

Agenda Item 9

Report to (Board/Sub-Committee):	Joint Co-Commissioning Committee
Date of Meeting:	26 th January 2017
Subject:	Closed lists at Freshney Green Health Centre
Presented by:	Heather Marsh, NHS England

STATUS OF THE REPORT

For Approval / Ratification X

PURPOSE OF REPORT:	<p>This report is to update the committee on matters pertaining to the temporarily closed lists at the practices within Freshney Green Primary Care Centre.</p> <p>The Committee are asked to consider the content of the report, including the proposed actions, and approve the recommendations.</p>
Recommendations:	<p>The recommendations are as follows:</p> <p>Woodford Medical Centre</p> <p>Note the updated actions and timescales. Agree to allow temporary closure to new patients until 31 August 2017.</p> <p>Littlefield Surgery</p> <p>It is proposed that because of the nature of this Practice’s open access model, they are supported to have an arrangement that enables them to manage their list to maintain it at 5,600 patients (their stated safe maximum), i.e. they will close when it is over that number but re-open and take new patients when it drops below. Annual agreement with NHS England would be required. However, this is dependent on the Practice agreeing to review the boundary with NHS England and ensure access for local residents when the list is open.</p> <p>Fieldhouse Medical Group</p> <p>Note the updated actions and timescales. Agree to allow temporary closure to new patients until 31 August 2017.</p>

	<p>Other Practices with concerns regarding these closed lists</p> <p>It is proposed that work is undertaken with those practices, where their list size has increased, to assess whether any support could be provided to assist them with their increase in list size.</p>
Sub Committee Process and Assurance:	The actions taken are in line with the CCG Scheme of Delegation.
Implications:	
Risk Assurance Framework Implications:	Risk and mitigation have been reviewed in line with the applications and consequences of the decision as set out in this report.
Legal Implications:	None to report at this stage.
Equality Impact Assessment implications:	<i>An Equality Impact Analysis / Assessment is not required for this report.</i>
Finance Implications:	There are potential financial implications of supporting the other practices within the area who have expressed concern about the continued closures at Freshney Green. The extent of these will not be understood until further discussions have taken place.
Quality Implications:	There is the potential to limit the choice of patient access to register at a new practice in the area.
Procurement Decisions/Implications (Care Contracting Committee):	Not applicable to this report.
Engagement Implications:	NHS England has consulted with stakeholders regarding the requests from each practice to extend their current temporary list closure.
Conflicts of Interest	<p><i>Have all conflicts and potential conflicts of interest been appropriately declared and entered in registers which are publicly available? Yes</i></p> <p><i>Please state any conflicts that need to be brought to the attention of the meeting.</i></p> <p>None to report</p>
Strategic Objectives <i>Short summary as to how the report links to the CCG's strategic objectives</i>	<p>1. <i>Sustainable Services</i></p> <p>N/A</p> <p>2. <i>Empowering People</i></p> <p>N/A</p>

	<p>3. <i>Supporting Communities</i></p> <p>N/A</p> <p>4. <i>Delivering a fit for purpose organisation</i></p> <p>The temporary list closures support the Practices concerned to maintain safe levels of service.</p>
<p>NHS Constitution:</p>	<p> NHS_Constitution_WE B.pdf</p> <p><i>Does the report and its recommendations comply with the requirements of the NHS constitution? Yes / No</i></p> <p><i>If Yes, please summarise key issues</i></p>
<p>Report exempt from Public Disclosure</p>	<p>No</p>
<p>Appendices / attachments</p>	

Freshney Green Primary Care Centre: General Practice Temporary List Closure Update

At the Joint Co-Commissioning Committee on 18 October 2016, the members agreed that the 3 practices within Freshney Green Primary Care Centre (Littlefield Surgery, Woodford Medical Centre & Fieldhouse Medical Centre) could operate closed lists until the end of February 2017, which represented a further 3 month extension to their agreed end date of 2 December 2016. However, this was subject to a very clear action plan and an articulation to the Committee regarding what changes would allow the practice to re-open by the end of the closure period or before. At that time, Fieldhouse Medical Group had submitted a request for a further 6 months extension and we were aware that Woodford and Littlefield were about to request a further 12 months extension each.

As previously outlined, NHS England and the CCG met with all three practices on 31 August 2016 to discuss the issues and agree a way forward and the actions agreed were reported to the previous Committee meeting.

A further meeting was held on 18 January 2017 and the following update was provided by each practice:

Littlefield

The current list size is now at 5,600, which has gone down from 5,670 in March 2016. The practice has previously stated that they could maintain the safety of their open access model by ensuring that their list size remains at around 5,600. However, in the context of the other closed lists within the building, they are concerned that re-opening would immediately generate an influx of patients and create an immediate pressure and a further request to close the list.

The practice has confirmed that any new patients wishing to register would only be considered if they are within their existing agreed boundary. However, they do not wish to review their practice boundary and take action pertaining to existing patients due to their long established relationships with patients.

The Practice is taking part in the NHS Productive General Practice Quick Start Programme, which is aimed at supporting Practices to redesign processes and help with GP workload. This programme will be completed in February 2017.

There was a discussion regarding the potential to employ a salaried GP which would allow them to grow their list, but this would be subject to additional interim funding from NHS England. The Practice is currently considering whether this is a feasible option.

A discussion took place regarding asking the Committee to consider agreeing to a cap of the practice list size whereby it would remain open until it reached 5600 and at that point would close until it dropped below this number. The practice would be responsible for monitoring and managing this, opening and accepting new patients when below that number and closing temporarily when above. An annual review with NHS England would be undertaken if this principle was adopted.

It is recommended that due to the open access nature of this Practice's model, the arrangement to support a cap on the list size is agreed, subject to further work with the Practice on reviewing their current list size boundary to ensure that new patient access for the local population is prioritised.

Woodford

The current list size is 9,805 which has dropped over the period of closure. However, the practice reported that their workload has not decreased by the same.

During the period of closure the practice have introduced a new policy for letter coding, using non clinical staff and explained that this has helped reduce the GP workload a little. They have also implemented GP triage sessions.

Woodford have been awarded £10,000 from NHS England to support their recruitment incentives and reported that they are hopeful to be in a position to appoint a GP Registrar in August 2017, working 0.6 wte.

They have also undertaken a practice boundary review and will be contacting all patients by the end of January 2017 who reside outside their outer boundary with a view to removing these patients by the end of March 2017. The practice will also consider reducing their inner boundary and will submit a request to NHS England by the end of February 2017.

The Practice Pharmacist will be starting a prescribing course in January 2017, taking 6 months to complete. At the end of this period, it is hoped that this role will be able to pick up more work from the GPs, thus easing their workloads. The intention is for this role to also undertake minor ailments clinics. There will also be a practice nurse trained on minor illness by June 2017, with a new nurse to complete the same course.

The Practice is taking part in the NHS Productive General Practice Quick Start Programme, which is aimed at supporting Practices to redesign processes and help with GP workload. This programme will be completed in February 2017.

Woodford have also expressed an interest in taking part in the international recruitment campaign with NHS England and the CCG.

It was agreed that the Committee would be asked to consider agreeing to a temporary closure until 31 August 2017 when the above actions will have taken place and the GP Registrar employed.

Fieldhouse

The current list size is 13,700 and the practice have 3.8 wte GPs currently working, which is low for a practice of this size. They also have regular locums employed.

During the period of closure the practice have introduced a new policy for letter coding, using non clinical staff and also explained that this has helped reduce the GP workload a little.

Despite in-house development of their nurses during the previous closure period, the impact of this has not yet been felt because one of nurses who was trained is now unfortunately re-locating to another area. However, one of their nurses is also undertaking a prescribing course to be completed in June 2017. Two other nurses are undertaking a minor illness course, finishing in March 2017.

All three practices have employed a trainee nurse for a 2 year fixed term period who is shared across the practices and will be offered a post in one of the practices at the end of the training period.

Fieldhouse confirmed that the impact of the Practice Pharmacist is now far greater as he is dealing with all requests from the hospital for new medication and is also looking at patient discharges. The Pharmacist is undertaking a prescribing course, due to be completed in June 2017 and this will further reduce the workload of the GPs.

The practice have also been awarded £10,000 from NHS England to support their recruitment and reported that they will be appointing a GP Registrar in August 2017. They are still trying to recruit an additional GP and will place an advert via NHS Jobs, to remain live. Fieldhouse will also take part in the International recruitment campaign with NHS England and the CCG.

They also plan to merge practices with the Greenlands Surgery in 2018, after initially joining each others' contracts from April 2017 for a year. This will allow them to review their rotas and agree joint working arrangements. It should be noted that any merger request will be subject to consultation and agreement from the Commissioners.

It was agreed that the Committee would be asked to consider agreeing to a temporary closure until 31 August 2017 when the above actions will have taken place and the GP Registrar employed.

Impact of closed lists on enhanced services

The Committee has previously agreed that whilst Practices with temporarily closed lists are not required to cease any existing enhanced services, there is the potential to restrict the practice from taking on any additional new services. This will be included within the response back to the Practice, but the Committee should note that this could have an impact on CCG plans to roll out enhanced services 'at scale'.

NHS England Consultation

The latest requests for extension to closure have been circulated for consultation and the following comments were received:

Practice	Comments received
Pelham Medical Group	This was discussed at a recent practice meeting. Whilst we understand the pressures and difficulties and the reasons for an application our only concern with regards to closing the list for such an extended period of time is the potential impact this could have on neighbouring practices who also have difficulties with capacity. It may create a domino effect of practices applying for list closures.

<p>Scartho Medical Centre</p>	<p>None of the practices have vacancies listed on NHS jobs, therefore we are unsure of the reasons from the practices to extend their application for list closures. We don't believe that Littlefield have any staff vacancies at present, therefore one assumes the only reason they are closed is to prevent people registering from other practices in building as they have their lists closed.</p> <p>We have stated during all of these consultations that the impact to other practices as all 3 practices have their lists close is great – many local practices are struggling with workforce and these further applications to extend the list closure will continue to negatively impact on local practices. It would be interesting to know what internal steps have been taken – down scaling enhanced service delivery to ensure delivery of core contract delivery.</p> <p>Our other concern is in relation to how long this will continue for? It is an endless cycle of list closure applications?</p>
<p>Dr A Sinha</p>	<p>I would just like to express a concern that I have as a practice with regards to all the practices in Freshney Green applying to further close their lists. I do not know what each practices personal circumstances are but my concern is from the point of view that we are a practice that has been a GP down now for over a year as we have been unable to recruit and being based at Cromwell Primary Care Centre we are one of the practices nearer to Freshney Green, therefore we may experience increased demand to register with us if there are less options in the area. We have already noted our practice population is slowly starting to increase over the past year.</p>
<p>Core Care Family Practice</p>	<p>The opinion from Core Care Family Practice Grimsby, regarding the closure of Freshney Greens GP list, is that we do not agree with this happening.</p> <p>We are close to the same geographical area and we are all under the same pressures.</p> <p>Perhaps consideration to stopping non NHS services first, would be a better option.</p>
<p>LMC</p>	<p>Littlefield Surgery</p> <p>The LMC has considered the application for Littlefield Surgery to extend their period of list closure and would support the application for extension for the reasons outlined in the LMC response to the original application for closure and those outlined below.</p> <p>In their application to extend their period of list closure the practice outlines a number of measures that they are implementing to try and alleviate the problems they are facing including increasing the use of telephone consultations, using non-clinical staff to perform coding and engagement with the NHS PGP Quick Start programme to try and improve their efficiency. In addition they are reviewing their boundaries and looking at working with other practices in the area.</p>

An extension to their period of list closure would hopefully allow for all of the above to become established and for the practice to benefit from these initiatives.

The LMC also considers that it is problematic at Freshney Green for one practice to reopen their list when a number of the other practice lists in the building remain closed

Woodford Medical Centre

The LMC has considered the application for Woodford Medical Centre to extend their period of list closure and would support the application for extension for the reasons outlined in the LMC response to the original application for closure and those outlined below.

In their application to extend the period of list closure the practice outlines a number of measures that they are implementing to try and alleviate the problems they are facing as a result of their difficulty recruiting and defunding. These include employing a pharmacist, using non-clinical staff to perform coding and engagement with the NHS England PGP Quick Start to achieve other ways of trying to increase their efficiency. In addition they are reviewing their boundary and looking at working with other practices in the area.

An extension to their period of closure would hopefully allow for all of the above to become established and for the practice to realise the benefits of these initiatives.

The LMC also considers that it is problematic at Freshney Green for one practice to reopen their list when a number of the other practice lists remain closed.

Fieldhouse Medical Centre

The LMC has considered the application for Fieldhouse Medical Centre to extend their period of list closure and would support the application for extension for the reasons outlined in the LMC response to the original application for closure and those outlined below.

In their application to extend their period of list closure the practice outlines a number of issues they are facing and measures they are taking to alleviate these. They have significant capacity issues and have employed a pharmacist and are training their nurses to manage minor illnesses to try and help the situation as they have had significant difficulties recruiting.

An extension to their period of list closure would hopefully allow for all of the above to become established and for the practice to benefit

from these initiatives.

The LMC also considers that it is problematic at Freshney Green for one practice to reopen their list when a number of the other practice lists in the building remain closed

Response to concerns expressed by other Practices

Both NHS England and the CCG understand the concerns expressed by other local Practices in response to the consultation regarding the Freshney Green Practices list closure requests. It is proposed that those Practices who have shared their concerns, noted in the table above, are approached to discuss the potential for interim support from NHS England to recognise the additional workload being placed on them, where they have seen increased list sizes. Depending on the agreement reached with those Practices, this may necessitate the Freshney Practices not being able to re-open to new patients earlier than the intended date.

Movements in list size over a 9 month period can be seen in the table below.

PRACTICE NAME	31.03.16	30.06.16	30.09.16	31.12.16	Total List Size Movement	Total % List Size Movement
Beacon Medical	13061	12915	12764	12683	-378	-2.89
Dr S Kumar And Partner	4199	4090	3990	3935	-264	-6.29
Clee Medical Centre	14416	14409	14363	14318	-98	-0.68
Dr D C Elder & Partners	9159	9257	9307	9398	239	2.61
Dr A M Bamgbala And Partners	6222	6234	6227	6223	1	0.02
Scartho Medical Centre	12724	12770	12888	12935	211	1.66
Fieldhouse Medical Group	14140	14034	13864	13725	-415	-2.93
The Roxton Practice	17425	20158	20309	20423	2998	17.21
Dr S Dijoux	3656	3706	3779	3825	169	4.62
Woodford Medical Practice	9921	9921	9894	9817	-104	-1.05
Dr O F Wilson And Partners	7203	7278	7289	7290	87	1.21
Littlefield	5670	5643	5630	5607	-63	-1.11
Dr Sinha	4285	4297	4310	4303	18	0.42
Roxton at Weelsby View	4054	4055	4010	3891	-163	-4.02
Dr R Mathews	4129	4218	4279	4312	183	4.43
Dr B Biswas	2509	2543	2584	2619	110	4.38
Dr. Quershi O.Z.	2962	3024	3095	3144	182	6.14
Greenlands Surgery	2440	2459	2502	2516	76	3.11
Raj Medical Centre	5803	5900	5942	6019	216	3.72
Core Care Family Practice (Cromwell Road)	2432	2375	2372	2419	-13	-0.53
Humberview Surgery	1884	1885	1914	1917	33	1.75
Healing Partnership	2112	2148	2138	2142	30	1.42
Dr I D S Chalmers And Meier	4478	4478	4485	4471	-7	-0.16
Dr A H Hussain	1980	1966	1929	1875	-105	-5.30
Medi Access Ltd	2486	2489	2485	2488	2	0.08

Open Door	1200	1243	1279	1268	68	5.67
Quayside Open Access Centre	2698	2628	2597	2592	-106	-3.93
Dr P Suresh Babu And Partners	2786	2805	2840	2857	71	2.55

Recommendation(s)

The Joint Co-Commissioning Committee is asked to:

- Note the contents of the report, specifically the update from each Practice and the actions and timescales
- Agree to allow temporary list closure to new patients until 31st August 2017 for Woodford Medical Centre
- Agree to allow temporary list closure to new patients until 31st August 2017 for Fieldhouse Medical Centre
- Agree to put in place an annual agreement between NHS England and Littlefield Surgery, which allows them to manage entry onto their list whilst maintaining the list size at around 5,600, subject to them agreeing to review the existing boundary with NHS England
- Agree to explore support for those other Practices within the NEL area that have expressed concern regarding the impact of these list closures and have also seen an increase in list size.