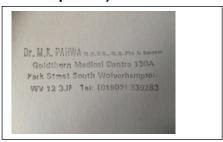


Application for consideration of a contractual change (for example subcontracting arrangements, change to services, change to agreed opening hours, change in level of commitment for Doctors, practice boundary changes, etc)

(Please add additional pages if you have insufficient room to complete fully and depending upon the nature of change requested, not all sections of this form will need to be completed)

Practice stamp



Proposed Change Closure Of Park Street South (Branch Practice) to

Bilston Health Centre

Proposed Date of Change 01/11/2016

Practice M/Y Codes M92015

Provide the Practice rationale for the proposed change:

Our senior partner, Dr M Pahwa, has been providing medical services as a GP in Wolverhampton for over 40 years and has served the community from two sites. The Main site is located in Bilston Health Centre and has a registered list of circa 2000 patients. The branch site is located on Park Street South and has a list size of 1650 patients and at present the patients are seen in a dilapidated building that has been outlined as being unfit for the purpose of health care delivery in a recent CQC assessment. The current land lord is the practice senior partner, Dr M Pahwa, and he is due to retire on 31/10/2016 and he envisages not allowing services to continue from this site in the longer term.

The partner has outlined a willingness to contribute some money to the repair of the building but would expect NHSE / CCG to pick up the larger proportion of the costs to bring this building in lines with Equality Act / Infection prevention and Control standards as well as basic commercial property regulations.

The current partnership does not feel that the delivery of services from this site is a viable long term option.

Although the branch site is located in a different locality to main site (South West v South East) many of the patients have been happy to travel to the Bilston health Centre site when there has been no doctor or limited staff at the current branch site. The Distance between main practice and branch site is 3 miles.



Concerns have been raised about the continuing delivery of service in a safe manner from the branch site. In addition to the safety concerns the branch site does not provide any additional / enhanced services to patients and the team are only able to deliver core services.

We envisage that this situation is not feasible in the long term with the move to push more activity into General Practice and the drive to increase provision in primary care.

It is likely that the patients registered at the site will be disadvantaged if services continue to be delivered from this site.

The current branch site has limited space for clinicians, does not meet Equality act regulation or current fire safety regulations. The practice would also require some work to meet the current infection prevention guidance.

The partnership also have some concerns about lone worker safety in the current setting.

What options have you considered, rejected or implemented to relieve the difficulties you have encountered about your issues/open hours/practice list and, if any were implemented, what was your success in reducing or erasing such difficulties?

The current partnership was formed on 15th July 2016 and has been working closely with retiring partner and has also met with patient representatives to outline all viable options.

(Minutes of patient meetings included in appendix)

A discussion has also taken place with colleagues at NHSE and also CCG. We have communicated with the local GP practices to make them aware of our intention and concerns about capacity.

The options identified have been discussed with patients from the surgery as well as Dr Pahwa and the other partners.

Options

1. To close the Branch surgery at Park Street South (Goldthorne Park Surgery)

Closure of the branch surgery would ensure full consolidation at the main site in Bilston and allow for the following



- Access to more essential and enhanced services (routine and emergency) – increased number of appointments. We plan to ensure that enhanced service provision is available locally to all patients.
- Home visits We plan to review home visiting provision to ensure that we can provide visits across to those patients that require this form of access. We plan to increase uniformity in the way visits are allocated and conducted.
- booking routine appointments/requesting blood test results, etc; we plan to increase the number and types of appointments
- delivery of a full range of additional and enhanced services;

Patients will remain registered with the practice but all future consultations and contacts will take place at Bilston Health Centre

If patients do not wish to attend Bilston Health Centre or to remain a patient at the practice then they have the choice to register with another practice in the locality of Goldthorne Park. These include

- Ednam Road Surgery 0.2 Miles
- Duncan Street Surgery 0.6miles
- Parkfields Medical Centre 0.6miles
- Lea Road Surgery 0.6 miles
- All Saints Surgery 0.7 miles
- Pennfields Medical Centre 0.7miles

The practices have all been contacted to inform them of the potential closure of Goldthorne Park Surgery, all have open lists and capacity to receive new patients.

2. Keep current branch site open.

This option would involve the funding of significant repair and renovation to the current building to bring it in line with modern building regulations / Equality Act 2010 / Infection Prevention and Control principles.

This will require an agreement from NHSE and / or the CCG to agree to invest in this building. With the investment there is a likelihood that the revenue costs will increase as they are reviewed in line with the renovation.

Unfortunately we have missed the window to apply for the Estates and Technology Transformation Fund and local decisions have already been taken about the allocation of this pot of money. Further investment from the CCG / NHSE would have to come from Improvement grant.



We envisage that the cost of repair would be substantial and due to the limited space in and around the practice there is likely to be a period of closure whilst this work is carried out.

We envisage that as a minimum the work will involve:

- A) Reconfiguration of internal space to ensure that all rooms are suitable for use as a clinical space with ample room for wheel chair / push chair access and the ability to carry out full clinical assessment or all patients with preservation of dignity and maintenance of safety.
- B) Change of all floors to surfaces more suitable for infection prevention and control.
- C) Installation of safety features such as hard wired fire and smoke systems.
- D) Improved access to second floor (potentially a lift) to allow full utilisation of clinical spaces.
- E) Improvement to frontages to make access to car parking and also allow ambulance access to practice
- F) Alteration to access and exit to ensure these are suitable for wheel chair and other users.

Of which CCG are you or propose to be a member?

Wolverhampton CCG

If applicable, has the CCG approved your proposal? (Please provide evidence of approval/comments from your local CCG)

We have been undertaking informal discussions with the CCG and have outlined our proposal to close the branch site due to the concerns about future service delivery from the site.

We have provided formal notice to the CCG of our plans to close the branch surgery (copy of email attached in appendix).

We will use this application process to inform the CCG of our formal intention to take this case forward. We have also completed a business case for the CCG Joint Commissioning board.

Full details of the benefits you feel your registered patients will receive as a result of this proposed change.

Please provide as much detail as possible as to how the current registered patients will continue to access services, including consistent provision across:



West Midlands

- Access to essential services (routine and emergency) The
 patients currently registered at the main practice and so the records will
 remain in the main practice and on the EMIS system used across the
 main and branch surgery
- **Home visits** Home visits will continue to be provided from the main practice site. The practice boundary will be expanded to reflect the closure of the surgery and the maintenance of care to patients living at a distance from the main site.
- Booking routine appointments/requesting blood test results, etc; There will be no change to the service provided to registered patients except that location will change.
- Additional and enhanced services We envisage an increase to the number of enhanced services provided to patients that remain registered with the partnership – we have listed the services later in the report.
- Opening hours We will maintain the current opening hours at the main practice and we plan to work with the PPG (once formed) to review provisions and move to opening more hours in the day and offering extended opening hours.
- Impact on other parts of the local health economy as a result of the practice proposal - We have made contact with local practice managers and also CCG to ascertain the impact and support any patient transition. We envisage an overall positive impact with patients gaining from the change of service provision. In addition we envisage a reduction in hospital based activity for this group of patients as more enhanced services are provided in the community and this should have a net positive benefit to patients and the health economy.
- **Extended hours** Opening hours will be reviewed in line with the list size and we aim to unify opening times with other practices in the area that we manage. This review will include the representation from patient groups.
- Single IT and phone system We are in discussions with the CCG IT dept to outline a plan to move the telephone and IT services out of the closing site. We have also been in contact with telephone system provider. We plan to keep the correct telephone numbers and ensure that they divert to the main practice site.
 - **Premises/ facilities** all services will continue to be provided from the main site at Bilston Health Centre.

Patients that select to remain registered at the practice and be seen at the main site will see services delivered from purpose built health centre with all facilities meeting



the requirements of equality act and infection prevention and control guidance.

We plan to increase access to a number of health care professional under one roof including nurses, nurse prescribers, clinical pharmacists, midwifes, Health visitors, counselling services and General Practitioners

We will offer access to both male and female clinical staff.

We will provide access to multi-lingual staff able to communicate in a number of different languages. Despite the planned closure of the branch surgery we do not envisage any redundancies and we will ensure that the administration staffs are absorbed into our current staffing structures. This will give the staff more security and increasing capacity to train and develop. Many of the current staff are on short term revolving contracts and these will be changed to full term employment. Keeping the same staff will ensure that patients can continue to associated with the same familiar faces they are used to from the branch surgery.

Patients will be seen in safer clinical and working environment.

Increased range and number of appointments provided on a daily basis. Access to enhanced services on site including:-

- Spirometry
- ECG
- Acupuncture
- Contraceptive services inc insertion of implants and coils
- Minor surgery service in a purpose built treatment room
- Simple and complex dressings
- Phelbotomy services
- Teaching practice support the training and development of staff as well as training of nurses and doctors as part of the west midlands deanery.
- Online appointments
- Use of electronic prescribing The current practice chose not to implement this and is the only practice in Wolverhampton to have not implemented this service.

We feel that the overall impact on the local health economy will be a positive one as the closure of our branch site will ensure that any released funding can go into improving services from Bilston Health Centre (Main practice) allowing us to focus more on health care outcomes.

We plan to ensure that the telephone line from Park Street South is diverted to the



West Midlands

main site in Bilston Health Centre and advertise widely the change to practice delivery – thus ensuring all patients are able to contact medical services at times of need.

The current phone system at the branch surgery is obsolete and does not allow for call recording. We plan to review the telephone so that in future we can expand the range of services we offer to include a formal telephone triage system and also consultations based on web based software.

We are working with Wolverhampton CCG Information Technology dept to identify a plan that will allow us to move utilities out of the Park Street South site and host these in our other practices to ensure this process is seamless.

Please attach any documentation/agreement from the external Provider if the practice is intending to sub contract services to another Provider to deliver primary care services (eg. half day closing/opts outs). The Agreement must describe how and what routine services are to be provided including arrangements for accessing patient medical record. A copy of the Service Level Agreement with the sub-contractor must be attached.

A copy of the practice current and proposed practice area is required for applications for changes to practice area

Describe impact of proposed change upon practice boundary (inner and outer):

We envisage an expansion of the practice boundary for our main site to include all the areas covered by the Park Street South branch surgery. All patients have the option to remain patients at Bilston Health Centre and in this way they will continue to receive a complete service from us.

If applicable, please provide the outcome of consultation with your patients (PRG) about this proposal and how the Practice will communicate the actual change to patients and ensure patient choice throughout (provide written evidence (agenda/minutes of meetings, etc to document outcome of patient views with your application): Depending upon the type of practice application, NHS England/CCG will not be able to consider the Practice application until evidence from patient consultation has been received

Patient engagement

We have taken the action of holding a number of patient engagement events and have written to all the patients (over 800 households) to ensure that all are aware of



a potential change to the service being provided and engagement events being held to discuss these matters. The options for patient choice have been outlined in the letter.

(Copy of letter attached in appendix)

The partnership has to date has held three meetings on the following dates

- 21st September 2016
- 5th October 2016
- 12th October 2016

There has been a very small turnout to these meetings. We believe that the turnout has been limited due to the lack of a formalised PPG – we were told that the PPG in place during the previous partnership had disbanded when the new partnership had been formed None of the patients that attended the meetings were aware of an active PPG.

We are prepared to hold further meetings with patients to ensure they are informed of the decisions made.

If the decision is made to close the branch site then the practice will communicate to patients via:

- Letters: detaining all options for patients with a list of other practices patients can register with along with the process for registering with a new practice' and a telephone line that patients can call to get further information and support in registering with another practice.
- Letters will also go out in several languages to reflect the patient population..
- Website: all information will be posted onto our website
- NHS Choices: will be informed of all changes
- Posters: in reception area

Access for patients – opening hours and appointments.

Practice list size	1650
Current number of appointments per week	117
Proposed number of appointments per week	>117

The current branch site closes on Thursday afternoon. We envisage that patients choosing to change to the main site will note that this surgery will not close on an afternoon and will provide appointments in line with increasing list size. We currently provide well above the 70/1000 appointments per registered patients per week outlined by the BMA



Our last audit of appointments showed an average of 90/1000 registered patients per week

What arrangements are to be made in the event of there being a reduction in appointments availability/services (please list)

We do not envisage a reduction in appointments – we provide a range of appointments with a number of different health care professionals and therefore in expectation of an increase we are in the process of recruiting more staff. We have a number of new recruits awaiting the end of notice periods with current employers.

Current opening hours -

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
9-630	9-730	9-630	9-1	9-630	Close	Close

Proposed opening hours

site	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
BHC*	8-630	8-630	8-730	8-1	8-630	Close	Close
Potential	8-8	8-630	8-8	8-630	8-630	8-12	Close

If applicable, identify increase/recruitment of additional workforce (Please list details)

We have recently appointed 2 ANP and 2 new doctors. We have also recently taken on 5 clinical pharmacists who are currently undertaking training under the NHS pilot.

We have also appointed a practice nurse and a health care assistant.

We continue to have an open advert in BMJ and have a recruitment agency advert to ensure that we are constantly in contact with potential new candidates.

Any other services provided

As outlined above. NA to closure but full cohort of enhanced services provided from our Wolverhampton sites

Do you have any other information to bring to the attention of NHS England/CCG about this application?

CQC Report. http://www.cqc.org.uk/sites/default/files/new_reports/AAAB9857.pdf
Organisational Chart – see appendix 1



Sub-Contracting: Additional Information (The Practice may have already provided this information above):

N/A				
		the following:		
(a)	the	name and address of the proposed sub-contractor;		
(b)	the duration of the proposed sub-contract;			
(c)	the	services to be covered:		
(d)	the	address of any premises to be used for the provision of services.		
To be	sign	ed by all parties to the current contract		
Sig	ned	Mash		
_				
F	Print	Gregory Moorhouse		
С	Date	02.11.2016		
Sig	ned	K A		
F	Print	Dr Kamran Ahmed		
D	Date	02.11.2016		
Sig	ned	Pa_		
F	Print	Dr Virinder Rai		
D	Date	02.11.2016		



Please continue on a separate sheet if necessary

Note: this application does not impose any obligation on the NHS CB to agree to this request.

Please return your completed and signed form to:

By Email:

England.gp-contracting@nhs.net

Or

By Post to:

Primary Care Contracting Team

NHS England (West Midlands)

St Chads Court

213 Hagley Road

Edgbaston

Birmingham

B16 9RG

Appendix

- 1) JCC report for Wolverhampton CCG
- 2) Minutes of PPG meetings x 3
- 3) Email CCG
- 4) Email Practice Managers
- 5) Patients letter
- 6) Public notice



