

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Primary Care Applications Working Party

Notes of the Primary Care Applications Working Party Meeting held in the New Hartley Room, County Hall, Morpeth on Thursday, 25 July 2017 at 2.00pm.

PRESENT

Councillor LJ Rickerby (In the Chair)

COUNCILLORS

Moore, R

Watson, J

OFFICERS

Bird, MD

Young, S (CCG)

1 MEMBERSHIP AND TERMS OF REFERENCE

The terms of reference of the Primary Care Applications Working Party, as agreed by County Council on 24 May 2017, were noted as follows.

Purpose

The Primary Care Applications Working Party's role is to scrutinise and comment upon applications for variations to primary care services as consultee on behalf of the Health and Wellbeing Overview and Scrutiny Committee.

Composition

The Working Party will consist of four members of the Health & Wellbeing Overview and Scrutiny Committee, including the Chair and Vice-Chair.

Meetings

The Working Party will convene as and when business arises. Local Members from areas affected by applications, as well as officers and applicants or their representatives, will attend meetings as appropriate for business on the agenda.

Role and Activities

The Working Party's role and activities will include:

- acting as consultee for applications referred to the Council by the Northumberland Clinical Commissioning Group (CCG), NHS England, Northumbria Healthcare, Northumberland County Councillors, or directly by members of the public

- *receiving advice from CCG and Officers*
- *gathering evidence from applicants*
- *reaching consensus on responses to applications*
- *reporting back to the Health & Wellbeing Overview and Scrutiny Committee.*

It was noted that the membership automatically included the Chair and Vice-chair of the Health and Wellbeing OSC. It had been agreed at the Health and Wellbeing OSC meeting on 27 June 2017 for Councillor Moore to be appointed, and Councillor Nisbet had subsequently been nominated as the Labour representative.

Mr Young advised that the Working Party had been set up as prior to 2015 NHS England had undertaken the commissioning of all primary care services, but this was then delegated to the Northumberland Clinical Commissioning Group (CCG), with full delegation from 2016.

When a GP Practice wished to merge or close a branch, it had to apply to NHS England. The application then had to go to the Northumberland Primary Care Commissioning Committee who were authorised final decision making body. Consultation also needed to be undertaken. NHS England advised who needed to be consulted, including the scrutiny function of the Local Authority. However as the Health and Wellbeing Overview and Scrutiny Committee (OSC) focused on strategic issues, the Primary Care Applications Working Party was set up as a subgroup to consider primary care changes and to report back to the OSC.

The frequency of Primary Care Applications Working Party meetings depended on when when business arose for applications to be heard. Mr Young acted as the conduit between the practices requesting changes and presenting details of applications to this group.

RESOLVED that the terms of reference, membership and background information be noted.

2. APPOINTMENT OF CHAIR

RESOLVED that Councillor Rickerby be appointed Chair of the Working Party for the 2017/18 council year.

3. APPOINTMENT OF VICE-CHAIR

RESOLVED that Councillor Watson be appointed Vice-chair of the Working Party for the 2017/18 council year.

4. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Nisbet.

5. NOTES FROM PREVIOUS MEETING

RESOLVED that the notes of the meeting held on 30 March 2017, having been circulated, be agreed as a correct record.

6. UPDATES

Mr Young provided the following updates on GP practices:

(a) Harbottle

The surgery had closed in September 2015. Two extensive periods of engagement followed. In the interim a service level agreement (SLA) had been established with the Rothbury practice to deliver services. 60% of respondents to the consultation said they wanted a branch surgery. A solution had now been achieved for a three year contract to deliver a branch surgery solution from 1 July 2017 for 9am - 2pm every Thursday.

Ex-Harbottle patients who had registered with the Rothbury practice will receive letters informing them of the changes in provision. Home visits were continuing as required. Patients could also attend the Rothbury practice on the days that the Harbottle was not open; the big rural catchment area of the practice was acknowledged.

Members agreed that it was a successful outcome, and the Harbottle opening hours represented a case of 'use it or lose it'.

(b) Estates and Technology Transformation Fund (ETTF) Premises Bids

The CCG was being supported by NHS England to progress the eight premises bids submitted in Northumberland. These bids included requests for additional support/facilities such as additional clinical areas and ICT systems. A meeting had been planned to review the status of each bid and progress developments as efficiently as possible.

(c) Riversdale

An application had been submitted to close Wylam Surgery as access to the premises was not fit for purpose. The practice was undertaking a 12 week patient consultation. This would come back to this Working Party for discussion before being presented to the Primary Care Commissioning Committee. Wylam Parish Council had made representations concerning age, demographics, transport and availability. This correspondence would be sent to the surgery, and Mr Young would co-ordinate between the parties involved.

The Newcastle/Gateshead CCG and Gateshead Council had also commented on the proposal.

In response to a query it was confirmed that this Working Party could either support proposals or escalate any issues with applications to the main OSC if they considered it appropriate.

RESOLVED that the updates be noted.

7. NEW APPLICATIONS

Cambois Branch Surgery

Mr Young explained how the surgery had ceased on 30 June 2017. A relocation had been considered but was not considered possible given the potential associated costs and timescales. Cambois was also a dispensing surgery and this service but this was now being undertaken at the main Bedlington Surgery. A medications delivery service was ongoing but only available for dependant patients. The remedial building work was expected to last for 6-8 months. Two letters had gone out to all branch registered patients.

In response to questions Mr Young advised that the CCG did not commission pharmacy services. The building was County Council owned and the initial assessment process was ongoing. Consideration had been given to using another rentable room in the meantime, but the reallocation process would potentially take 2 to 3 months and there would be associated costs in the meantime. It had been therefore agreed not to pursue this option and rather ensure that appropriate alternative services were available while work on the main site was undertaken. The building was not fit for purpose, and only one room was actually used for the branch so there was a wider issue with the building as a whole and consideration was required about whether the County Council could use it for other needs too if renovated.

A letter had gone out to patients about the dispensing service available at Bedlington, which was 2.3 miles from the Cambois branch. A further update could be provided for this Working Party once details of timescales were confirmed. Reference was made to the medications delivery service and how pressures on the service could be reduced if people were able and willing to collect rather than have it delivered even if they were entitled to, but members were advised that this was an NHS England responsibility.

RESOLVED that the position be noted.

8. NEXT MEETING

Further meetings would be arranged as and when business arose, which would include discussing the Riversdale practice in due course.

MDB
26-07-2017