

Report of the NHS Airedale, Wharfedale and Craven, NHS Bradford City and NHS Bradford Districts CCG to the meeting of the Health and Social Care Overview & Scrutiny Committee to be held on 12th July 2018

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**Subject: Future of primary care service provision within the Hillside
Bridge locality – Bradford City CCG**

Summary statement: This report is to provide an update on the most recent developments around the future of GP services being delivered from Hillside Bridge Health Centre as presented to the Health and Social Care Overview Scrutiny Committee on the 9th February 2017 and through a subsequent update letter to The Chair on the 6th April 2017. The update letter confirmed that enhanced primary care services as delivered by Local Care Direct would no longer be delivered from Hillside Bridge.

This report will outline a proposal to complete a comprehensive primary medical care service needs assessment and primary care estate review within this locality.

Portfolio: Healthy People and Places

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1. Summary

- 1.1 This report describes the requirement of the CCG to agree the future of GP services delivered under a time-limited APMS contract from Hillside Bridge Healthcare Centre as the contract expires on the 31st March 2019. This contract services a registered practice population of around 5,000 people.
- 1.2 The Bradford City Primary Care Commissioning Committee has requested that a full primary medical care service review take place including an estate review of where services are delivered from. This review will include a comprehensive public engagement plan to inform an options appraisal, including a full public consultation where required.

2. Background

- 2.1 The CCG previously reported that they had reviewed the 'enhanced primary care' service delivered from Hillside Bridge Health Centre, commissioned in 2008 as part of the 'Darzi strategy to increase access. The CCG commissioned this service under a time-limited contract, which was delivered by Local Care Direct. As reported in 2017, it was agreed that the 'enhanced service' element of the contract would be delivered differently through GP extended hours. The GP medical services would remain in place under a shorter term contract. The CCG completed a temporary assignment of the general medical service element (GP medical services) of the contract, the successful local practice delivering this temporary contract are Peel Park Medical Practice. Services continue to be delivered under this contract to patients from Hillside Bridge Health Centre. This amended contract is due to expire on the 31st March 2019.
- 2.2 This report outlines the steps that will be taken to understand the future general medical service need within the community served by Peel Park @ Hillside Bridge Health Centre. The Bradford City Primary Care Commissioning Committee agreed that in undertaking this review it would be completed within and with the relevant Primary Care Home Community. They also agreed that a comprehensive estates review should take place to ensure that available space was utilised.
- 2.3 Our local primary medical care commissioning strategies inform future developments and as such a key priority would be to support the development of working at scale.

3. Report issues

3.1 Primary Medical Care Contracting

- 3.1.1 The CCG has delegated commissioning rights from NHS England (NHSE), in undertaking these duties they are required to make an assessment of the future of primary medical care contracts that will come to an end. The CCG is required to complete an assessment in line with the national primary medical care policy guidance manual and its local primary medical care commissioning strategy. The current holder of the primary medical care contract is Peel Park Surgery, they hold a temporary contract which will expire on the 31st March 2019. The required assessment will include the following;

- Service needs assessment involving the local primary care home community.
- Estates review, and financial assessment of the buildings within this community (Thornbury Medical Practice, Eccleshill Village Surgery, Undercliffe Health Centre, Barkerend Health Centre, Farrow Medical Centre, Hillside Bridge Health Centre).

3.2 Service and estate review

3.2.1 The service need assessment will take into account the following;

- Is there still a demand for this service in this locality and a requirement for it to continue?
- Is there a need to continue provision in order to reduce inequalities in access or health outcomes
- Has the contract added value to the local population and service provision
- What is the capacity of local providers and the market of other providers to deliver services
- Opportunities to consider working at scale, including supporting the sustainability of general practice locally.

3.2.2 The estate review will take into account the following;

- A property profile including the costs (this would include space utilisation and expansion options, which would outline the options for best use of the buildings)
- An assessment of the physical condition of the buildings
- Patient catchment maps (to inform potential options for movement of services)
- Transport links between sites
- Development of local housing planned

A financial and risk assessment will be completed as part of the options appraisal.

3.3 Primary care home (PCH) and the engagement process

3.3.1 Our primary medical care commissioning strategies support practices working at scale and as a result we are beginning to see practices working more closely in order to share resources. We have seen an increase in the number of practices working in networks, federated working and undertaking practice mergers.

3.3.2 Primary Care Home is an innovative approach to strengthening and redesigning primary care. This model was developed by the National Association for Primary Care (NAPC) and was launched by Simon Stevens in October 2015. Within this model primary care is seen in its widest sense recognising that health and care services working within primary care are often the first contact that people have with the health and social care system.

The development of the Bradford model is being overseen by a multi-agency working group which was established in September 2017. It is envisaged that this model will bring together a range of staff as a complete care community. These communities will be made up of people from GP surgeries, community, mental

health, acute trusts, social care and the voluntary sector and will focus on local population needs and provide care closer to people's homes.

There are ten Bradford PCH communities that serve populations of 30-60k and the three locality hubs will serve populations of 130-180k.

The local practices that form the PCH community within the Hillside Bridge area are:

PRACTICE CODE		PRACTICE & ADDRESS	Raw List Size Oct 17
B93657	Devan Healthcare C/C	Devan House Primary Care Centre 14 Piccadilly Bradford BD1 3LX	4 375
B93626	Valley View Surgery - Dr Rafiqur	Undercliffe Health Centre 17 Lower St Bradford BD2 4RA	6 485
B93629	Peel Park Surgery - Dr Jha	Undercliffe Health Centre 17 Lower St Bradford BD2 4RA	3 095
Y01115	Eccleshill Village Surgery	14 Insole Road Eccleshill Bradford BD2 2HX	3 267
B93016	Farrow Medical Centre	177 Otley Road Bradford BD3 0HX	6 667
B93032	The Bradford Moor Practice	Barkerend Health Centre Barkerend Road Bradford BD3 6QH	3 731
B93058	The Aucenna Medical Practice	Barkerend Health Centre Barkerend Road Bradford BD3 6QH	6 867
B93611	Dr Akbar	Barkerend Health Centre Barkerend Road Bradford BD3 6QH	2 181
B93661	Moor Park	Barkerend Health Centre Barkerend Road Bradford BD3 6QH	2 927
B93026	Parouse Surgery	Hillside Bridge Healthcare Centre 4 Butler Street West Bradford BD3 6RS	5 287
B93638	Peel Park @ Hillside Bridge Healthcare Centre	Hillside Bridge Healthcare Centre 4 Butler Street West Bradford BD3 6RS	4 958
B93005	Thembury Medical Centre	Rushon Avenue Bradford BD3 7HZ	6 792

3.3.3 An engagement plan will gather views and experiences from;

- Patients and carers registered within this community.
- Patient groups and other active practice volunteers and champions,
- Voluntary community sector organisations and community groups serving the local population

3.4 Timescales

- Engagement with PCH Community April 2018
- Complete estates profiling exercise June 2018
- Engagement exercise June to July 2018
- Options appraisal complete August 2018
- Public consultation on options Sept to December 2018
- Options appraisal and consultation outcome to PCCC Jan 2019
- Mobilisation and exit strategies implemented April 2019

4. Options

To be defined

5. Contribution to corporate priorities

5.1 Contributes to the CCGs priorities of:

- Sustaining general medical service provision
- Improving patient experience
- Out of hospital care
- Use of assets and value for money

6. Recommendations

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

- 6.1 Receive and note the CCGs' commitment and actions required to complete the service need and estate review to determine the future provision of primary medical care within this primary care home community serving the population around Hillside Bridge.
- 6.2 Receive and note initiatives that are being developed that will impact the primary medical service offer to residents.

7. Background documents

- NHS England Primary Medical Care Policy and Guidance Manual (PGM)
<https://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/>
- Bradford CCG's Primary Medical Care Commissioning Strategy
<http://www.bradforddistrictsccg.nhs.uk/seecmsfile/?id=1071>

8. Not for publication documents

None

9. Appendices

None