

**MEETING OF THE
HEALTH OVERVIEW
AND
SCRUTINY COMMITTEE
ON**

TUESDAY 22 JANUARY 2013

AT

7PM

SUPPLEMENTARY AGENDA

**Civic Offices
Shute End
Wokingham
Berkshire**

**Andy Couldrick
Chief Executive**

The Health Overview and Scrutiny Committee aims to focus on:

- The promotion of public health and patient care
- The needs and interests of Wokingham Borough
- The performance of local NHS Trusts

To: The Chairman and Members of the Health Overview and Scrutiny Committee

A Meeting of the **HEALTH OVERVIEW AND SCRUTINY COMMITTEE** will be held at the Civic Offices, Shute End, Wokingham on **Tuesday 22 January 2013 at 7pm**



Andy Couldrick
Chief Executive
18 January 2013

Members:- Tim Holton (Chairman), UllaKarin Clark (Vice Chairman), Andrew Bradley, Kay Gilder, Kate Haines, Philip Houldsworth, Sam Rahmouni, Nick Ray, David Sleight and Wayne Smith

Substitute Members: Lindsay Ferris, Ian Pittock, Malcolm Richards, Rachelle Shepherd-DuBey, Sue Smith

ITEM NO.	WARD	SUBJECT	PAGE NO.
76.00	Finchampstead North and Finchampstead South	CEDAR HOUSE AND FINCHAMPSTEAD GP SURGERIES – PROPOSED MERGER The Chairman has agreed that the following item can be taken as an Urgent Item. To consider proposal to merge Cedar House and Finchampstead GP Surgeries and plans for patient and stakeholder engagement.	189

This is a supplementary agenda for a meeting of the Health Overview and Scrutiny Committee

If you need help in understanding this document or if you would like a copy of it in large print please contact one of our Team Support Officers.

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TITLE	Cedar House and Finchampstead GP Surgeries – proposed merger
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on 22 January 2013
WARD	Finchampstead North and Finchampstead South
STRATEGIC DIRECTOR	Muir Laurie, Director of Business Assurance and Democratic Services

OUTCOME / BENEFITS TO THE COMMUNITY

To respond to a request from NHS Berkshire for the Committee's views regarding whether the proposal to merge the Cedar House Surgery and Finchampstead Surgery constitutes a substantial variation to services and whether the Committee feels that the plans for engagement are adequate.

RECOMMENDATION

The Committee is recommended to

- a) respond to NHS Berkshire by 31 January 2013 to confirm if the Committee feels that the plans for engagement regarding the proposed merger of Cedar House Surgery and Finchampstead Surgery (Appendix 1) are adequate;
- b) respond to NHS Berkshire by 31 January 2013 to confirm whether the Committee views the proposal outlined in Appendix 1 constitutes a substantial variation to services or not.

SUMMARY OF REPORT

Cedar House and Finchampstead surgeries have made a formal request to NHS Berkshire to join together in partnership holding a single General Medical Services contract.

Appendix 1 outlines the proposal from the partners at the surgeries who have begun patient and public engagement on their proposals to merge Cedar House GP surgery and Finchampstead GP surgery, and to concentrate services at the Finchampstead GP Surgery site. The engagement process started on 5 December 2012 and would be completed on 24 February 2013.

Background

The Committee is asked to consider whether the plans for engagement are adequate and whether they feel that the proposal constitutes a substantial variation to services and to submit a response to NHS Berkshire by 31 January 2013.

Should the Committee consider that consultation with the Committee has been insufficient, or that the proposal is not in the interest of the health service in the area of the committee's local authority it may refer the matter to the Secretary of State. However, Department of Health guidance indicates that all efforts to seek a local resolution of the matter should be made before a referral is considered.

If the Committee agrees that the proposal does not constitute a substantial variation of service NHS Berkshire can progress with the proposal.

Regulation 4 of the Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 establishes a requirement for local NHS bodies to consult the local health overview and scrutiny committee(s) on any proposals they may have under consideration for any substantial development of the health service in the area of the committees' responsibilities, or on any proposal to make any substantial variation in the provision of such service(s).

The Regulations do not define "substantial". However, current Department of Health guidance draws out some possible criteria:

- a) Changes in accessibility of a service - e.g. both reductions and increases on a particular site or changes in opening times for a particular clinic.
- b) Impact of proposal on the wider community - – including economic impact, transport, regeneration
- c) Patients and carers affected - the whole population, specialist services
- d) Changes to methods of service delivery - – e.g. moving to a community based setting, as opposed to hospital based

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial Year (Year 3)	N/A	N/A	N/A

Other financial information relevant to the Recommendation/Decision
None

Cross-Council Implications
N/A

List of Background Papers
N/A

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Date 16.01.13	Version No. 1



Berkshire

57-59 Bath Road
Reading
Berkshire
RG30 2BA
Tel: 0118 9503094

11th January 2013

Dear Chair of Health Scrutiny Panel,

Proposal to merge Cedar House and Finchampstead GP Surgeries and plans for patient and stakeholder engagement

Please find enclosed a paper outlining the proposal from the partners at Cedar House and Finchampstead GP surgery who are beginning patient and public engagement on their proposals to merge Cedar House GP surgery and Finchampstead GP surgery, and concentrate services at the Finchampstead GP Surgery site. If this proposal is accepted the Cedar House GP surgery site will close and Cedar House patients will be transferred to Finchampstead GP Surgery unless they choose to register at another practice. The engagement process started on 5th December 2012 and will complete on 24th February 2013.

Cedar House is a small single handed GP surgery and its size makes it very difficult to provide the full range of services and level of healthcare expected from a modern GP practice.

There are approximately 3056 patients who are registered with the Cedar House GP Surgery and all of these will be able to attend the new merged GP surgery. Patients will benefit from the wider range of services on offer there, or they can choose instead to attend the nearby New Wokingham Road Surgery.

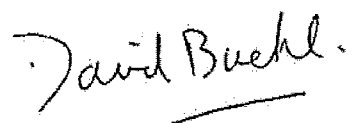
The paper enclosed outlines the partners' rationale, information about the local population, the plans for engagement and the decision making process. We have also enclosed the engagement and communication plan.

NHS Berkshire would like to ask the Health Scrutiny Panel if they feel that the plans for engagement are adequate.

We also would like Health Scrutiny Panel's view as to whether they feel the proposal constitutes a substantial variation to services.

If you would like a discussion please feel free to contact Gill Major on 0118 982 2916. We would like a response by 31 January 2013.

Yours faithfully,

A handwritten signature in black ink that reads "David Buckle". The signature is written in a cursive style with a horizontal line underneath the name.

Dr David Buckle
Medical Director

Encl.

Cedar House and Finchampstead GP Surgeries – proposed merger

1.The proposal

Cedar House and Finchampstead surgeries have made a formal request to NHS Berkshire to join together in partnership holding a single GMS contract. The intention is to merge services and for services to be provided from the Finchampstead site, closing the Cedar House Surgery from April 2013 at the earliest. The intention is for there to be an extension of premises at the Finchampstead site to accommodate the amalgamation of clinical and administration staff.

Cedar House GP Surgery is currently sited in a converted residential dwelling and not a purpose built building. There is concern that the GP surgery may not meet future CQC requirements particularly relating to access. There is no room for expansion and parking is limited and cannot be increased. In addition from 1 December 2012 the practice will be single handed supported by locums.

Nearby New Wokingham Road GP Surgery (1.89 miles away from Finchampstead GP surgery) are happy to register any patients who wish to use their services.

2. The current situation

There are 3056 patients registered at Cedar House GP Surgery.
12 146 patients are registered at Finchampstead GP Surgery.

3. Other local GP services

Cedar House patients will have full access to all of the services available at the Finchampstead GP Surgery site if the merger goes ahead.

Finchampstead GP Surgery is 0.7 miles away from Cedar House GP surgery, 1 minute by car, 14 minutes on foot and on the same bus route.

The Chair of the Wokingham Clinical Commissioning Group (CCG) supports the proposal in principle.

4. Envisaged benefits

The Finchampstead Surgery building is a purpose built GP Surgery, with a high quality of rooms available. Cedar House GP Surgery is situated in a converted bungalow with less space and a lower quality of rooms to see patients in.

The Finchampstead site is compliant with disability access requirements and the current site could also be extended. This would allow expansion of the physical building and a wider range of services could be offered from the

surgery. This would give the potential to offer some secondary care treatments closer to patients' homes. There is adequate on-site parking, this too could be expanded to meet any increasing demand with greater patient numbers.

Cedar House patients will be able to see a wider range of healthcare professionals than they do currently. At the moment Finchampstead GP surgery offers patients access to onsite Physiotherapy, Midwifery and a District Nursing Service. In future there are plans to offer Health Visitors, Social Workers, drug and alcohol support, mental health services, Talking Therapies and geriatric/memory clinic services.

The merger if it goes ahead will lead to a larger and more diverse healthcare team offering a broader skill mix, knowledge and experience which will benefit patients. This wider range of special interests and peer support will help to reduce unnecessary referrals such as to pathology, x-ray requests and unnecessary prescribing. There will also be greater access to minor surgery and extended hours which will benefit patients. A larger team also enables more time for necessary continuous education and training.

Patients will benefit from greater continuity of care with improved cover available from multiple partners. Patients will be able to stay registered with their current GP, but will have the option of seeing other GPs for convenience if they choose.

5. The local population

In terms of deprivation Wokingham Borough has very low levels of deprivation compared to other areas of the country. Finchampstead South (where Finchampstead GP surgery is located) is the fifth most deprived ward in Wokingham, and 78th out of 126 across Berkshire). Finchampstead North is the 24th most deprived ward in Wokingham (125th in Berkshire).

There are four care homes in the Finchampstead South ward and one in Finchampstead North.

In terms of life expectancy in Finchampstead South it is 80.5 years, for Finchampstead North ward it is 83.7. The figure for Finchampstead South will be affected by the care homes. The overall life expectancy in Wokingham Borough is 83 years.

There is a bus service that links Cedar House GP surgery and Finchampstead GP Surgery.

6. Plans for engagement

The GP partners and practice staff are carrying out the engagement activity supported by NHS Berkshire. They will be taking a proactive approach,

offering several ways of giving views to reach as many sections of the population as possible.

The engagement will give patients and other stakeholders an opportunity to openly question reasoning behind the proposal and for the GP practices to listen to comments and concerns.

The full engagement and communications plan is in Appendix 1.

7. Decision making process and next steps

The results of the engagement will be reported to GP Commissioning Group in March 2013. The PCT senior managers and GP Commissioning Leads will be required to assure themselves that there has been satisfactory engagement with the public and clinicians and that the proposal complies with the four key tests for service change recently identified by the Secretary of State for Health.

These four key tests require existing and future reconfiguration proposals to demonstrate:

- support from GP commissioners
- clarity on the clinical evidence base
- strengthened public and patient engagement
- consistency with current and prospective patient choice

Members will also need to take into account the findings of the Equality Impact Assessment which has been carried out by the GP practices with support from the PCT

Members of the GP Commissioning Group will then be asked to make a recommendation to the PCT's Board for a final decision.

Cedar House GP Surgery will write to patients informing them of any decision.

Communications and Engagement Plan

1. Background

Cedar House and Finchampstead surgeries have made a formal request to NHS Berkshire to join together in a partnership to hold a single GMS contract. The intention is to merge services and for services to be provided from the Finchampstead site, closing the Cedar House Surgery from March 2013. The intention is to extend the premises at the Finchampstead site to accommodate the amalgamation of clinical and administration staff and an expansion of facilities to address shortage of space issues.

If the merger and closure of Cedar House Surgery is agreed, there is no intention to de-register any patients. All Cedar House Surgery patients will have full access to the Finchampstead site. Cedar House Surgery is located 0.7 miles from Finchampstead Surgery, one minute by car, approximately 14 minutes by foot. Both surgeries are linked by the same bus route. The New Wokingham Road Surgery is the next nearest practice at 1.89 miles.

GPs are now buying care on their patients' behalf and taking responsibility for the funding for the wider population's health. They will need to provide even more services at their surgeries to keep people well and out of hospital. Larger practices are better placed to do this. We expect to see a change in practice size in future with less single handed and small practices and more medium to large practices. This will become increasingly important as more community care is required in the next ten years.

The clinicians at Cedar House and Finchampstead recognise that increased efficiency is required from NHS Providers now and in the future and that merging current services will support this.

1.1 Level of usage at Cedar House and Finchampstead GP surgeries

- 3,056 patients are registered at Cedar House Surgery
- 12,146 patients are registered at Finchampstead Surgery

1.2 Surgery hours of Cedar House GP Surgery and Finchampstead GP Surgery

Cedar House GP surgery hours

Currently one GP operates from Cedar House Surgery and bookable surgery hours are as follows:

Monday	8.40 -1.30pm – 2.30pm – 6.30pm
Tuesday	8.00 - 12pm – 2.30pm – 7.00pm
Wednesday	8.40 - 12pm – 3.30pm – 6.30pm
Thursday	8.40 - 12pm – 2.30pm – 6.30pm
Friday	8.00 – 12pm – 3.30pm – 6.30pm
Saturday	closed
Sunday	closed

Finchampstead GP surgery hours

Monday	08:00 – 1.30 14.30 - 18:30
Tuesday	08:00 - 1:30 14.30 - 18:30
Wednesday	08:00 - 1:30 14.30 - 18:30
Thursday	08:00 - 1:30 14.30 - 18:30
Friday	08:00 - 1:30 14.30 - 18:30
Saturday	Closed
Sunday	Closed

1.3 Other local GP services

The New Wokingham Road Surgery is the next nearest practice at 1.89 miles.

1.4 The local population of Cedar House and Finchampstead GP surgery

Both GP surgeries are in Wokingham which is an area of very low deprivation, Finchampstead South where Finchampstead GP Surgery is situated is the fifth most deprived ward in Wokingham. The percentage of the population who are over 65 is broadly the same as the wider Wokingham population.

2. Decision making process

The results of the engagement will be reported to a future meeting of the GP Commissioning Group before the end of March 2013. The PCT and Wokingham CCG will need to be assured that there has been satisfactory engagement with the public and clinicians and that the proposal complies with the four key tests for service change recently identified by the Secretary of State for Health.

These four key tests require existing and future reconfiguration proposals to demonstrate:

- support from GP commissioners
- clarity on the clinical evidence base
- strengthened public and patient engagement
- consistency with current and prospective patient choice

Members will then be asked to make a recommendation to the PCT's Board .

3. Engagement and communication plan

The engagement process will be led by the GPs at the 2 practices, asking affected patients for their views on the proposal to no longer provide GP services at Cedar House Surgery. The GPs greatly value patient feedback.

The PCT in its role as decision maker needs to take into account patient feedback in the decision making process.

The Communications and engagement Team will provide support to the GPs throughout the process in terms of advice, and support in delivery of the communication and engagement action plan.

3.1 Aims of the engagement

The aims of the engagement are:

- to ensure compliance with the 'duty to involve' under the NHS Act 2007 – this is a formal consultation under the act as the proposal involves changing the location of a service
- to give patients the opportunity to have their say and for the practice to listen to any concerns about their proposals for the GP surgery merger
- for the PCT to listen to patients' and stakeholders' views, opinions and concerns to inform their decision in accepting or rejecting the practice's proposal

3.2 Key Messages

There will be key messages for the GP practices and also key messages for the PCT/Wokingham CCG as the decision makers.

PCT/Wokingham CCG's external messages

- Wokingham Clinical Commissioning Group/TEC supports this decision in principle and welcomes the two GP practices' decision to engage with the population and stakeholders to gather opinion and feedback
- The PCT/Wokingham CCG s will carefully consider their decision and take into account their responsibility to make sure resources are put to the best possible use for the maximum benefit for local people and their health

The GP practices' messages

- Bigger GP surgeries, with larger premises and more clinicians generally provide better clinical outcomes for their patients, more patient choice, a wider range of services and quicker access to a range of health professionals

- Former patients of Cedar House surgery will be able to choose to access services from Finchampstead GP surgery or if they wish to change practice they can register at the New Wokingham Road Surgery
- The two GP practices value the views of patients and other local stakeholders, and are actively seeking views about the proposal
- If the two surgeries merge, patients will continue to receive high quality services with the benefit of greater choice and access to a wider range of health professionals and services

3.3 Media

There will be a proactive approach to media handling. Depending on the level of media interest in the engagement process, there may need to be Communications Team expertise at the engagement meetings to help support and manage media attendance.

Media releases

1. A proactive media release will be issued to ensure openness and transparency and provide opportunities for GPs to explain the process and what they would like to achieve. A draft media release will be available at the outset of the engagement process
2. There will be a need for media statements from the PCT/Wokingham CCG and the GP surgeries during the engagement process and then a full statement once a decision is made
3. If there is a need to maintain local public and stakeholder interest in the engagement process a second statement can be issued

Briefing

This will include the following media contacts: the Bracknell News and Wokingham Times and BBC Radio Berkshire.

Local ward councillors, parish councillors and MPs will be briefed by the GPs at Finchampstead GP Surgery and Cedar House GP Surgery.

The Communications Leads at Wokingham and Bracknell Forest Councils will also be briefed (as their elected members will be briefed).

3.4 Target Audiences

- Patients – those who use both Cedar House & Finchampstead surgery
- Staff who work at Cedar House and Finchampstead practices
- Wokingham HOSC Chair
- Wokingham Health and Wellbeing Board
- Wokingham's lead councillor for Health
- Bracknell MP Philip Lee

- Wokingham MP John Redwood
- Local ward councillors
- Wokingham LINK/Healthwatch
- Local media (Wokingham and Bracknell)
- Local community groups
- Local parish councils
- Neighbouring Pharmacists
- Neighbouring GP practices
- Local authority social care lead
- The Finchampstead Surgery's PPG
- Wokingham PPG Forum
- The LMC
- Wokingham CCG

3.5 Engagement Approach

There will be a proactive approach to engagement, offering several ways of giving views to reach as many sections of the population as possible:-

- Three drop-in sessions will be held in a suitable venue in the local area
- The engagement period will start on 03/12/12 and last up to twelve weeks
- A letter will be sent to all patients who receive services at the Cedar House Surgery from the partners to explain what the practices are considering and to let them know about the drop-in session and other ways they can give their views and comments – email, phone, letter
- Posters will be used at Cedar House Surgery and Finchampstead Surgery to ensure all patients are made aware
- A mail out will be made to LINKs/community organisations/parish councils
- Local ward councillors and MPs will be briefed individually by the GPs from the two GP practices.

3.6 Rationale for engagement

The engagement process will give an opportunity to patients to openly question reasoning behind the proposal. There is a need to listen to comments and concerns.

The engagement process also ensures compliance with the 'duty to involve'.

3.7 Drop in session Plan

The drop in sessions will be publicised in the Finchampstead area at community venues, community groups, via Wokingham LINK.

- The meetings will be set up on a 'drop in basis' and there will be two display boards with maps showing the location of Cedar House Surgery in relation to Finchampstead Surgery.

- Engagement information including letter and FAQs to be sent to patients and leaflet will also be on display and for public distribution.
- Practice staff and GP will be available to answer questions, hear patients concerns and queries about the proposal of future for Cedar House Surgery. All comments will be captured and logged.
- There will be A4 maps showing the location of neighbouring GP practices as well as background information on the rationale for the proposal.

The drop-in format would be:

- Engagement staff to be present and log comments and questions
- GPs and Staff from the practices to be present to talk to patients about the proposals
- Invite local councillors to attend
- Invite Wokingham LINK to attend

Engagement and Communications Tasks

Engagement and Communications Activity	Who is responsible	By when
Letter to PCT outlining proposal	GP practices	03/12/12
Equality Impact Assessment of patients who would be affected if Cedar House Surgery did close	GP practices with PPE support	03/12/12
Inform practice staff of proposal and rationale/benefits to patients/plans for engagement	GP practices	03/12/12
Write to Board of Wokingham CCG outlining proposal/rationale/benefits to patients	GP practices	03/12/12
Identify ward councillors, MP and parish councillors. Meet MPs and councillors separately – to outline reasoning for proposal, benefits and plans for engagement	GP Practice (with support around key messages from PPE/Comms Team)	Week commencing 03/12/12
Discussion with Wokingham New Road Surgery re taking on any patients if the proposal is	GP Practices	Before letter and FAQ is sent to patients/stakeholders

accepted		
Inform Wokingham HOSC of GP practices' proposal, rationale and plans for engagement	PCT via letter from Director of Partnerships/Deputy CEO	By 10/12/12
GP Practices to Inform LMC	GP Practices	By 10/12/12
Identify key stakeholders	PPE Team/GP surgeries	done
Prepare (with PPE & Comms support): Media statement Q&A sheet Letter to Cedar House patients Letter to stakeholders Survey Web info Materials for display boards	GP practice with PPE/Comms Support	By 03/12/12 Week before first meeting
Circulate survey to stakeholders and put on practice websites and link to this via PCT website/Local Authority websites	PPE Team	By 10/12/12
Hold drop-in sessions x 3 – two daytime, one evening session – more if needed	GP surgeries with PPE and Comms Team support	Initial dates to be confirmed by 03/12/12
Report covering the engagement and findings	PPE Team	By end February 2013
PCT and Wokingham CCG to make decision to approve or reject (PCT decision making takes place at PCT Board)	CCG and PCT Board	By end March 2013
Feedback decision to patients and stakeholders	GP practices	Depending on timescale