

**MINUTES OF A MEETING OF THE SCRUTINY COMMISSION FOR HEALTH ISSUES
HELD AT THE COUNCIL CHAMBER - TOWN HALL ON 3 AUGUST 2010**

Present: Councillors B Rush (Chairman), Y Lowndes (Vice-Chairman), P Nash, J Stokes, J Peach, N Khan and N Sandford

Also Present: Councillor C Burton
Councillor D Harrington
Councillor M Jamil (for part)
Paul Whitehead, Interim Director of Change, NHS Peterborough
Dr Mistry, NHS Peterborough

Officers Present: Denise Radley, Executive Director of Adult Social Services
Michelle Abbott, Lawyer
Louise Tyers, Scrutiny Manager
Michelle Abbott, Lawyer
Denise Radley, Executive Director of Adult Social Services & Performance

1. Apologies for Absence

Apologies for absence were received from Councillors Arculus and Fower. Councillors Peach and Sandford were in attendance as substitutes.

2. Declarations of Interest and Whipping Declarations

Councillor Burton declared a personal interest as he was a registered patient at the Alma Road Practice.

Councillor Sandford asked whether Dr Mistry had any financial interests in the process as he was a doctor at a surgery in the local area who could benefit if the Alma Road Primary Care Centre closed. Dr Mistry responded by saying that he had no direct financial interest in any decision made to close Alma Road as patients could register with any GP practice in the City. He was in attendance this evening as the lead advisor to NHS Peterborough on this issue.

3. Future of the Alma Road Primary Care Centre

Further to the last meeting, the report presented an updated consultation document on the future of the Alma Road Primary Care Centre.

The Chairman made a statement reminding members that whilst the issue was very contentious the role of the Commission was to offer effective scrutiny and challenge to the consultation document. Members needed to confine themselves to questions of fact and explanation as to how services could be delivered in the future in a way which was both constructive and courteous to all attending the meeting.

Paul Whiteside, Interim Director of Strategic Change at NHS Peterborough, advised that the consultation document had been changed to take on board the views made by the Commission at the last meeting. It particularly made more clear the benefits and disbenefits of the Alma Road Centre and also updated the figures in relation to the number of users of the Centre; however it needed to be remembered that the other surgeries in the area had over 50,000 registered patients. A review had taken place on the premises of other GP

practices in the area and it was found that there was a varied mix in the condition of the premises. NHS Peterborough now proposed to extend the consultation process so the Commission could consider this issue again at the meeting on 13 September.

Questions and observations were made around the following issues:

- Councillor Peach advised that he was concerned at the events which had followed the Commission's last meeting, particularly as the PCT did not want to meet with the Commission again following that meeting. *The Scrutiny Manager informed the Commission that the PCT had not tried to avoid attending another meeting but due to the logistics of trying to arrange another meeting within the consultation timescale it had been proposed to send the revised consultation document to Commission members outside of the meeting, however now the consultation period was due to be extended it had now been possible to hold another meeting.*
- Why was the information requested on the other surgeries not provided as there was concern that the document still contained inaccuracies? *Mr Whitehouse asked for clarification as to what inaccuracies remained in the document. The distances of the other surgeries to the City Care Centre had now been included and had been calculated on an NHS system which measured as the crow flies.*
- What were the costs per patient of the Alma Road Centre? *The Alma Road contract was let under a different system and could not be compared with other GP practices.*
- The consultation document stated that all of the practices which were close to Alma Road were PMS practices which would be very difficult to terminate without cause, did that mean that Alma Road would be easier to close so that was why that option had been put forward? *The rationale for the proposal was that there was already sufficient GP provision close to the Centre which provided a very large number of similar services. The consultation was about seeing whether other options could be suggested. PMS contracts were long and unless there was performance issues the PCT could not take action. If a GP retired then it was usual for the practice to appoint another practitioner. In most cases the patients were loyal to the practice and not a specific GP. The rationale for the proposal was multi-factorial.*
- There was some concern at the restrictive practices of other GPs, including only taking patients from certain areas. The unique point of Alma Road was that anyone who lived, worked or visited the City could access its services. This uniqueness had not been publicised well.
- The City Care Centre was only a nurse led facility where Alma Road was GP led. *The City Care Centre was nurse led but the out of hours service was based there so a doctor input was available during those times.*
- Part of the case to close Alma Road was that there was a duplication of services, which GPs were duplicating the hours of Alma Road? *Many practices had now extended their hours but it was accepted not to the same level as provided at Alma Road. The City Care Centre worked the same hours as Alma Road and GPs were available during out of hours so the hours services were available were similar to Alma Road.*
- What happened to the patients who used the walk in service at Alma Road, were they fully dealt with at the Centre, referred to A&E or referred to their own GP? *If they could the clinicians at Alma Road would deal with the case. Sometimes the patient would be referred to their own GP if it was a chronic condition or if they needed medication changes. Any acute medical emergencies would be referred to A&E.*
- What was the number of patients using the out of hours service? *The out of hours service was seeing around 1500 patients a month.*
- The document stated that Alma Road was originally commissioned to have 2000 registered patients at the end of its second year but the Centre was currently treating over 500 walk-in patients so was already over its target for that element of the service. At the current speed of registration it was conceivable that it would reach the target of 2000 at the end of year two. *It was accepted that the Centre could achieve*

2000 patients but that number of patients would be small for a GP practice. There were a multitude of factors as to why the Centre could be closed.

- *The number of patients was continually increasing, how many other GPs had increased their registrations by 50% in three months? In the first 12 months of the Centre there were only 400 registrations, only since the issue of the future of the Centre had arisen had the numbers increased. The Millfield and Thistle Moor practices had increased their patient numbers.*
- *How would the outcome of the consultation be evaluated? The PCT was not in a position to judge the outcome. There was no specific threshold for making decisions on such matters. A feedback document would be developed and a recommendation would then be taken to the PCT Board which would take into account all of the issues in the round.*
- *If Alma Road was closed, how would this help to reduce the number of patients visiting A&E? The PCT was addressing the appropriate use of A&E. If Alma Road did not close then the expected savings would have to be found from somewhere else.*
- *Was it true that Alma Road had not been encouraged to build up its registered patients list? The Centre had been commissioned to have 2000 registered patients by the end of year two and the PCT was not aware of any directions to discourage registration of patients.*
- *The facilities of some of the other practices in the area were not in a good condition. Was there the possibility of some of the practices merging or sharing the facilities at Alma Road? GPs were individual contractors so it was the responsibility of individual surgeries to negotiate whether to merge but some practices were actively looking to find alternative premises. Alma Road did not work as it currently stood and the PCT was open to any proposals other people come up with.*
- *The proposal to close Alma Road was depriving other surgeries of the chance to move into new facilities, would the Sergeant Street surgery be willing to move into Alma Road? People were not signing up at Alma Road because of the uncertainty of its future. The patients at Sergeant Street were mainly registering at Westgate Surgery. The services at Alma Road were currently being provided in portakabins.*
- *The suggestion for other surgeries to be approached about sharing facilities at Alma Road should be actively facilitated by the PCT. The PCT was open to any ideas. The closure of Alma Road was an option if no other options come through the consultation process.*
- *There was concern that if Alma Road was closed people would go to A&E which could incur additional costs for the PCT. There were various pathways available to deal with specific conditions and the City Care Centre was led by highly trained nurses. The PCT was already looking at the most appropriate use of all services.*
- *Due to the mix of population in the area there was concern that people would not know where the City Care Centre was and so would go to A&E instead. Was there a guarantee that the City Care Centre would remain open? There were currently no plans to close the walk in facility at the City Care Centre.*

With the permission of the Chairman other councillors and the public gave their views.

- *A lot of money was being spent on old infrastructure so Councillor Khan's suggestion of sharing premises should be looked at.*
- *Councillor Burton declared that he was a patient at Alma Road. The document made use of statistics but it was important to look at trends rather than at one point in time. 14 languages were spoken at the Centre and would other practices be able to support those languages? The growth of patient numbers at Alma Road would be greater if the Centre was not under the threat of closure. How would the consultation be publicised? An Engagement Strategy had been developed and seen by the Commission at the last meeting. A range of fora would be used including holding a*

number of public meetings and the PCT was looking to engage with as many people as possible.

- Had any surveys been undertaken with patients to see whether they preferred to see a GP or nurse? *Systems were now in place for people to see the most appropriate clinician as it was not effective for a GP to see every patient.*
- What finances would be set aside for patients to attend the City Care Centre, for example, public transport in the evening as it would be difficult to find transport home especially at weekends. *No specific transport arrangements had been put in place but the City Care Centre was in a sensible location.*
- The Manager of the Pavilions Care Home explained that a number of GPs would not come out to residents at the Home as it was not in their area but Alma Road provided them with an excellent service. If a resident had to go the City Care Centre then that would mean that a member of staff would have to accompany them and would not be available at the Home. Alma Road was a key element of the local community but had not been advertised well throughout the City.
- Closing Alma Road would cost the PCT more as people would go to A&E instead. Alma Road was important to an area where there were significant differences in health equalities compared to other areas of the City and this would only increase with the closure of the Centre. The suggestion of Councillor Khan around the sharing of premises needed to be supported. *The PCT was already looking to address the number of A&E attendances. The area was already well covered for primary care with a number of other practices close by.*
- A local resident gave her personal perspective of how Alma Road was supporting her and her daughter who had severe diabetes. She believed that the closure of Alma Road would put her daughter in danger and reduce her quality of life.

RECOMMENDATIONS

The Chief Executive and the Chairman of NHS Peterborough are recommended:

- (i) that the consultation on the future of services at the Alma Road Primary Care Centre does not go ahead at this time and that NHS Peterborough return to the Scrutiny Commission in September with detailed information on the other GP practices in the area including patient numbers, services provided and the condition of the estate; and
- (ii) that NHS Peterborough facilitates discussion amongst the other GP practices to see if arrangements and savings could be made by possibly sharing accommodation with the Alma Road Primary Care Centre.

CHAIRMAN
7.00 - 9.35 pm