

## HEALTH OVERVIEW & SCRUTINY PANEL

MINUTES OF THE MEETING of the Health Overview & Scrutiny Panel held on Tuesday, 24 November 2015 at 9.30am at the Executive Meeting Room, Third Floor, the Guildhall

### Present

Councillor John Ferrett (Chair)  
Phil Smith  
Alicia Denny  
Gwen Blackett, Havant Borough Council  
Peter Edgar, Gosport Borough Council  
Mike Read, Winchester City Council

### Also in Attendance

#### Portsmouth Clinical Commissioning Group

Innes Richens, Chief Operating Officer  
Kate Hovenden, Director of Professional and Clinical Development

#### St Mary's Walk In Centre

Paul Fisher, Service Manager  
Penny Daniels, Hospital Director  
Deb Jeavans- Fellowes, Operations Manager

#### Guildhall Walk Healthcare Centre

Kim Dennis, Service Manager

#### 1. **Welcome and Apologies for Absence (AI 1)**

The following Councillors sent their apologies: Brian Bayford; Jennie Brent; David Keast and Gemma New.

#### 2. **Declarations of Members' Interests (AI 2)**

Councillors Blackett and Edgar declared non-prejudicial interests: they are governors at Portsmouth Hospitals' NHS Trust.

#### 3. **Minutes of the Previous Meeting (AI 3)**

The minutes will be available at the next meeting.

#### 4. **Urgent Care and Walk in Centres (AI 4)**

Innes Richens, Chief Operating Officer and Katie Hovenden, Director of Professional and Clinical Development introduced the consultation document and in response to questions from the panel clarified the following points:

- The Guildhall Walk Healthcare Centre is a GP-led practice and as such does not offer direct access to diagnostics beyond that which any normal practice would provide.
- The reasons for the change are to simplify access to urgent care and to ensure the best use of money and resources in light of an increasing population with more complex health needs.
- At the start of the engagement process the CCG felt that it would be unfair to permit new patients to register at the GHW when the practice's future

was in question; however, following feedback regarding the needs of the student population, the cap was removed.

- Apart from the Somerstown Centre, the other most likely location for the new practice would be the John Pounds centre.
- A combined walk in centre with nurses and GPs for both illnesses, and injuries would simplify the process and ensure that people cannot make the wrong decision about where to seek treatment.
- The needs of the patients at GHW are different as there are more vulnerable people. The CCG is committed to ensuring that their needs are met when writing the service specification.
- The map on page 26 of the consultation document would be reviewed to ensure that it is clear.
- There will be no gap in provision whatever decision is taken. The contract with the current provider at GHW would be extended during the procurement process. This would take approximately twelve months.
- The hub would probably be ready by the end of March.
- No decision would be taken ahead of the consultation.
- Significant communication would be planned to ensure that GHW patients understand what is happening.
- The hub lends itself better to housing a new surgery but the John Pounds Centre could also be adequate. The views of the public will be taken into account.
- The practice would have a new contract but provide the same level of service. The CCG is working with the Director of Public Health to identify ways to enhance the service for homeless people and those with mental health or substance misuse issues. This may include an outreach service for homeless people.
- The university is talking with the CCG and is committed to improving students' health care and encourages them to register with a GP.
- A number of schemes are being considered to ensure adequate parking provision across the whole St Mary's site including building a multi-tiered car park. The majority of staff are no longer permitted to park on site.
- Some pharmacies now provide a dedicated minor ailment service.
- The CCG is talking with the university's school of pharmacy regarding the opportunities for student work experience in pharmacies. There is also a national pilot scheme involving pharmacists working in GP practices.
- GHW staff would transfer to the new practice if TUPE applies.
- The CCG is talking to the bus companies and hopes that they will see this as an opportunity to enhance the service.

Councillor Read observed that the proposal states that the surgery would be moved to a new location, whereas in fact a new surgery would be established.

Penny Daniels, Deb Jeavans-Fellowes and Paul Fisher, St Mary's Walk in Centre explained that:

- The centre was established ten years ago and deals with an average of 130 patients a day. There is room for expansion.
- An orthopaedic consultant runs a fracture clinic twice a week.
- A consultant runs a review clinic once a week.
- A rotation of QA staff will start shortly.

- Ambulances sometimes drop off patients at St Mary's.
- Patients with minor injuries are treated within 40 minutes; those with more complex needs are treated and discharged within four hours.
- It is a very open environment.
- They are looking to recruit a Play Leader who would be a health care support worker with nursery nurse experience.
- The Centre is open until 10pm.
- There is more public parking since staff are no longer permitted to parking on site. The walk in centre is the only service open on site at the weekends and in the evenings.
- The Nurse Practitioners would welcome GPs.
- Paramedic practitioners joined the team three or four months ago.

In response to questions from the panel, the following points were clarified:

- Parking has improved considerably at the site.
- Having a combined injury and illness unit is unusual.
- The centre has the capacity to deal with 60,000 patients a year as the building lends itself to reconfiguration.
- More staff would be recruited to deal with the increase in patient numbers. They do not experience any difficulty in recruiting nurse practitioners at the moment and it is expected that there will be more nurses looking for permanent work when the government caps the number of agency staff that hospitals can employ.
- Staff are rotated between this site and one in Southampton.
- They do not know how many patients use public transport.
- Most patients are from the city. Marketing and leaflet drops are targeted in different areas to raise awareness of the service.
- X-rays can be sent to QA Hospital if there is any uncertainty regarding their interpretation.
- There is access to a crisis team and the psychiatrist at the Emergency Department if needed to deal with patients who have mental health issues.
- This week about 60 pupils are going to visit the unit to improve their understanding of the health service.
- There is also an area dedicated to adolescents.

Kim Dennis, Service Manager at GHW asked the panel to note that:

- Patients are very worried about the proposed changes.
- She is concerned about how treatment for patients with urgent needs will be delivered.
- The centre deals with serious health issues as well as minor ones. She cited one example where doctors looked after a man suffering from a heart attack whilst they waited for an ambulance (it took over an hour to arrive).
- She felt that not enough credit was being given to patients. They know that as a GP practice, the GHW does not have diagnostic facilities and if they have a suspected fracture, they will go to St Mary's.
- Lack of communication with the CCG is a problem. In one instance, the CCG instructed all GPs to stop referring patients to QA Hospital, but did not explain where they could be sent instead.
- Patients are very settled at the HWC.

- The location of the practice is key. All the homeless in the city use the practice as their address. Many sleep around the outside of the Civic Offices.
- There is no need to commission a new service as it works very well.
- All the GPs have specialist training and most speak more than one language.

In response to questions from the panel, she clarified the following points:

- The Somerstown Hub and the John Pounds Centre are not suitable locations for moving the service.
- She would not want patients to go to the Hub as there are anti-social behaviour problems there. There are no problems for patients coming out onto Guildhall Walk.
- Somerstown does not have much parking.
- St Mary's Unit is fantastic but it after ten years, it has not alleviated the pressure on the ED at QA Hospital. People who attend the ED inappropriately should be directed to the correct service.
- The empty unit at the station would seem to be an appropriate location for the practice as it is in the city centre where the patients are.
- Patients are referred to the Housing Options service which is nearby.
- Rent would be charged for a space at the Hub.
- The two hour target to treat and discharge patients has never been breached; 50% are seen within 30 minutes.
- It is perfect practice for staff as they see chronic diseases as well as minor and major illnesses.
- They have been involved in the Nurse Practitioner Training for staff at St Mary's.
- St Mary's unit is hard to access and the opening of a new supermarket near the stadium will have an impact on traffic.
- The city needs more than one walk-in unit.
- Most GPs speak more than one language and they language line can be used if required.

Innes Richens and Kate Hovenden asked the panel to note the following additional points:

- The CCG has responsibility to save money whilst commissioning the best clinical services.
- The GHW is open from 8am to 8pm seven days a week and a premium is paid for that extended service. The CCG cannot afford to replicate that across the city. Therefore people are being asked when they feel are the most important times for accessing primary care. Equity of provision is essential for patients across the city.
- The CCG is committed to maintaining a minimum level of service for vulnerable patients and is seeking opportunities to enhance it.
- The Hub was built by the Council. The NHS pays rent for any space it leases. The original intention was to locate two GP practices there, but one merged with another and so only one moved in.

In response to questions from the panel, the following points were clarified:

- The government aspires for patients to have access to primary care seven days a week. A pilot model will be carried out here with several practices providing this on a rota basis with shared IT and telephony.
- The NHS is encouraged to always look at vacant NHS or public sector locations for new units.
- The CCG will write to the HOSP for its views as a statutory consultee.

The panel recognised that health care has changed significantly over the last decade and that the proposed closure of GHW is clearly an emotive issue particularly as it has a patient mix with specific health needs.

Members focused on how the proposals would impact both current GHW patients and everyone who uses primary care. It also noted that security of patients and staff at any location is essential.

Members supported the consultation and welcomed the opportunity to respond formally to the CCG.

The formal meeting ended at 11.30am.

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Councillor John Ferrett  
Chair