

# Report of the Bradford Districts CCG and Bradford City CCG to the meeting of the Health and Social Care Overview & Scrutiny Committee to be held on 9 February 2017

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Subject: Future of primary care service provision from Hillside Bridge Health Centre

**Summary statement:** There are currently three GP services being operated from Hillside Bridge Health Centre. The service delivered by the Primrose Medical Practice is not relevant to this paper and will not be affected by any future decision made by the CCGs outlined in this paper. Local Care Direct currently deliver two GP services from the Health Centre, general medical services via an APMS contract and an 'enhanced primary care' service delivered 365 days a year. Although these are separate services they have been commissioned via one contract since the commencement of the two services in 2008. The current contract extension is due to expire on 31<sup>st</sup> March 2017 and the CCGs are currently in negotiation for a further extension of this contract until 31<sup>st</sup> October 2017. Therefore the CCGs in Bradford need to make a decision regarding the future of these services.

The future of the APMS general medical service will be made by Bradford City CCG, but the 'enhanced primary care' service is commissioned by Bradford City and Bradford Districts CCG so this decision will be made by both CCGs.

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# 1. Summary

- 1.1 There are currently three GP services being operated from Hillside Bridge Health Centre. The service delivered by the Primrose Medical Practice is not relevant to this paper and will not be affected by any future decision made by the CCGs outlined in this paper. Local Care Direct currently deliver two GP services from the Health Centre, general medical services via an APMS contract and an 'enhanced primary care' service delivered 365 days a year. Although these are separate services they have been commissioned via one contract since the commencement of the two services in 2008. The current contract extension is due to expire on 31<sup>st</sup> March 2017 and the CCGs are currently in negotiation for a further extension of this contract until 31<sup>st</sup> October 2017. Therefore the CCGs in Bradford need to make a decision regarding the future of these services.
- 1.2 The future of the APMS general medical service will be made by Bradford City CCG, but the 'enhanced primary care' service is commissioned by Bradford City and Bradford Districts CCG so this decision will be made by both CCGs.

# 2. Background

2.1 Hillside Bridge Health Centre opened in December 2008 as part of the 'Darzi' strategy to increase access. There are two practices located in the building but this paper is only concerned with the contract being held by Local Care Direct. The contract held by Local Care Direct includes general medical care services (GP practice) and an 'enhanced primary care' service via one APMS contract.

The general medical care service provides traditional GP services to registered patients Monday to Friday 8am – 6.30pm as per the national contract specifications. The current registered list is 4891. As part of the delegated commissioning arrangements from NHS England, Bradford City CCG is responsible for the future commissioning of this element of this service.

2.2 In 2008 the 'enhanced primary care' service provided services for both registered and non-registered patients between 8am and 8pm, 7 days a week. Originally, a key objective of the walk in service was to provide a facility which would be used by the most deprived and socially excluded people in the district, such as homeless people and travellers, refugees, asylum seekers and those with substance misuse issues. However, analysis of the service activity highlighted that these groups were only using the service rarely, and the heavy users of the service were patients of local GP practices in the BD3 area.

Following public engagement and an information campaign in 2011 changes to the opening hours of the service were made. This was on the back of analysis of the use of the service, with the main usage being from the patients registered with practices near to the Health Centre. The service was rarely being used by the most socially excluded members of the community and the change was needed to make sure the service was not misused and provided value for money. Public feedback showed a large majority of people agreed that the changes should take place as the review highlighted that most patients who used the service were already registered with another local GP in the BD3 area.

The current access hours for the 'enhanced primary care' service are:

- For non-registered patients 2pm-8pm 7 days a week.
- For Bradford registered patients 6pm-8pm Monday to Friday, 2pm-8pm Saturday and Sunday

It must be noted that at times the 'enhanced primary care' service has in the past been referred to as a 'walk in centre' (for example, the attached Ipsos-MORI report). However it is not what would be classed as a walk in centre under the current Keogh work. The centre actually operates an appointment based system (maximum of 20 per day), with a smaller proportion of these being available 2-6pm (when out of area patients can attend) with the remainder being available 6-8pm (when Bradford residents can attend). Therefore once these appointments are filled the capacity has been utilised and no further appointments are given. Therefore, this is not a walk in centre (unlike, for example, St George's Centre in Leeds) and is referred to within this paper as an 'enhanced primary care' service.

Both Bradford City CCG and Bradford Districts CCG commission this element of the contract, so both CCGs will be involved in the decision around the future of this service.

2.3 In 2013, following discussions with the Health and Social Care Overview and Scrutiny Committee (previous papers referenced below) the CCGs commissioned Ipsos-MORI to work in partnership with local NHS and VCS engagement teams to undertake in-depth research as to why people used the 'enhanced primary care' service. The full report is attached at Appendix 1.

This approach was taken to enable the CCGs to benefit from the experience of an established national organisation with vast experience of research, blended with local organisations with strong established relationships with marginalised and under-represented groups. Working together, they provided information representing the general population of Bradford and under-represented groups which do not always enter mainstream systems and services.

The main messages from the 'enhanced primary care' service research were:

- That the service is largely seen by patients as a back-up service when they are unable to access other health services. It is mainly used by patients who live in the local vicinity.
- Those who use it on a weekend see its function as an urgent care provider.
   Those who use it during the week see it as a convenient alternative if they find it difficult to get an appointment with their own GP during opening hours.
- Whilst the vast majority of those surveyed prefer to see their own GP and are satisfied with the services s/he delivers, it is widely perceived that it is difficult to get a GP appointment.
- Awareness of the service among the under-represented and marginalised groups is fairly low, and those who have used it tend to have viewed it as a negative experience.
- Over half the patients visiting the service also used A&E in the last 12 months, making A&E the most commonly used health service in this cohort of patients.

## 3. Report issues

3.1 Drawing on the findings of this research the CCGs agreed to work on initiatives to improve primary care access and to develop an urgent care strategy before making any decision around the future of the 'enhanced primary care' service element of the contract. The CCGs have committed to this through the production and ongoing delivery of the Urgent and Emergency Care Strategy for Bradford, Airedale, Wharfedale and Craven. Especially pertinent is the Urgent Care Service being commissioned at Bradford Teaching Hospitals NHS Foundation Trust.

The recent development of the Primary Medical Care Commissioning Strategy will also help deliver improvements to primary care access, and work has been ongoing in this area, especially with the Access Management Plans which have been produced by each practice as part of their contract agreements.

- 3.2 The CCGs wish to continue to commission general medical services (the GP practice element of the current APMS contract) and will therefore be undertaking a competitive procurement process to re-commission this service. This will include consultation with patients registered with the practice and other stakeholders.
- 3.3 To meet the access needs of our patients, the CCGs wish to commission 'enhanced access' to primary care services (currently commissioned via the 'enhanced primary care' element of the APMS contract) differently in the future which will increase capacity and plans include:
  - The Urgent Care Service co-located at Bradford Royal Infirmary A&E which manages primary care patients who present to A&E at 6pm to midnight on weekdays and 12 noon to 12 midnight at the weekend. The first phase of this service formally commenced in November 2016 with the introduction of streaming to the primary care service. The CCGs are commissioning additional hours as part of phase two of implementation (from Spring 2017), where the service will be operational 12 noon to 12 midnight seven days a week.
  - Extended Primary Care Access (6.30pm 8pm Monday to Friday and weekend access) which will be rolled out from 2017 in Bradford. We expect to commission this service for 100% of the population by 2020, providing approximately 337 extra hours of primary care services per week by that time. We will be engaging with our populations to understand when the best time to offer this additional access will be.
  - Continued work via the GP contract to improve access to core GP hours through the delivery of the practice access management plans.

In relation to this aspect of the service, we will engage with the public around the proposed changes, check that our previous engagement feedback is still current, and seek views on how to provide the most appropriate service in future.

An alternative service for our deprived and socially excluded population has already been commissioned. In September 2011 the PCT awarded an APMS contract to Bevan Healthcare to provide access to high quality health and social care for the most socially excluded people. They offer primary medical services tailored to the needs of people who struggle to engage with usual services and particularly those who are homeless, in temporary accommodation, refugees or asylum seekers.

They aim to provide care that recognises the social, environmental and behavioural determinants of health, linking people in with services that address these factors and emphasising the promotion of health as well as the treatment of illness. The service has recently been awarded 'Outstanding' for their provision by the Care and Quality Commission and was noted to be one of the best services of its type in the whole country. The CCGs are currently leading a re-procurement process for this APMS contract.

- 3.4 The CCGs will undertake the following next steps:
  - The CCGs will undertake a procurement process to re-commission general medical services (GP practice services) for 4891 patients. The process will commence in June 2017 with the aim of a contract being awarded and the new contract commencing 1<sup>st</sup> November 2017. This will involve a public and stakeholder consultation process.
  - The CCGs will separate out the 'enhanced primary care' service element of
    the current contract from the general medical services element and will
    engage with the public to look at commissioning enhanced access differently
    in the future, including increasing the capacity of services offered. This
    engagement will be wider than just the population that currently uses Hillside
    Bridge services and is likely to tie in with the engagement around extended
    access (6.30-8pm weekdays, plus weekend opening).
- 3.5 The CCGs would also like to make it clear that any changes to the services delivered from Hillside Bridge Health Centre will not affect the out of hours GP provision. If patients need to see a GP out of hours they will still access the service via dialling 111 and if appropriate will either be seen by the service at Bradford Royal Infirmary or Eccleshill Community Hospital.

#### 4. Options

4.1 None

#### 5. Contribution to corporate priorities

- 5.1 Contributes to the CCGs priorities of:
  - Improving patient experience
  - Improving out of hospital care
  - Optimising the use of assets

#### 6. Recommendations

The Health and Social Care Overview and Scrutiny Committee is asked to:

- 6.1 Receive this update report which details the next steps around the future of the general medical services and 'enhanced primary care' elements of the APMS contract.
- 6.2 Note the engagement and consultation processes which will support the future commissioning decisions regarding these services.

## 7. Background documents

- 7.1 Report of NHS Bradford Districts CCG and NHS Bradford City CCG to the meeting of the Health and Overview Scrutiny Committee to be held on Thursday 21 March 2013: Hillside Bridge: Primary Care Walk in Centre
- 7.2 Report of NHS Bradford Districts CCG and NHS Bradford City CCG to the meeting of the Health and Overview Scrutiny Committee to be held on Thursday 18 April 2013: Hillside Bridge: Primary Care Walk in Centre
- 7.3 Report of NHS Bradford Districts CCG and NHS Bradford City CCG to the meeting of the Health and Overview Scrutiny Committee to be held on Thursday 3 October 2013: Hillside Bridge: Primary Care Walk in Centre
- 8. Not for publication documents
- 8.1 None
- 9. Appendices
- 9.1 Appendix 1 Ipsos MORI and Health Partnerships report 2013: Hillside Bridge Walk in Centre: How patients use the walk in centre.