

## **MEDWAY COUNCIL**

**Gun Wharf  
Dock Road  
Chatham ME4 4TR**



# **Health and Adult Social Care Overview and Scrutiny Committee**

## **Health Service development or variation - assessment form**

In order that the Health and Adult Social Care Overview and Scrutiny Committee can assess whether it agrees that a proposed service change or development is “substantial” please provide the following details.

### **A brief outline of the proposal with reasons for the change and timescales**

DMC Healthcare Limited provides a GP practice and walk in centre service from temporary accommodation in a clinical modular building on a PCT owned site at Canterbury Street, Gillingham. The modular facility is leased and planning approval expires on 31 October 2013.

It was originally intended to develop a purpose built facility on this site to accommodate the GP practice and walk in centre. However, these plans have been reviewed and an alternative proposal developed in conjunction with Medway Community Estates and DMC Healthcare Limited.

This proposal is to relocate this service into the nearby Balmoral Gardens Community Healthy Living Centre (CHLC). This is considered a more appropriate option for the following reasons:

- Patients will benefit immediately from their care being delivered in a new, more comfortable, purpose built facility. There is evidence that care in this sort of environment improves health outcomes. It is certainly more pleasant for people
- Balmoral Gardens also offers other clinical services – including a 100-hours pharmacy, where patients can get prescriptions seven days a week
- Balmoral Gardens is fully accessible and has better public transport connections than the existing site. A large public car park with disabled parking spaces is very close by
- Commuters using Gillingham railway station will have improved access to walk-in care
- Balmoral Gardens has the flexibility and scope to offer increased walk-in attendances, if needed, and to cope with projected population increases
- The utilisation of purpose designed clinical areas at Balmoral CHLC will be improved with better usage of other space. This represents better use of NHS resources
- There will be revenue savings and a capital receipt from the sale of the land, which can be invested in other NHS services.

The proposal does not reduce any service or staffing.

The high level proposed timetable is as follows:

Notification of proposal:	27 August 2012 to 13 September 2012
Information gathering/evaluation:	27 August 2012 to 28 September 2012
HASC meeting	9 October 2012
Engagement phase:	10 October 2012 to 20 November 2012
Board consideration:	MCCG Board 21 November 2012
Implementation phase:	22 Nov 2012 to 29 March 2013*
Post Implementation phase:	2 April 2013 to 24 April 2013

\*These dates assume that most preparatory work for implementation will have been undertaken at risk in advance of approval.

### Extent of consultation

- Have patients and the public been involved in planning and developing the proposal?
- List the groups and stakeholders that have been consulted
- Has there been engagement with the Medway LINK?
- What has been the outcome of the consultation?
- Weight given to patient, public and stakeholder views

- There has been no formal consultation with patients and public to date in developing this proposal. However, the practice has been asked to informally engage with clients to ascertain their views on relocating the service, and initial feedback is positive.
- The notification phase included obtaining approval in principle from both the commissioning and estates directorates of the NHS Kent and Medway cluster. In addition, the relevant ward councillors have been notified of this proposal.

From 10 October 2012, the consultation phase will engage with the wider patient base, public, Medway Health Network, Medway LINK, GPs, Practice Managers, voluntary and community groups to identify any issues that might arise from this service relocation.

This ongoing notification and consultation will include:

- Patients and public
- Medway Clinical Commissioning Group
- Ward Councillors
- Local MP
- Medway LINK will be asked to promote the consultation with their participants to ensure a wide range of views are gathered
- GP practices, including those already located at Balmoral CHLC
- Payden's Pharmacy, located at Balmoral CHLC

The purpose of this thorough information and engagement exercise will be to enable us to become aware of any concerns, so that we can put in place mitigation.

Proposed consultation and engagement activities include:

- Possible public information meeting
  - Drop in sessions
  - Opportunities to explore the new location
  - Suggestion boxes/surveys around potential improvements to the service once it has relocated and, to better understand behaviours, finding out what would make residents use their own GP rather than a walk in centre
  - Contacting voluntary and community services and offering to visit their group to talk about the change
  - Writing to all GPs and other relevant healthcare professionals to advise of the change
  - Briefing MPs and local media, including the potential for face to face briefings
- c) No specific engagement with LINK to date, but this is part of notification and consultation plans
- d) Not yet completed.
- e) Any concerns raised during the notification/consultation phase will be considered to see if and how the issue can be resolved.

A short consultation document has been prepared to summarise the proposals. All responses will be evaluated as they are received and any concerns arising from the proposals considered.

Medway Clinical Commissioning Group (MCCG) will be asked to approve the final recommendations on 21 November 2012. They are supportive of the proposal in principle.

### **Effect on access to services**

- (a) The number of patients likely to be affected
- (b) Will a service be withdrawn from any patients?
- (c) Will new services be available to patients?
- (d) Will patients and carers experience a change in the way they access services (i.e. changes to travel or times of the day)?

- (a) The patient caseloads/activity for the services are:

Practice caseload (includes Canterbury Street and Twydall): circa 4,000  
Walk in attendances 2011 – 2012: circa 14,000

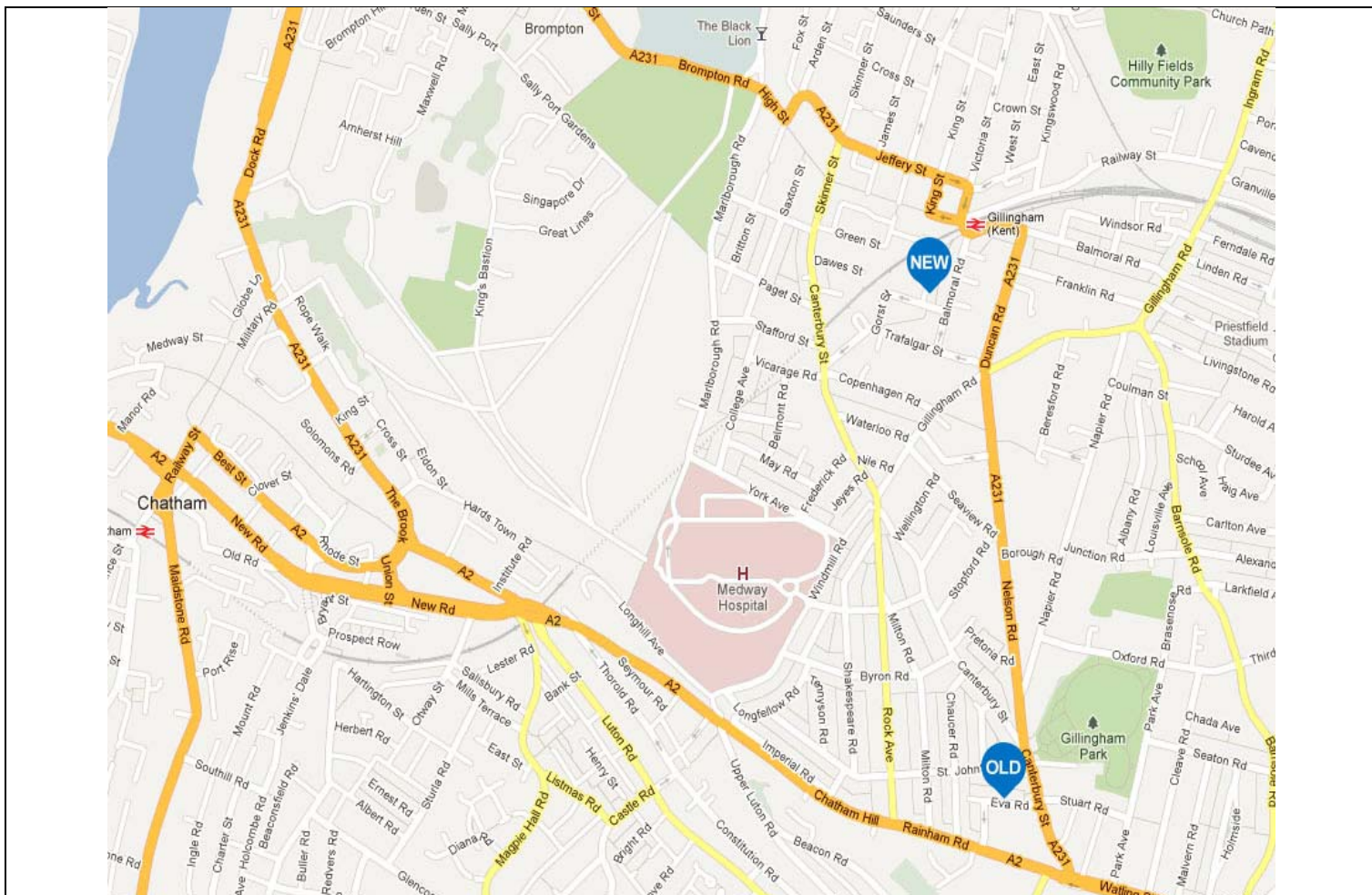
- (b) There will be no reduction to the level of services provided resulting from this proposal. In fact, the new site will present more flexibility and scope for increased walk-in attendances

- (c) No new services will be provided as a result of this relocation.
- (d) GP surgeries and appointments will be available on the same days at the same times as existing provision, but from the alternative location. Access to the walk-in clinics is maintained.

Balmoral Gardens Healthy Living Centre is 0.9 miles from Canterbury Street walk-in centre, and is better served by public transport.

There will be no change to the DMC Healthcare Limited services provided at Twydall.

A map of Gillingham town centre showing DMC at Canterbury Street (**OLD**), Balmoral CHLC (**NEW**) and Gillingham train station is shown below. Both sites are on or close to main bus services routes



### **Demographic assumptions**

- (a) What demographic projections have been taken into account in formulating the proposals?
- (b) What are the implications for future patient flows and catchment areas for the service?

Discussions with Public Health were held during the information gathering phase to determine if any demographic projections needed to be taken into account. These confirmed that, as there will be no service changes, just a change of buildings, this would not be relevant. However, we have considered information about where patients are coming from and how, to ensure no users are adversely impacted by the relocations.

The new location will provide the flexibility/capacity to cope with projected population increases and also improve access to walk in appointments for commuters using Gillingham railway station

### **Can you estimate the impact this will have on specific groups?**

- (a) What will be the impact on children?
- (b) What will be the impact on people with disabilities?
- (c) What will be the impact on older people?
- (d) Has an equalities impact assessment been carried out of this proposal?

(a) to (c) No adverse impacts for any group have been identified in developing these proposals. None have been highlighted during the discussions with service providers or in the engagement so far with service users. It is accepted that some people may have further to travel to Balmoral Gardens but that it will be nearer and more easily accessible for others.

(d) A summary Equality Impact Assessment has been undertaken with no adverse impacts identified.

## Choice and commissioning

- (a) Will the change generate a significant increase or decrease in demand for a service arising from patient choice, payment by results and practice based commissioning?
- (b) Have plans been made for “financial cushioning” if additional capacity is not taken up?
- (c) Is the proposal consistent with World Class Commissioning and reflected in NHS Medway commissioning plans?

- a) No change in the demand through the planned change in location is anticipated. There will be an improvement in the environment that clients will be treated in, and where professionals will operate from.
- b) Plans for financial cushioning are not relevant to this proposal.
- c) This proposal is consistent with the NHS Medway Estates Strategy to improve patient environments and access to primary care services and also the objectives within the Commissioning Strategy. Estate Optimisation is a key deliverable in the national Quality Innovation, Productivity, and Prevention (QIPP) agenda.

## Clinical evidence

- (a) Is there evidence to show the change will deliver the same or better clinical outcomes for patients?
- (b) Will any groups be less well off?
- (c) Will the proposal contribute to achievement of national and local priorities/targets?

- a) The same services will be delivered in a better environment. There is evidence to show that health outcomes are improved in a better environment. A 2003 report (Lawson B, Phiri M, Wells-Thorpe J (2004) *The architectural healthcare environment and its effects on patient health outcomes a report on an NHS Estates funded research project*. The Stationery Office (TSO)) from NHS Estates indicates that the environment can contribute to the treatment of patients, and significantly affect their health outcomes. It concluded that patients make better progress in purpose-designed modern buildings than in older or temporary buildings.

This proposal has been discussed with MCCG, which supports the proposals on the grounds of improved patient environment, increased value for money from the existing estate and achievement of cost savings that can be utilised elsewhere.

There is already a Pharmacy situated within Balmoral CHLC, improving convenience for patients.

b) It is accepted that some people may have further to travel to Balmoral CHLC but that it will be nearer and more easily accessible for others. Balmoral CHLC is better served by public transport links, particularly as Gillingham railway station is considerably closer to this centre than the Canterbury Street surgery. There will be more accessible parking provision at Balmoral than at Canterbury Street at present.

c) Apart from improving access to services in an improved environment, the relocation will enable disposal of the Canterbury Street site, contributing to the achievement of national QIPP estate optimisation targets to increase the availability of and usage of clinic facilities.

### **Joint Working**

- (a) How will the proposed change contribute to joint working and improved pathways of care?

There is no direct contribution to joint working and improved pathways of care. However, other GP practices provide services at Balmoral CHLC so there may be opportunities for joint working between the different practices.

In addition, part of the consultation is asking patients how they would like to see services improved in the future. We will take this opportunity to consider those comments and have discussions with providers to see what changes are appropriate for the future.

### **Health inequalities**

- (a) Has this proposal been created with the intention of addressing health inequalities and health improvement goals in this area?  
(b) What health inequalities will this proposal address?  
(c) What modelling or needs assessment has been done to support this?  
(d) How does this proposal reflect priorities in the JSNA?

(a) to (d) No, the proposal has not been created specifically to address health inequalities,

### **Wider Infrastructure**

- (a) What infrastructure will be available to support the redesigned or reconfigured service?
- (b) Please comment on transport implications in the context of sustainability and access

- a) This proposal is the relocation of a GP practice and walk-in centre that does not result in re-designed or reconfigured services. The new site is a purpose built, fit for purpose health building with the necessary infrastructure in place to ensure that it is maintained in good condition and DDA compliant.
- b) Balmoral CHLC is less than a mile away from Canterbury Street and has good public transport provision, including close location to Gillingham railway station. The health centre is situated next to a large public car park, with designated disabled spaces.

### **Do you believe the outlined proposal is a substantial variation or development?**

No – there will be no service reduction, and no adverse equality impacts have been identified

### **Is there any other information you feel the Committee should consider in making its decision?**

This proposal facilitates relocation of GP services to an improved, specifically designed and more accessible health centre and it is not considered to be a significant change requiring formal consultation. However, the Trust is keen to use this opportunity of public engagement to seek views on any potential for service development and improvement in the future.

DMC Healthcare Limited is very keen for the relocation to take place as soon as possible as the current temporary accommodation is not best for patient or staff comfort, particularly during the winter months.