

## **Proposal to Amalgamate Dunston Health Centre and GlenPark Medical Practice**

### **Background**

Over the last 14 years, the practice, with the support of Gateshead Council and Newcastle Gateshead CCG has sought to build premises fit for 21st Century medicine within Dunston. This is now coming to fruition with the new Health Centre currently being built as part of Gateshead Councils Ravensworth Road redevelopment.

The practice has around 9,100 patients, just over half of whom reside within Dunston. The rest live in Whickham, Swalwell, Lobley Hill with a few in Teams and Bensham. It is a predominantly white British population (>98%) with a high deprivation index, particularly within lower Dunston, Teams and Bensham.

The main practice has core opening hours from 08:30 – 18:00 with extended access hours from 07:00 on a Monday and Thursday and late-night hours until 20:00 on a Wednesday. The building itself was built in 1904 with the last extension in the 1990s. It is far too small for the practice and patient needs and has limited disability access (along with a host of other problems).

Dunston Health Centre was built in 1970 has core opening hours from 08:30 – 12:00 (ie sees around 13 doctors' appointments a day and similar nurse appointments). It is open on a Wednesday afternoon for a drop-in baby clinic and a 1 hour evening surgery. Again it is not fit for purpose, with poor disability access to the main consulting room, and poor privacy within the waiting room (conversations with receptionists on the phone or with patients in surgery can be heard throughout the waiting room).

The two surgeries are currently 0.7miles apart. As a result of the fact that they are both in the same 'village', so close together and used entirely interchangeably by us and patients (ie, all patients are registered with the practice, NOT at the branch surgery), there is confusion every day with patients turning up at the wrong site.

### **Proposal**

The original design of the new premises was to replace Glenpark Medical Practice, the main surgery and meets or exceeds all current and anticipated requirements for a health centre. We have been working with the CCG and the Commissioning Support Unit to try to make this an exemplar building to be a model for future primary centre developments.

The new premises are about 200m further along Ravensworth Road, close to the corner with Ellison Road, as part of the new development with Aldi, Clavering Court

(older person's living accommodation) and Boots Pharmacy. It is therefore closer to the bus routes that use Ellison Road as well as maintaining access to bus routes along Ravensworth Road, and closer to Dunston Health Centre (ie, there is now only about ½ mile between the two premises; around 2 min drive or 12 min walk). The building is due to be completed in mid-December.

The building has a floor area greater than the two current premises combined and was designed with the ability to allow for future expansion.

### **Reasons for Proposed Amalgamation**

There are two primary goals for the amalgamation:-

(1) Improved financial stability for the practice. The practice has seen a significant drop in its income in the last couple of years as a result of a lower investment in primary care, increasing running costs and the withdrawal of the PMS contract (which alone resulted in a loss of £175k pa from our budget). NHS Property Services own Dunston Health Centre and have been increasing their costs way above primary care budget increases and we have no control over the costs they are charging; indeed, despite our best endeavours we have not been able to engage in meaningful discussions with them. In short, without significant financial savings the long-term tenability of the practice is in doubt with resultant unthinkable consequences to our patients and surrounding practices. The only two realistic costs that can make worthwhile savings are staff and premises; reducing staff will have an impact on patient access which we clearly wish to avoid.

(2) Improve operational efficiency. We cannot maintain the same level of service at both sites. Whilst we clearly offer core services, specialist equipment is too expensive to maintain at both sites. As mentioned above, appointments and / or time is lost every day as a result of patients turning up at the wrong site and either having to rebook or travel to the other site. A single site would reduce the time spent by staff travelling between the two sites, increase flexibility in the deployment of both medical and support staff – all of which we can reinvest in patient care.

### **Process to Date**

I have attached a copy of our Health Centre Consultation, the results which show overwhelming support for the proposal. The returns are statistically significant, so whilst we have tried to consider hard to reach groups, this would not change the outcome of the consultation in terms of the numbers. We have listened to their concerns and can either address or reassure these. Through continued advertising, we will continue to listen to what patients tell us about the proposal.

We have contacted local MPs and local councillors – none have raised objections, one has replied in support.

We have contacted the local practices but envisage no impact on them, since there will be no need for any patients to re-register elsewhere. The Local Medical Committee has offered its support. Gateshead Care Partnership (primarily Queen Elizabeth Hospital, in conjunction with Gateshead Council and Gateshead Community Based Care) which runs the community services and occupies space within Dunston Health Centre support this proposal in principle (indeed we are in discussion with them to discuss utilising some space within the new premises to increase co-operative working to the benefit of our patients).

Our intension is to now submit a formal request to close Dunston Health Centre, with a closure date sometime in January to ensure that there any operational or building snags are ironed out from the move from the old Glenpark to the new premises.

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