Scrutiny Board (Health)

Scrutiny Inquiry: GP-led Health Centres

Working Group Meeting: 21 August 2008

Present: Members

Councillor Grahame (Chair)
Councillor Kirkland

Officers

Emma Wilson (Leeds Primary Care Trust (PCT)) Carolyn Walker (Leeds PCT) Christine Farrar (Healthy Leeds Partnership) Steven Courtney (Principal Scrutiny Adviser)

Laura Nield (Scrutiny Adviser)

Background

At its meeting on 17 June 2008, the Scrutiny Board (Health) agreed to undertake a scrutiny inquiry to consider the proposals for and implications of developing GP led Health Centres (Polyclinics) in Leeds. The terms of reference for this inquiry was agreed at the Scrutiny Board meeting held on 22 July 2008.

An initial working group meeting was held on 19 August 2008, where it was agreed that Leeds PCT be invited to attend a further meeting to discuss the proposals for establishing a GP-led Health Centre in the Burmantofts area of the City.

These notes provide a summary of the main discussion points and the agreed outcome/ action points arising from the working group meeting held on 21 August 2008.

Summary of discussion

Further to the summary information previously provided and by way of introduction, the following points were highlighted by Leeds PCT:

- The PCT was not developing a polyclinic. It was proposed to establish a GP-led Health Centre on the current Burmantofts Health Centre site.
- The development would address the national mandate to develop a GP-led Health Centre within the City and provided some scope for providing additional facilities. The PCT was responsible for ensuring value for money.
- In the short-term, the planned refurbishment would be completed by 1 December 2008 and the development would make use of the accommodation vacated by the Dr. Potts surgery.
- It was recognised that the current Health Centre had a number of limitations and as such may only offer a temporary solution. In the longer-term, the PCT was looking at other opportunities.
- Costs associated with the refurbishment part of the PCT capital programme.
- Start-up cost associated with the new service to be met by the PCT and funding had been allocated in order to provide a GP-led service from January 2009.

In response to a range of questions, the following additional points/ information was provided and discussed:

Procurement

- It was hoped to award a 3-year contract by 1 December 2008 and this represented an opportunity to provide/ procure some additional capacity in the City.
- It was felt that the PCT's previous procurement experience would prove to be beneficial.
- A significant difference in the proposed service would be patients (registered with another GP) accessing the service would be placed onto the correct care pathway rather than being referred back to their own GP.
- The procurement process was such that the detail of which/ how services would be delivered would form the basis of proposals submitted by potential providers. This would include:
 - Details of any new/ additional services.
 - The number of GPs/ other professionals.
 - Working with other agencies.

All bids would then be assessed as part of the tender evaluation process to establish a reputable, quality 8:00am-8:00pm, 7 days per week all year round service

It was acknowledged that a number of projects had promised improved patient access through extended opening hours and more flexible arrangements. However, such proposals had not always proved sustainable and had been reduced over time. The working group sought some assurances that the proposed service would continue to be an 8:00am-8:00pm, 7 days per week all year round service.

Consultation

- Initial analysis of the consultation around the proposals indicated the following issues as being important to patients:
 - Patient choice
 - The ability to see a GP quickly (longer opening hour and greater flexibility)
 - Accessing services through a multi-purpose facility
- Some concerns over the proposals had been voiced in terms of the potential impact on other local GP surgeries.
- It was suggested that some of the concerns raised by GPs may have resulted from 'fear about their own businesses'.
- There was a role for the PCT to ensure current GP surgeries are not affected by the proposals and are fit-for-purpose.
- The development of the new centre may raise standards and/or improve accessibility of services across other GP surgeries.

Patient numbers

- The current Lincoln Green GP practice (operating at the Burmantofts Health Centre) operated with 2 GPs and a senior nurse practitioner with a patient list of 3200 (approx.)
- It was suggested that the new centre would register up to 2000 patients in the first year.
- It was not thought that Leeds has a large population of unregistered patients and proposals for registering new patients would be determined by the successful bidder.

 It was envisaged that the centre would cater for registered, walk-in and unregistered patients – with the aim of patients being assessed within 20 minutes and seen within 2 hours.

Agreed Outcomes

- a) Confirmation of the following points regarding the current Burmantofts Health Centre was requested:
 - Reasons for the closure / withdrawal of Dr Potts GP surgery/ service and when services ceased?
 - Details of the works planned refurbishment works to be undertaken and the level of expenditure?
- b) It was also agreed that a site visit to the current Health Centre be arranged as soon as possible.
- c) Detailed analysis of the consultation be provided as soon as practicable, ideally to be reported to the Health scrutiny Board meeting scheduled for 16 September 2008.

Steven Courtney Principal Scrutiny Adviser