

NORTH YORKSHIRE COUNTY COUNCIL

Scrutiny of Health Committee

19 November 2010

Proposals for the GP Branch Surgery in Cawood, Selby

Purpose of Report

1. The purpose of this report is to provide an opportunity for Members to comment on the proposed closure of the Cawood surgery and to transfer services to the main Posterngate surgery in Selby.

Introduction

2. A report from NHS North Yorkshire and York is attached as ENCLOSURE 1.
3. Lorraine Naylor (Assistant Director for Primary Care, NHS NY&Y) together with Jacqueline Roe (Practice Manager) and Dr John Reid will be attending the meeting to summarise comments received to date from patients and to respond to Members' questions.

Recommendations

4. That Members consider the proposals and offer comment to NHS NY&Y.

Hugh Williamson
Head of Scrutiny and Corporate Performance

County Hall
Northallerton
BH/11 November 2010

Background Documents: None



North Yorkshire and York

**Report to
North Yorkshire County Council Overview & Scrutiny Committee**

19th November 2010

**Application by Posterngate Surgery, Portholme Road, Selby to close their
branch surgery premises at
10 Rythergate, Cawood, Selby YO8 3TP**

**Report From: Lorraine Naylor, Assistant Director of Primary Care
NHS North Yorkshire & York**

1. Introduction

- 1.1 The Partners from Posterngate Surgery have submitted an application requesting the closure of one of their two branch surgeries, namely 10 Rythergate, Cawood, Selby.

The practice wish to relocate from their branch surgery at Cawood and concentrate their services across their 2 other sites, namely Portholme Road (main surgery) and Hemingbrough (branch).

The practice would like to improve upon the condition of the premises at Cawood, unfortunately, due to the fact the practice do not own the site, it is therefore deemed uneconomical to upgrade these facilities to meet the basic standards requirement.

The practice has sought alternative premises for a number of years, without success. The practice already has the capacity and space to accommodate patients from the Cawood locality within the premises at Portholme Road.

The practice feels they would be able to offer better continuity of care across 2 sites rather than 3. The IT links at Cawood are also a contributing factor to the practices application. As the IT links are poor, it is often not possible to view patients' records at the time of the patients' appointment. The GP will have to look up records once they return to the surgery at Portholme Road.

Due to the condition of the premises and IT links at the Cawood site, the practice feel they are not able to offer patients the same level of service as they can from their Portholme Road site and wish to relocate from the Cawood site.

Please see *Appendix 1* for a map of the location.

- 1.2 Posterngate Surgery currently operates across the following 3 premises:
 - Posterngate Surgery (main surgery)
 - Portland Lodge, Hemingbrough, Selby (branch surgery)
 - 10 Rythergate, Cawood (branch surgery)
- 1.3 There are 8 GP partners and 4 salaried GPs working within the practice, supporting each of the 3 sites.
- 1.4 A Premises Inspection Report commissioned by the PCT in 2009 identified that the Cawood Surgery was unfit for purpose.
- 1.5 The implications of the Premises Inspection Report are also reiterated by the PCT's Infection Control Report, which identifies the premises as being unsuitable for general practice.
- 1.6 Posterngate Surgery have a second branch surgery based at Portland Lodge, Main Street, Hemingbrough, Selby YO8 6QF which will remain unchanged.

2. Practice Population

- 2.1 A total of 15,043 patients are registered with the main surgery, Posterngate at Portholme Road.
- 2.2 The practice are hopeful the 1,589 patients who attend Cawood Surgery will visit Posterngate for treatment. Of those 1,589 patients:
 - 27% (429 patients) use the branch surgery
 - 73% (1,160 patients) use the main surgery
 - 50% of the local population have had a consultation in Cawood within the last 12 months.
- 2.3 The practice have given consideration to contingency plans if patients opt to register elsewhere. Assurances have been given the practice will not be destabilised if patients choose to register elsewhere.

3. Staffing

- 3.1 It is planned that staff will move to the main surgery at Posterngate to support the patients previously treated at Cawood, 10 Rythergate.

4. Premises

- 4.1 Cawood surgery is approximately 5 miles away from Posterngate in Selby. The journey takes around 10-15 minutes by car.
- 4.2 There is a large car park to the rear of Posterngate Surgery, Portholme Road with adequate spaces available to patients.
- 4.3 The journey from Cawood to Posterngate is accessible by public transport.
- 4.4 To support those patients who require public transport, the practice have given assurances appointment slots will be managed around the bus timetables.
- 4.5 The Posterngate surgery at Portholme Road is large enough to accommodate the increase in patients from the Cawood locality.

5. Condition of Premises

- 5.1 A health & safety inspection has been undertaken by the PCT's Infection Control Officer whose report has identified the following areas of concern:

- The premises at 10 Rythergate, Cawood are damp and not in an appropriate condition to see/treat patients.
- There is limited and unreliable heating
- The fire exit door is unable to be opened in case of a fire emergency.
- The consultation room is very difficult to clean
- Numerous walls have peeling paint due to significant damp – it is not possible to clean these areas
- There is no ventilation to the room – air exchanges were unable to be determined.
- For 'joint injections', the requirement would be to have a 'clean' area such as a treatment room, which would be able to be cleaned effectively. The consulting room would not be able to be considered a 'clean' room (or could be) in its present state of repair.

- 5.2 The practice has also raised the following concerns:

- There is little confidentiality as patients standing in the corridor are able to overhear patient consultations in the examination room.
- For patients requiring a chaperone, the receptionist is required to lock the dispensary to assist.

6. Service Provision

- 6.1 Due to the poor state of the Cawood premises, there is a limited amount of procedures that are able to be performed, other than routine GP consultations. It is not possible to perform joint injections. Only childhood vaccinations and immunisations are able to be carried out.
- 6.2 There is no security for patients' records.
- 6.3 There are concerns over the use of IT equipment as the software needed by the clinicians is only available sporadically. The clinicians are required to wait until they are at the Posterngate Surgery before they are able to view patients' records.
- 6.4 The practice are aware a closure will result in more home visits for patients and are able and confident they can provide this service to their patients.

7. Lease Agreement

- 7.1 The practice are currently occupying the premises on rights of tenure as the lease has now expired. The notice period has been confirmed as 3 months.

8. Alternative Local Provision

- 8.1 There are alternative GP practices within the area:
- Riccall Practice, which is a branch surgery of Beech Tree is 3.8 miles away from Posterngate Surgery. Public transport is not available through this route.
 - Scott Road Medical Centre, Scott Road, Selby is 0.7 miles away from Posterngate Surgery and takes approximately 5 minutes by car.

9. Dispensing

- 9.1 Cawood Surgery has a dispensary which would be unavailable should the branch close. Posterngate have confirmed they would be willing to

consider alternatives such as a joint delivery service with a local Pharmacy or leave medication in a secure place to support patients in receiving their medication and these options are being explored.

- 9.2 There are 5 Pharmacies within the area should patients need to fill prescriptions.
- 9.3 As part of the engagement process, the practice have sent a Question and Answer document to patients clearly outlining the 5 Pharmacies where they would be able to re-new their prescriptions.

10. Engagement

- 10.1 Agreement to the proposal has been given in principle from the PCT and is supporting the practice to work through the process.
- 10.2 A clear outline of the engagement process has been identified along with stakeholders.
- 10.3 A Stakeholder Engagement & Communication Plan has been written by Posterngate practice and is supported by the PCT in the engagement process (*see Appendix 2*).
- 10.4 All staff within the practice have been made aware of the plans and are keen to progress and move forward.
- 10.5 Patients who attend Cawood Surgery have now received letters, along with comments cards and a Question & Answer section informing patients of the proposals to and asking patients/stakeholders for feedback.
- 10.6 A stakeholder letter has been sent to the District Council, Parish Councillors, other local stakeholders including LINKs, voluntary sector etc, along with comment cards for feedback and Q&A section.
- 10.7 Letters, comments cards along with the Question & Answer document have been made available for all patients at each of the sites in the reception area.
- 10.8 As the engagement process is still ongoing at this time, a verbal update will be given to the NYCC O&S with a theme of patient and stakeholder comments presented.

11. Proposed Timeline

- 11.1 A proposed timeline has been drafted to ensure the comprehensive engagement process is undertaken within due course, as follows:
- A 3 month stakeholder engagement process (completion by end January 2010)
 - A public meeting to be held on 25th November 2010 on a drop-in basis to ensure patients and stakeholders are given the opportunity to put their views forward to both the practice and PCT. The meeting will be hosted by partners from Posterngate Surgery and include GPs who regularly see patients at Cawood premises. The PCT will also be attending the meeting with the Locality Director for Selby and York, along with the Commissioning Manager for Primary Care and members from the Communications Team.
 - The practice to then collate and analyse all stakeholder feedback and submit to the PCT for consideration by February 2011.
 - Analysis of the stakeholder feedback to be reported to the Primary Medical Services Commissioning Group (PMSCG) in February 2011
 - Providing the PMSCG grant permission for the practice to relocate, the practice to write to patients, giving 6 weeks notice of impending closure, a recommended closure date would be 31st March 2011.
 - North Yorkshire County Council Health Overview & Scrutiny Committee to be fully informed and updated throughout the engagement process.

12. Branch Surgery Closure Process

- 12.1 The PCT has a clear process for dealing with applications from GP practices who wish to close a branch surgery (*see Appendix 3*).
- 12.2 An initial practice visit was undertaken by the PCT to discuss the process upon receipt of the practices application. The meeting was to ensure the practice were aware of the Trust's requirements and process to follow for engagement for consideration of their application to be given.
- 12.3 For audit purposes, an Action Plan has been kept to record and document the process followed by the PCT and practice.

Appendix 2

Stakeholder Communication and Engagement Plan

Posterngate Surgery - Proposal to close branch surgery and centralise onto two sites

Engagement process: began October 2010

Dates for feedback/comments from Stakeholders: Monday 25th October 2010 – Saturday 22nd January 2011 with public meeting to be held on a drop-in basis for patients and stakeholders

1. Who are our Stakeholders and what level of engagement is required?

No.	Stakeholders	Type of Involvement
1.	Patients at all 3 sites	Raise awareness. Give information. Opportunity to comment and feedback. Give information about how to register with alternative practice if plans go ahead. Feedback on results of engagement and decision-making process.
2.	Practice staff at all 3 sites	Raise awareness. Opportunity to comment and feedback. Opportunity to change working arrangements (e.g. reception staff hours). Feedback on results of engagement and decision-making process.
3.	North Yorkshire Overview and Scrutiny Committee	Raise awareness. Opportunity to comment and feedback. Agree stakeholder engagement and communication process.
4.	Other public/ community representatives and partners – e.g. NY LINK, the voluntary sector, Borough and Parish Councils	Raise awareness. Opportunity to comment and feedback.

5.	Neighbouring Practices – Scott Road Medical Centre, Scott Road, Selby and Beech Tree Surgery, Main Street, Riccall.	Raise awareness. Agreement to take on patients who don't wish to move. Opportunity to comment and feedback.
6.	NHS NYY Primary Medical Services Commissioning Group	Awareness. Provides input. Review evidence. Makes recommendations/decision-makers based on evidence and views expressed.
7.	NHS NYY Board/Directors	Awareness. Decision-makers if appropriate.
8.	NY LMC	Awareness. Opportunity to comment and feedback.
9.	NY LPC and NY LOC	Awareness. Opportunity to comment and feedback.
10.	SHA	Awareness.
Support to Practice		
11.	NHS NYY Primary Care Commissioning and Contracting staff	Provide advice, support with paperwork and input.
12.	NHS NYY Engagement and Communication Teams	Provide advice and support with Stakeholder Communication and Engagement Plan and process.
13.	Locality Director	Awareness and support.

2. Overview of Key Milestones and Timetable

No.	Timeline	Stakeholder	Action	Engagement/Communications activity	Lead responsibility
1.	March 2010	NHS NYY	Business Case and Application made to NHS NYY to close branch surgery at The Medical Centre, 80 Knaresborough Road, and consolidate services at Posterngate Surgery, Portholme Road, Selby	N/A	Practice
2.	June 2010	NHS NYY & Posterngate Surgery	Practice visit undertaken by Amanda Brown, Locality Director	Discussions centred around: <ul style="list-style-type: none"> • Condition of premises • Infection control report required • IT usability • Patient confidentiality • Premises/other venues • Public transport 	PCT
3.	June 2010	NHS NYY & Posterngate Surgery	Due to Election Purdah, practice advised application unable to be progressed and will be held in abeyance until further notice.	N/A	PCT

4.	August 2010	NHS NYY & Posterngate Surgery	Confirmed with practice it was agreed application could progress and sought confirmation they wished to continue to proceed.	<ul style="list-style-type: none"> Practice confirmed their wish to go ahead with their application and wanted to commence engagement process. 	Practice and PCT
5.	August 2010	NHS NYY & Posterngate Surgery	Arrangements were made for the PCT's Infection Control Officer to undertake a site visit and provide a report on the standards of the branch surgery.	<ul style="list-style-type: none"> Infection control report was received on 14th September 2010 outlining concerns over the condition of the Cawood site surgery 	Practice and PCT
6.	September 2010	Beech Tree Surgery	Posterngate informed Beech Tree Surgery of their proposals	<ul style="list-style-type: none"> Beech Tree made aware of plans and possible implications to their practice. 	Practice
7.	21 st Sept 2010	NHS NYY – support	Discussions within PCT around engagement	<ul style="list-style-type: none"> Discussions concerning engagement process, papers to be produced and support available from the PCT 	PCT
8.	23 rd Sept 2010	NHS NYY & Posterngate Surgery	Second practice visit undertaken by Contracting and Commissioning Managers to support initial visit by Locality Director.	<ul style="list-style-type: none"> Meeting with Dr Reid, Dr Barnsley and Practice Mgr to outline and discuss the process for engagement. Practice confirmed they wished to progress 	Practice and PCT

9.	13 th Oct 2010	NHS NYY	PALS informed of potential closure and outlined plans and engagement process to be followed.	<ul style="list-style-type: none"> • Advised PALS patients may contact with enquiries 	PCT
10.	11 th Oct 2010	NHS NYY	Primary Medical Services Commissioning Group (PMSCG) informed of plans	<ul style="list-style-type: none"> • Updated provided to Medical Director and chair of meeting AD for Primary Care along with the group. 	PCT
11.	20 th Oct 2010 and ongoing	Practice	Staff briefing held on 20 th October	<ul style="list-style-type: none"> • Staff were updated with the plans and confirmed engagement process • All staff were invited and informed of proposals (eg Nursing, Secretarial, Reception etc) 	Practice

12.	21 st Oct 2010	Practice	Public meeting confirmed venue booked for 25 th November 2010.	<ul style="list-style-type: none"> • Venue booked in Cawood. • Decision was made by the practice to hold a drop-in session between 1.30-2.30pm at The Old Boys School Hall in Cawood. • The practice were conscious that if the meeting was held in an evening, it may be unsuitable for the elderly patients on a dark November evening, who make up the majority of patients who visit Cawood surgery. 	Practice
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13.	25 th Oct 2010	Practice	Patient and stakeholder letters circulated	<ul style="list-style-type: none"> • Display of letters, Q&A and comments cards at all 3 sites for patients to take home and read. • Engagement process commenced by sending out letters to patients and stakeholders. • Patients/Stakeholders can respond by returning the comments cards attached to their letters to any of the practices. • The practice will prepare a report which will outline the summary of feedback received and will be available on the practices website. 	Practice
14.	19 th Nov 2010	NYCC O&S	North Yorkshire Health Overview & Scrutiny Committee to be briefed on the proposals	<ul style="list-style-type: none"> • AD of Primary Care to present the paper to the O&S Committee 	PCT

15.	25 th Nov 2010	NHS NYY and Practice	Public meeting to be held at The Old Boys School Hall in Cawood	<ul style="list-style-type: none"> • Meeting to be hosted by Practice with representation from the PCT. • Meeting to be held at 1.30-2.30 on a drop-in basis to ensure elderly patients do not have to attend an evening meeting in November. 	PCT and Practice
16.	22 nd Jan 2011	Practice	Deadline for feedback due back to practice for collation and analysis.	<ul style="list-style-type: none"> • Report to be submitted to the PCT with an outline of the feedback received 	Practice
17.	Early Feb 2011	NHS NYY	Report to be presented to PMSCG meeting for consideration by the Group.	<ul style="list-style-type: none"> • Report to include analysis of patient and stakeholder feedback • PMSCG to consider all evidence, including feedback • The PMSCG will be asked to make a recommendation on whether to close the branch surgery or remain open, or practice to appeal decision. 	PCT

18.	Feb 2011	NYCC O&S	North Yorkshires Health Overview & Scrutiny Committee:- O&S to be invited to receive feedback from the engagement process before the PCT makes a final decision.	<ul style="list-style-type: none"> AD of Primary Care to present to the Overview & Scrutiny the findings and analysis of patient and stakeholder feedback 	PCT
19.	Feb 2011	NHS NYY	If agreement is given from the PMSCG meeting, the PCT to confirm in writing to the practice, the branch surgery can close	<ul style="list-style-type: none"> Letter to be sent to practice either confirming permission to close branch surgery closure, or refusing, outlining appeals process 	PCT
20.	Feb 2011	Practice	If agreement given to close branch surgery, the practice to write to patients giving 6 weeks notice of closure	<ul style="list-style-type: none"> Pending agreement, branch surgery to be closed on 31st March 2011 with 6 weeks notice given to patients and stakeholders informing them of the PCT's decision Information to be available on practice website and a link from the PCT's website to the practice. 	PCT and Practice
21.	31 st March 2011	Practice	Pending agreement, practice to close branch surgery.	<ul style="list-style-type: none"> Surgery to close branch at Cawood and relocate to Posterngate surgery premises at Portholme Road, Selby. 	

3. Information to be available:

- Letter to Patients including website and email address to send comments to on-line as well as the Comments Card
- Comments Card for Patient Feedback
- Letter to external stakeholders with link to website for comment and Practice address to write to
- Information available on Posterngates website <http://www.posterngate.co.uk> including about the Practice's proposal, dates, how to comment, and when decision will be made
- Information available on PCT public website with a link to the Practice website
- Reports to PMSCG and NY OSC
- In February, report, summary of feedback, and decision made available on the practice and PCT website

Appendix 3

FLOW CHART PROCESS FOR APPLICATIONS TO CLOSE BRANCH SURGERIES

