

Proposal to Close Greenside Surgery
Branch surgery of Crawcrook Medical Centre
November 2016

1. Proposal to close the branch surgery of Crawcrook Medical Centre

This proposal is being made by Dr Anil Doshi, Dr Stella Jacobs and Nurse Practitioner Janet Thomas, Partners of Crawcrook Medical Centre, delivering primary care services through a GMS contract from the purpose built main surgery premises on Pattinson Drive Crawcrook and a limited service to patients within the Greenside Community Centre Premises.

The reason for this decision is that by January 2017 we will have lost 50% of our GP capacity, and despite our best efforts we have been unable to recruit more GPs.

Background

Up until July 2016 Crawcrook Medical Centre has provided a clinical session at Greenside Community Centre. A GP from Crawcrook has attended the site 5 mornings a week, providing each morning allocated slots to see up to 12 patients face to face and one as a telephone appointment slot. Any patients who need to attend to see a nurse or health care assistant need to be given an appointment at the main surgery at Crawcrook, because the rooms at Greenside don't meet the national standards to see patients beyond anything other than a face to face consultation with a GP.

As our GP resource had reduced by 33% from January 2016, due to two of our salaried GPs leaving, we had no choice but to ask permission from NHS England in July 2016 to reduce the service at Greenside from 5 mornings a week to 3 mornings a week, as it became impossible to sustain GP cover for 5 days.

From mid-January 2017 we will lose another GP, reducing our GP resource by a total of 50% and making it impossible to sustain continued delivery of services over 2 sites.

We are therefore having to review our structure and ways of working to accommodate this reduction. We have had an external audit carried out to help us understand how many patients attend Greenside surgery. The audit was carried out by an external auditor to look at the demographics and attendance of patients, resident with a Greenside address, during the 12-month period 26.09.15 to the 26.09.16. The results demonstrated that out of a potential 1500 Greenside residents 743 Greenside patients had attended in that year and there were only 58 patients identified who have only ever attended Greenside and have never attended the Crawcrook site, which is 3.8% of the 1500 Greenside residents. The remainder of those 743 patients have attended both Greenside and Crawcrook with 651 of those patients attending Crawcrook more than Greenside. The 58 patients represent 0.8% of the total population of the 7268 patients registered for both Crawcrook and Greenside and this confirms our decision for the services to be consolidated to the Crawcrook site. We have looked at the demographics of those 58 patients which only attended Greenside and these are set out in the table below: -

Age 01 -10		13
Age 11-20		5
Age 21-30		7
Age 30-40		3
AGE 41-50		14
Age 51-60		8
Age 61-70		5
Age 71-80		1
Age 81-90		2

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In the age group 61-90 there were 8 attendances of more elderly patients and we will look at ways to be able to mitigate the consequences for these patients. We have also enquired of the local bus company what bus services are available to inform all our Greenside patients.

2. Support of NHS England and the CCG

The practice has had discussions with both NHS England and the CCG informing them of the increasing vulnerability of the practice and NHS England have given guidance to the practice of the process required to make a proposal to close the branch site. The CCG are also aware of this proposal and Jane Mulholland Director of Operations and Delivery will be attending the OSC meeting on the 6th December 2016

3. Outcome of CQC Inspection

Following a recent CQC inspection, in March 2016, of both premises, the CQC report rated the practice Good” for being Well Led” and “Good for Caring” however there were areas that gave the rating for “Requiring Improvement” due to 2 issues,

- Not having a Defibrillator and oxygen at the Greenside site
- Staff appraisals not having been all completed for that year at the time of the inspection.

Not meeting these 2 areas brought the overall rating down to “Requires Improvement”

Both areas have now been satisfactorily met and the reports submitted to the CQC informing them that the Oxygen and the Defibrillator have been purchased and are in place at Greenside and all the staff appraisals have been completed. There is not a requirement for any remedial action plan as Crawcrook Medical Centre has addressed and corrected the CQC requirements.

One of the areas that CQC also highlighted during the inspection was patient concerns over access to appointments. The decision to close the branch surgery will make it possible to improve access for all our patients.

4. Justification for proposed closure

Having a 50% reduced capacity of GP resource by January 2017 will make it impossible to sustain services over 2 sites. It has been impossible to recruit GPs to replace the 2 salaried GPs, despite having advertised twice in the last year. This resulted in no applications to our adverts. This is currently a national situation due to lack of GPs generally and exacerbated by the fact that GPs do not necessarily choose to work in the Gateshead area as statistics seem to confirm they prefer to work in the South-East area of the UK. In addition, the pool of available GPs in the system has been greatly reduced due to dwindling interest in applications to become a GP and a lot of GPs choosing to emigrate to places like Australia where they are offered a better work life balance, along with better remuneration than can be offered within the UK. This picture is unlikely to change until the mid-2020s

5. Actions taken to reinforce our services when consolidated to Crawcrook site.

The Gateshead GP Federation known as CBC has been successful in securing funding through the Primary Care “Five Year Forward View” funding initiative allowing them to support Crawcrook Medical Centre along with other local vulnerable practices.

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We are currently having regular meetings with CBC to review and support Crawcrook moving forward.

One of the primary aims of these meetings is improving access for all our patients and consolidating all service delivery from one site to improve the current appointment system by better utilisation of the skill mix across the primary care clinical team. This will be done by reviewing our access and increasing our available appointments at Crawcrook along with additional training for the practice staff in signposting patients to the correct clinician. To prepare for this, we have been strengthening the resources amongst the other clinicians and have appointed a second full time Nurse Practitioner and an additional part time Nurse and are in process to recruit an additional Health Care Assistant. CBC have also supplied the resource of a Pharmacist and Pharmacy Technicians at Crawcrook Surgery, who can manage a substantial amount of the medicines management work, which will free up time for the GPs to be able to see more patients at Crawcrook.

To safely supervise the clinical skill mix, it is a necessary criterion and paramount that there are GPs present on site to safely support and supervise the clinical skill mix of the team. Being on one site will also ensure the GPs have full access to all of the EMIS clinical resources (some of which are not available for the GPs when working from the Greenside site) This would be impossible to manage with the level of reduced GP capacity in January 2017 unless we have all of our remaining GPs seeing patients from one site.

6. Dispensing

The practice is not a dispensing practice

7. Contractual

This proposal does not impact in any way on the GMS contract that is in place.

8. Training Practice Status

Crawcrook is a training practice and to maintain accreditation for the Training Status with a reduction in our overall GP resource, the consolidation to one site will allow the clinical team to be more effective, reduce the dilution of resource and maintain a clinically supportive environment conducive to training.

9. Lone working

Members of the staff at Greenside are lone workers once the GP has finished surgery and whilst we have put in safety factors to minimize risk, this is not ideal.

10. Timeline of engagement period with our patients and other key stakeholders see APPENDIX 1.

11. Summary of Patient Feedback

The feedback that was received from the patient consultation events and from comments direct to the practice have been themed into the categories listed below along with answers given. A total of 37 members of the public attended the public meetings on the evening of the 8th November 2016

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11.1. TRANSPORT

Why not provide a mini bus service?

This will depend on the Greenside Community making this a provision for their population as it is not a service that the surgery is able to offer. However, we have liaised with all transport services currently provided to see if we can encourage a more robust timetable of provision

Only 2 buses per hour (folly area)

We have been in contact with the bus company and they have reported back the following information from [Customer Services-gonortheast.co.uk](http://Customer.Services-gonortheast.co.uk) – “Generally speaking, between the hours of 10am - 5pm, we run the buses at 2 and 32 mins past the hour from Greenside to Crawcrook (10a service) and then from Crawcrook back to Greenside at 16 and 46 mins past the hour (10a service). Going from Greenside back to Crawcrook, they also run at 07:24, 07:52, 08:43, 09:00 and 09:30. Going from Crawcrook back to Greenside, they also run at 16:23, 16:58, 17:30, 18:00 and 1833. *At present, I am not aware of any plans to change services in this area.*”

11.2. MEDICATIONS

Thank you for your explanation, I am pleased that I can still get my prescription from Greenside Pharmacy.

We have had very productive discussions with the pharmacist at Greenside and nothing will change in relation to the excellent service she and her staff already provide.

We will also ensure that the pharmacist and her staff have allocated members of the team at Crawcrook to deal with all the repeat and acute prescriptions for Greenside patients to continue a seamless service.

What happens for patients on warfarin who need a repeat prescription I hope they don't expect patients to trail to Crawcrook to have book copied?

The service will, for a patient on Warfarin, remain the same as currently. The pharmacy in Greenside will fax the results to the surgery for confirmation where necessary, therefore as a patient you will not need to make any additional journeys.

11.3. APPOINTMENTS

It is frustrating enough to get an appointment as it is what about people who need to use public transport / old and small children people with mobility problems?

An independent audit was carried out of the Greenside patients and how they use the services between 26.09.15- 26.09.16. The results showed that apart from 58 of the total 743 patients that only attended the greenside surgery the remaining 685 patients attended both Greenside and Crawcrook site and 651 of this number attended Crawcrook more than Greenside.

I don't want to wait 4 weeks for an appointment

We are constantly working on the capacity and demand to give access to routine appointments for up to 6 weeks ahead. But this will only be possible if we consolidate to one site. Urgent appointments will always be given priority and where necessary seen on the day.

Will the doctors be more willing to make home visits to the greenside area?

The doctors have always provided home visits where they have felt it as appropriate.

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Phone lines always busy?

We have a new telephone system installed since March 2016. This has increased the number of lines available to take the calls to reduce as far as possible congestion where patients cannot get through. The fact that we would not need to supply a receptionist at Greenside would mean increasing the capacity to answer telephones at Crawcrook.

Explain how services will not be compromised closing Greenside how are you going to provide for the extra patients at Crawcrook?

At present a GP attends Greenside which reduces the appointment availability at Crawcrook and due to all slots at Greenside not being filled we do offer patients from Crawcrook an available slot at Greenside.

What does it mean to Crawcrook to accommodate 16 more patients per day that would have been seen at Greenside

It will make no difference to our demand but the fact that the GPs are all on one site will improve things because there are consultations with a GP at Greenside that could be managed by a different member of the clinical team and not necessarily have to be a GP

11.4. GENERAL

I'm satisfied with the service at Greenside it's a relaxed social hub, where people help each other out, closing will be detrimental to the health of the people.

Closing the medical aspect of the Community Centre does not change residents being able to use the centre as a relaxed social hub.

Could we have fewer days at Greenside?

We have already had to implement a reduced service

Will you continue to recruit?

We will continue to try to recruit additional GPs however the prospect of being successful due to the national picture is bleak, however we are looking to work collaboratively with other practices to give support where possible, but this would only work effectively if services are maintained at one site so they do not get diluted where they would become unsafe.

If you recruit will you reinstate the Greenside Surgery?

In the timescale, we must address this and the reasons for proposing closure, we cannot foresee that this will be a viable option.

Can we have a Nurse Practitioner up here instead of a doctor?

No this is not a feasible option as a Nurse practitioner needs available supervision and access to a GP to ensure patient safety

Why not reduce hours and number of days first until you get recruited a new doctor rather than take the brutal opportunity to reduce costs and service?

This decision is not about cost cutting, it is about maintaining patient safety by not diluting the service through a need to man two sites.

For those patients who don't come would it help to come for a visit?

If any Greenside patients who have never been to the Crawcrook surgery would like to come and have a look around this can be arranged.

Greenside is private, reception door can be closed – Crawcrook its open?

There is a facility at Crawcrook to go to a private confidential location should they wish to, and make this known to the receptionist, however it must also be said that the receptionist at

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Greenside is vulnerable being a lone worker at times if patients get aggressive (and it does happen)

11.5. PARKING.

Councillor Helen Hughes said at this point that currently there was a historical dispute between the developers and the Council which she is addressing.

11.6. HOME VISITS

Concerns raised about home visits and whether patients would still be able to get home visits in Greenside.

Any requests for home visits will be assessed in the same way they are currently being done and there is also the added facility of the Urgent Care Centre who support local practices and will do home visits when requested to the Crawcrook and Greenside patients as appropriate.

12. Other issues for Consideration

Staffing

There are no staff redundancies planned and there are no TUPE transfer issues to consider. All staff who currently are on rota for Greenside will just remain in the Crawcrook site.

IT Requirements

No discussions have taken place to decommission or relocate IT. This will be conducted in partnership with NECS pending the outcome of the proposed closure.

Quality and Outcomes Framework

There are no issues identified relating to QoF performance.

Home Visit Policy

The home visit policy for all patients including residents of Greenside will remain the same and all requests for visits are appropriately assessed to fully understand the nature and urgency of the request including the circumstances of the patient making the request.

CQC

Consolidating services and delivery of services from a single site will ensure that we are delivering a service to all of our patients from a purpose-built premise "Fit for Purpose"

Primary Care Web Tool

No detrimental Issues

Active Breaches

There are no active contractual breaches that have been served by NHS England

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Practice Declaration

Partners	Signature	Date
Dr Anil Doshi		
Dr Stella Jacobs		
Janet Thomas NP		

Action for Overview and Scrutiny

Overview and Scrutiny are asked to note the content of this briefing and highlight any additional issues that they feel may need addressing in informing and involving / consulting the local community and how they wish to be involved.

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APPENDIX 1

05.09.16: NHS England advised of the process.
15.09.16: Angela Frisby, Appeals and Overview and Scrutiny Co-coordinator informed of the pending proposal.
21.10.16: Jane Mulholland at the GATESHEAD CCG informed of the proposal
23.09.16: Letter to patient constructed and proofed by NHS England COMMS
05.10.16: the surgery staff were all informed of the proposal to close Greenside at the surgery protected TIME-IN session.
06.10.16 Members of the Greenside Community Centre Committee informed of the proposal and an evening meeting was arranged with the members of their committee on 18.10.16. and Dr Doshi, Mel Shotton and Maureen Kersley met with them week
06.10.16: A formal statement was prepared and proofed by COMMS for the surgery to respond if there are any media enquiries.
06.10.16: Councillors Helen Hughes and Kathleen McCartney and Jack Graham informed
06.10.16 Date agreed with the Committee at Greenside Community Centre to hold a public meeting 8 th November 2016 at 6:30pm
11.10.16: Commenced posting patient letters to the 1500 Greenside patients
11.10.16: Email sent to Patient Reference Group with copies of Patient letter, FAQ and Stakeholder briefing document in preparation for PRG meeting on 13.10.16
13.10.16: Extraordinary meeting convened with Patient Group re them producing a FAQ
13.10.16: All local practices sent a briefing document about the proposal
23.10.16 Reviewed FAQ document returned to practice by the PPG
23.10.16 Collated questions from the responses received from patients
24.10.16 Information put on the practice website, along with posters put up in the surgery waiting room at both sites, the local Pharmacies, and other appropriate public areas
27.10.16 Meeting with the Greenside Pharmacist to discuss the proposal and to identify ways to strengthen work with the Pharmacy to support Greenside patients.
26.10.16 Contacted the local bus services for their timetable and ask if the service could be enhanced to provide a more robust service between Greenside and Crawcrook
07.11.16 the Bus Company response from Ian McDonald Customer Services Advisor: Customer_Services-gonortheast.co.uk -Generally speaking between the hours of 10am - 5pm, we run the buses at 2 and 32 mins past the hour from Greenside to Crawcrook (10a service) and then from Crawcrook back to Greenside at 16 and 46 mins past the hour (10a service). Going from Greenside back to Crawcrook, they also run at 07:24, 07:52, 08:43, 09:00 and 09:30. Going from Crawcrook back to Greenside, they also run at 16:23, 16:58, 17:30, 18:00 and 1833. <i>At present, I am not aware of any plans to change services in this area.</i>
08.11.16 Responses to the letter to the 1500 cohort of Greenside patients collated and put into themes to feedback at the Public meeting at the Greenside Community