP practices within the Modality Partnership in Hull and specifically the future of Faith House Surgery.

In so doing, particular regard is given under section 4.3 of the report to the serious concerns that were raised about Modality Partnership Hull being able to sustain safe services to patients in the future. These concerns were within the context of a large number of recent GP retirements, departures and reduction in hours of other GPs within Modality Partnership Hull that came to the attention of the Committee at its meeting. Whilst the Partnership has taken a number of proactive measures to maintain services across all their sites to date, further imminent departures were reported to the meeting which raised concerns about the ability of them to continue to do so moving forward.

Regard was given by the Committee to the patient views as articulated through the engagement work undertaken by the Modality Partnership Hull. The meeting also noted the findings of the Partnership from its engagement work, including the concerns raised by patients, and the actions outlined by them for ongoing engagement with their patients in the light of these concerns.

Committee Members recognised the importance of timely and candid discussion with Overview and Scrutiny Commission Members on the emerging urgent clinical safety implications for Modality Partnership Hull. Whilst prior dialogue with the Commission was the ideal preference of the Committee, it was equally conscious of being reported that a further two GP partners were retiring from Modality Partnership Hull in the coming weeks and, as such, it

concluded on balance to take an immediate decision to support the proposals on grounds of patient safety.

2 BACKGROUND

In 2018 Modality Partnership Hull undertook a review of service delivery at three of their surgery sites: Faith House on Beverley Road, Newland Group Practice within Alexandra Health Centre on Alexandra Road and New Hall Surgery on Cottingham Road. The review looked at the current estate from which services are provided and the workforce that is available to deliver the services, and as such identified that the consolidation of services across two sites offered an opportunity to deliver significant benefits to patients as follows:

- Access to a broader range of clinical skills and staff appropriate to deal with varied patient needs e.g. Clinical Pharmacist, Nurse Practitioners, Physician Associates;
- Access to a wider range of services e.g. NHS Health Checks, Long Acting Reversible Contraception (LARC) Services;
- Service provision in modern, purpose built premises that are fully accessible and that offer facilities for service development in the future;
- Wider choice of access; all patients will initially be able to make appointments at New Hall and Newland, and ultimately at Springhead and Diadem Medical Practices as well.

The outcome of the review was that the Modality Partnership Hull was proposing to consolidate primary care medical services onto two of the three sites. Faith House Surgery, occupying a converted Victorian townhouse was identified as potentially the least suitable due to its deteriorating condition and limited ability for redevelopment and expansion. This assessment of unsuitability for long term future provision of primary medical care services had been confirmed by estate review work undertaken on behalf of the CCG by Citycare.

3 ENGAGEMENT APPROACH

It was recognised that proactive involvement and engagement would be required throughout this process and the Modality Partnership Hull would lead on the development and execution of the engagement plan, with advice and support from the CCG Communications and Engagement Team. Best practice advice has been sought via the Consultation Institute, and it was felt that a robust, open and transparent engagement with staff, stakeholders and patients may be an appropriate approach. The November 2018 Health and Social Wellbeing Overview and Scrutiny Commission received a report in relation to the proposed changes and specifically the approach to engagement that was to be undertaken. The Commission welcomed the intention to engage with service users as part of the remodelling process but highlighted the need for effective engagement to involve as many service users as possible.

A case for change document was developed setting out the local context including the key challenges for delivery of primary care and in particular those facing the three practices in the scope of the proposed estate changes. This document supported discussion and wider debate with public, patients and staff about the proposed changes and was shared through a variety of engagement networks, including Patient Participation Groups in the three practices, and via local Healthwatch and other voluntary and community sector partners.

A number of local engagement meetings/drop in sessions were convened to allow people to find out what the possible changes mean and give them a chance to share their views. The sessions were advertised to patients through a number of channels such as posters, text messages and in the local media.

Alongside the case for change document a short survey was produced so that patients who may not be able to attend the events, or prefer not to attend events, could have their views heard. The survey enabled people to respond to the challenges set out in the case for change with their ideas, issues and concerns. Any equalities considerations were captured through an Equality Impact Assessment that was completed at the outset and updated throughout the engagement process.

The results of the engagement exercise were collated into a report which was presented to the June 2019 Health and Social Wellbeing Overview and Scrutiny Commission. The following were the actions captured at the meeting:

- a) The Commission noted the findings of the engagement exercise on the consolidation of patient services and potential closure of Faith House practice;
- b) The Commission questioned the purpose and value of the engagement exercise as well as the drivers and evidence base for change, and while the Commission recognised there were challenges, including workforce pressures, they did not feel they were able to lend their support to any proposals that would see the closure of the Faith House Practice;
- c) The Commission noted that any proposals for service change would be presented to the Hull Clinical Commissioning Group's Primary Care Commissioning Committee on the 28th of June 2019, and asked that the outcome of that meeting, including the detail behind any proposals, confirmation of the Committee's decision, the rationale behind any decision, and timelines going forward, be presented to the Health Scrutiny Commission in July 2019.

4 PRIMARY CARE COMMISSIONING COMMITTEE - 28TH JUNE 2019

Following the engagement exercise Modality Partnership Hull submitted a formal application to NHS Hull Clinical Commissioning Group to vary their General Medical Services contract to cover the consolidation and relocation of primary medical care services from Faith House to New Hall Surgery and Alexandra Road Health Centre. The application was considered by the NHS Hull CCG Primary Care Commissioning Committee at a meeting held in public on 28th June 2019. As in all meetings of the Committee, all Members and non-

voting attendees were required to declare any conflicts of interest in relation to the issue for consideration and all conflicts declared were managed in-line with the CCG's Managing Conflicts of Interest Policy.

The Modality Partnership Hull submitted three documents to the Primary Care Commissioning Committee: an Equality Impact Assessment, the Engagement Report which was presented to the June 2019 Health and Social Wellbeing Overview and Scrutiny Commission, and the proposal to relocate and consolidate services from Faith House to New Hall Surgery and Alexander Health Centre from 1st August 2019.

4.1 Equality Impact Assessment

The Equality Impact Assessment had been completed at the outset of the engagement and had identified two specific actions at the conclusion of the engagement which would be subject to approval of the proposed changes; these were as follows:

- Engagement with the Patient Participation Group to understand what elements of the practice's values/ethos are valued, in relation to Faith House's historical Christian ties.
- Communication to patients regarding proposed changes to locations to note accessibility information for sites, and detail where GPs will be based to support continuity of care

4.2 Engagement Report

The CCG's Communications and Engagement Team had undertaken an assurance assessment of the engagement exercise and this assurance was included as part of the report considered by the Committee. Overall, the CCG did feel assured that the engagement exercise itself was extensive and the patients affected were given the opportunity to have their views heard. Given the level of local media and political interest, the engagement exercise was well publicised and the total number of responses received was an acceptable level.

4.3 Modality Partnership Hull proposal

The proposal to relocate and consolidate GP services recognised that the case to deliver services from modern purpose built facilities was an initial primary driver for change and remained important. However, the Committee was informed that the compounding issue of immediate and serious clinical workforce pressures, recognised as part of the initial case for change, had seriously escalated in the period since the commencement of the engagement work and this had become the primary driving factor for change.

The Committee were informed that since the beginning of the engagement exercise, three GP partners had retired from Modality Partnership Hull, a GP partner had resigned, a further 5 GP partners had reduced their hours and two more GP partners were retiring in the coming weeks.

Despite a number of proactive steps having already been taken to recruit GPs, the Partnership has seen a significant reduction in the GP capacity and with imminent retirements by the end of July there will be 15.8 GPs left to support approximately 61,000 patients. Each Whole Time Equivalent (WTE) GP will therefore be responsible for 3,850 patients each, which is double that of the England average of approximately 1,800 - 2,000 patients per WTE GP.

The Partnership has recruited to a number of other clinical roles to part mitigate the impact of the above, including Health Care Assistants, Practice Nurses, Nurse Specialists, Prescribing Nurse Specialists, Clinical Pharmacists, Autonomous Nurse Practitioners, Physicians Associates, Advanced Clinical Practitioners and Urgent Care Practitioners. Ultimately, however, there remains an important role for GPs as senior clinicians in the supervision of other health professionals within the Partnership, as well as a need for them to continue to see the most complex patient cases and there remains significant pressure for appointments in this regard.

A duty doctor triage system is operated at each site whereby a GP is available to triage patients and support the other clinicians in managing patients at the site. By consolidating services from three to two sites additional capacity will be created through the reduction in duty doctor shifts, resulting in an additional 10 sessions available per week.

The workforce issues facing primary medical care services have long been recognised by the CCG and the Primary Care Commissioning Committee. The CCG risk register includes the following risk first identified in August 2015:

- *CCG practices are unable to maintain a resilient primary care workforce.*

The risk rating was Extreme when the risk was initially identified and remains Extreme over 3 years on from it being added to the CCG risk register.

The risk is reviewed and discussed at the Primary Care Commissioning Committee every two months with updates being provided outlining actions being taken to address the risk. Actions that have been taken and which the Modality Partnership Hull have actively engaged with and supported include:

- an International GP Recruitment programme,
- the recruitment of additional roles (Clinical Pharmacists and Social Prescribing link workers) supported by the recent GP contract changes,
- Development of other new roles including Advanced Care Practitioners and Physician Associates,
- utilisation of the Apex Insights tools to assist practices develop their workforce and manage workload,
- development of GP Fellowships, the development of at-scale home visiting services, and

- training for practice administrative staff to reduce the burden on GPs.

5 **RECOMMENDATIONS**

It is recommended that the Overview and Scrutiny Commission:

- a) Note the decision made by the NHS Hull CCG Primary Care Commissioning Committee in relation to the relocation and consolidation of services currently delivered from Faith House Surgery, Alexandra Health Centre and New Hall Surgery from 1st August 2019;
- b) Note the background, context and rationale for the decision to approve the relocation and consolidation of services currently delivered from Faith House Surgery to Alexandra Health Centre and New Hall Surgery.

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Officer Interests: None