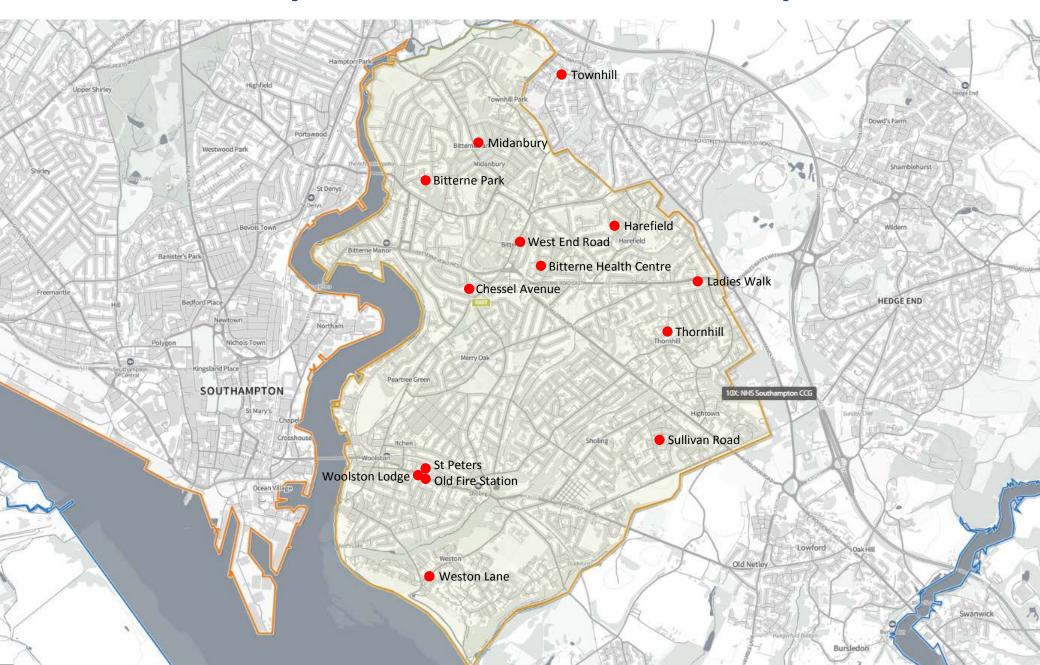




East Locality Estates & Access Review Emerging ideas & options

February 2020

Current Primary Care sites in East Southampton



Background & proposed timeline for review



- Commissioning high quality services has geographic context
- Recognition of challenges—including the "burden" of estate
- Relative autonomy of Primary Care providers
- Individual applications without context
- Call for more strategic approach



Apr to Sep 2020 Central Locality Sep to Mar 2021 West Locality

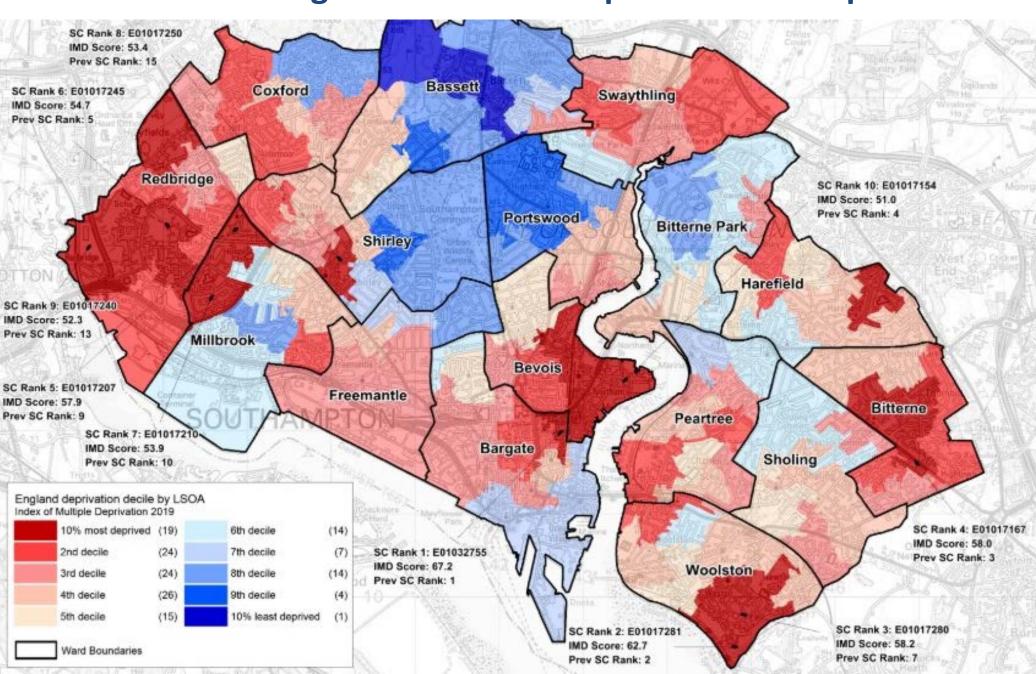
Context – Primary Care

- Current challenges present existential threats to primary care
 Rising demand, workforce supply, burden of estate etc.
- Recommendations of nationally commissioned reviews (2018)
- New Primary Care Contract Framework and Primary Care Networks (PCNs)
- Increasing skill mix within practices and at PCN level
- Investment in new roles (e.g. PCN Physiotherapists)
- Increased access (8am till 8pm and 7 days per week)
- Integrated Care Teams to support people with complex needs
- Increasing emphasis on digital access

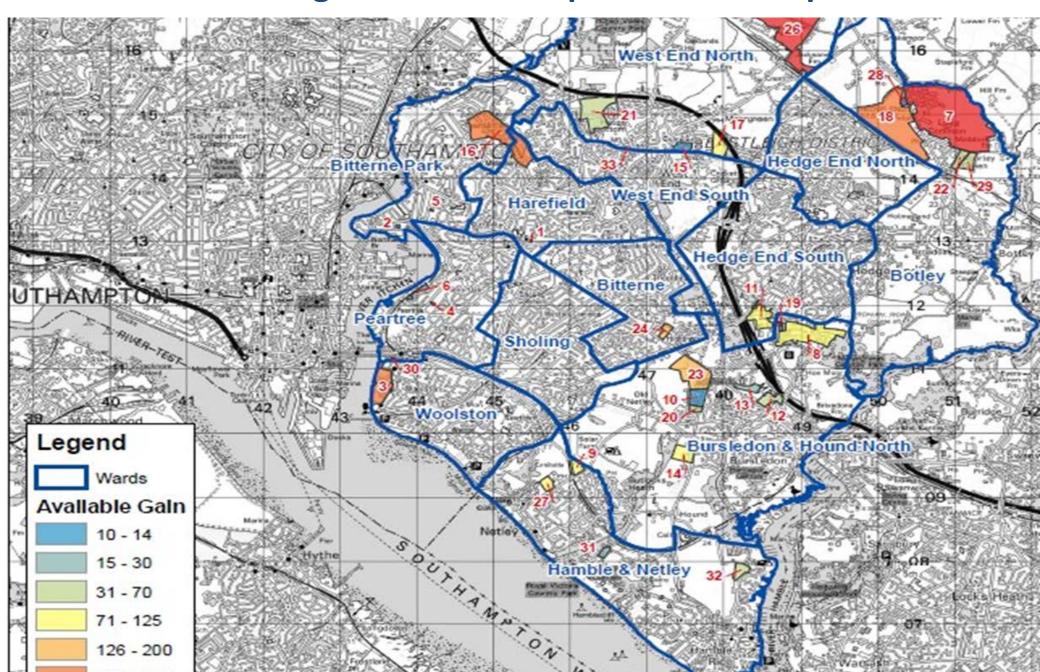
Context - Future of Primary Care

- Most GP practices are non-NHS organisations
- Most GP practices are run by partnerships
- Most GP contracts are in perpetuity
- NHS England (via the CCG) reimburses practices reasonable costs for the provision of their own accommodation
- There is a mixed tenure of GP premises some partnerships own their sites freehold
- Practices can apply to the CCG to make variations to their contracts – including closing branch sites or moving sites
- The CCG is obliged to decide on these applications reasonably

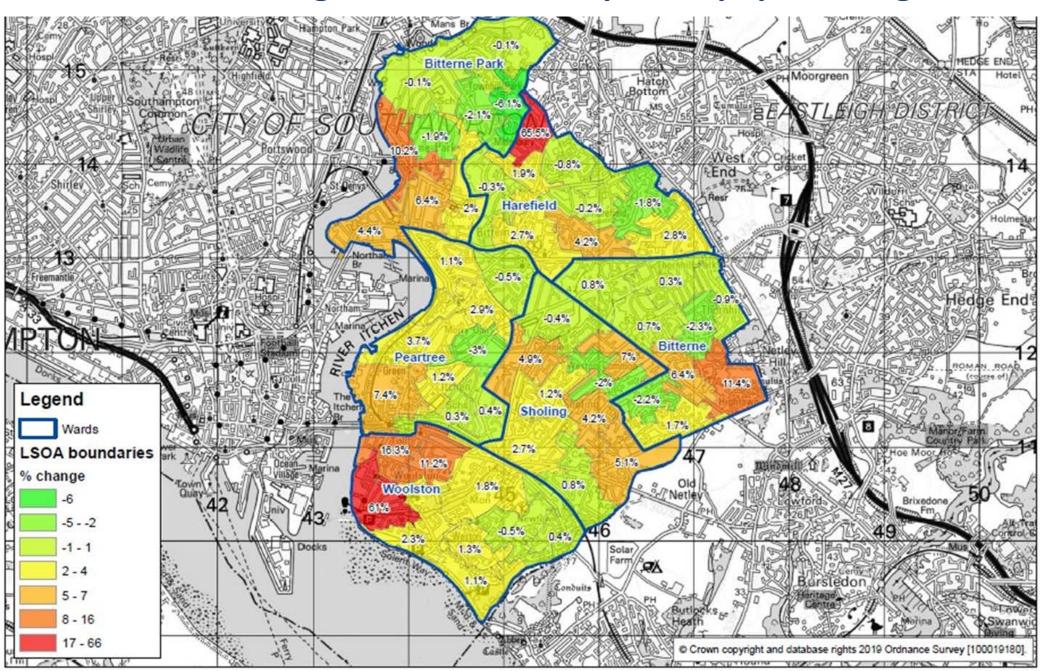
The review is taking into account – deprivation & inequalities



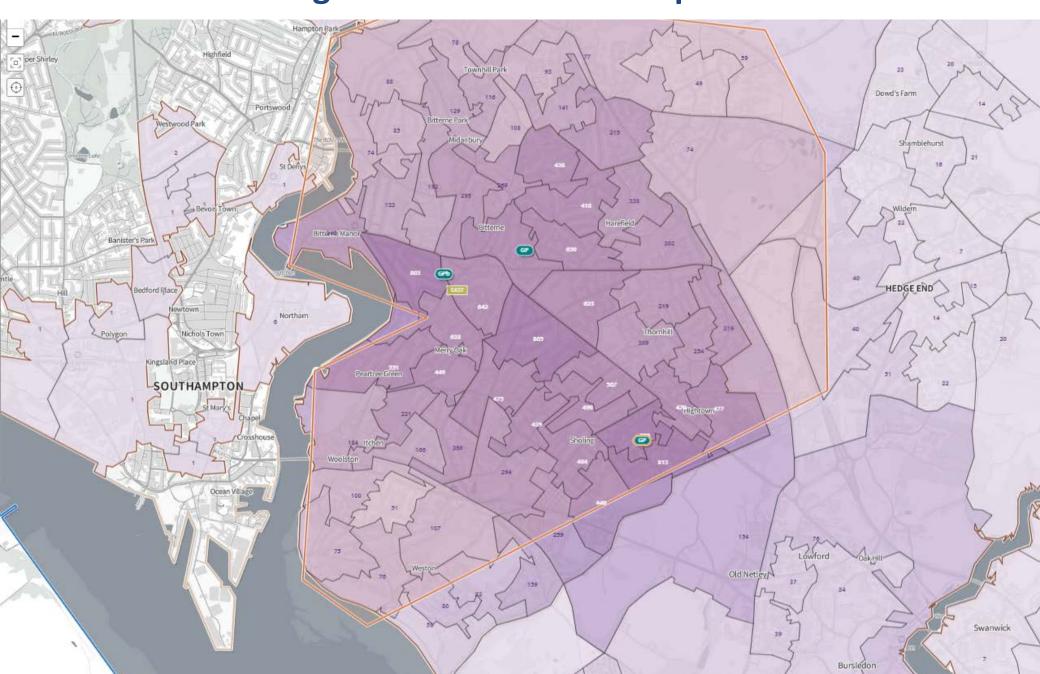
The review is taking into account – planned developments



The review is taking into account – expected population growth



The review is taking into account – where patients live



The review is taking into account – patients views on estate

900+ responses to date

How important is it that your GP surgery is located as close as possible to the following:

Location	Rating scale average
My home	4.02
Parking	3.96
Pharmacy	3.77
Bus stop	3.17
Other NHS facilities	2.72
Precinct / shopping parade / local shops	1.76
Community centre	1.72
Railway station	1.60
Major supermarket	1.45
Library	1.43
Place of worship	1.27

(closer to 5 = most important)

Testing extreme scenarios: Which of the followould you prefer?	owing scenarios
Attending a smaller GP surgery, which is closer to your home, but open less often	24.47%
Attending a larger GP surgery, which is located near local facilities but could be further away from your home, and has longer opening hours	
Don't know	22.46%

- Over 60% of respondents indicate that they would be willing to travel further if it meant getting an appointment with an appropriate clinician more quickly, but clear preference to travel as little as is possible
- Car and walking most common ways of travelling to a surgery
- Almost 90% say they do not have problems travelling to their surgery at present, but issues raised about distance to travel to particular sites on periphery of city (e.g. Sholing) and difficult parking arrangements
- Patients for all sites overwhelmingly indicate the buildings they
 use are fit for purpose and safe. Issues / concerns raised about
 physical access on slopes; waiting rooms space for young
 children/pushchairs; disabled toilets.

The review is taking into account – patients views on access

- Significant issues with booking appointments most commonly:
 - regarding telephones (length of time to wait / calls unanswered)
 - o no appointments available to book at time of contact
 - o difficult booking procedures, e.g. only able to book routine appointments during set times of the day
- Concerns raised about low numbers of GPs and that closure of sites is inevitable
- Increasing awareness of GP hubs: 74% have heard of the service (including 34% say they have used the service). More work to do to raise awareness of e-consult, NHS app (launched in 2019), and other ways to book appointments online.
- Patient engagement on review commence in Dec 2019 and will continue to end of April 2020 before final report submitted. Currently analysing age and practice breakdown of results to date prior to engagement on emerging options.
- Future public and patient engagement will include refreshed survey, drop in sessions, and focus groups.

Some initial principles to aim for?

- High Quality estate fit for modern healthcare
- The right number of sites with capacity and access mapped to our communities
- Locality "hubs"
 - In district centres co-located with other amenities
 - Good transport links and local parking
 - Including core primary care plus other health and care services
 - Open 8am till 8pm 7 days per week
- Preservation of choice for patients
- Enabling new service models including Primary Care
 Networks and Integrated Community teams
- Affordable for CCG and GP partnerships

Emerging ideas and options

Informed by our Estates and Access Review that includes:

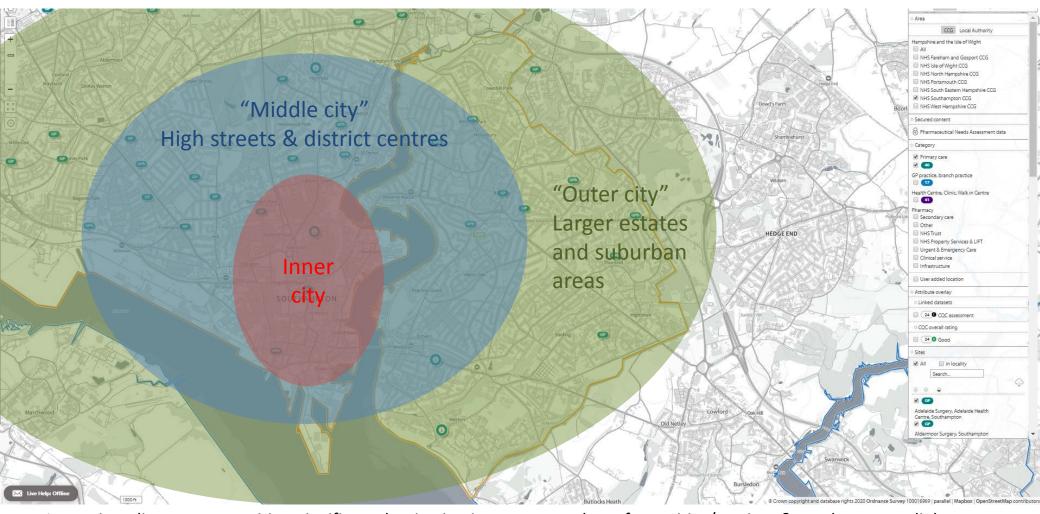
- Stock-take of current sites
- Considering population and environmental factors
- Considering strategic programmes e.g. PCNs, Better Care Southampton
- Understanding of opportunities e.g. Bitterne Hub
- Initial analysis of engagement with patients / public
- Aspirations & plans of local practices*
- Aspirations & plans of other local providers*

^{*} Including workshop on 31st January 2020 for GP practices, other health providers and Healthwatch

Assumptions and caveats

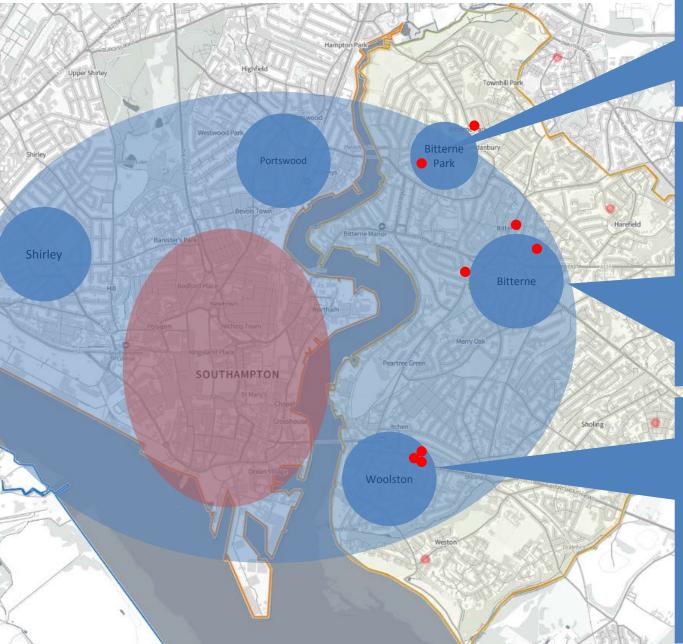
- We assume that there is an opportunity to improve primary care estate and access in the East of the city
- All ideas and options are subject to further engagement with communities, Practices and other stakeholders
- All ideas and option are subject to further feasibilities to consider viability
- All ideas and options will require Practices "buy in" any specific proposals for change need to be mutually agreed
- Any variations to GP contracts, including branch closures or site moves are subject to approval by the CCG

Geographic orientation of city



- Inner city diverse communities, significant deprivation in some parts, lots of amenities/services & good transport links
- Middle city higher numbers of houses of multiple occupation, high streets and district centres, transport hubs & local amenities
- Outer city some significant large areas of deprivation, lack of amenities, transport links to city centre via district hubs
- Need to capitalise on co-location in district centres extended services for localities
- Need to redress balance of service provision on East perceived bias of service locations on West of River Itchen
- Need to be mindful of amenities and communities on city periphery e.g. Eastleigh Southern Parishes

Emerging options – District Centres



- Smaller district centre
- Buses to city centre. Townhill Park and Portswood
- Bitterne Park Medical Centre and Midanbury operated by Living Well Partnership – both part time branch sites
- Significant capacity in accommodation across 2 sites
- 1. Opportunity to "right-size" primary care provision and possible site consolidation
 Opportunity to consider service mix at Bitterne Park
- Larger district centre
- Bus route hub with routes to city centre, Townhill, Hedge End, Harefield, Thornhill, Sholing and Woolston
- Chessel Avenue and Bitterne Health Centre operated by Peartree plus West End Road operated by Bitterne Surgery
- Bitterne Health centre could be an ideal site for colocation of community health and social services teams
- A new community Hub in Bitterne could offer further opportunity & re-provide sites – including for other health and care services for East Locality

2. Opportunity for site consolidation

Highton

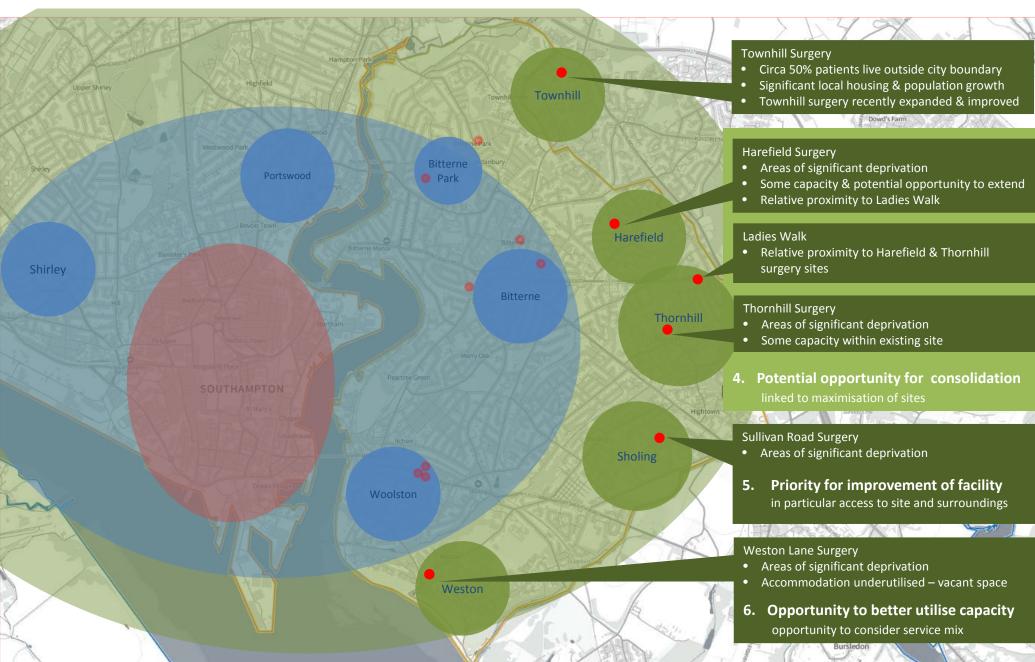
Application from Peartree – decision deferred Opportunity to revisit service mix at Bitterne HC Opportunity to improve – potential new facility

- Larger district centre
- Bus route hub with routes to city centre, Bitterne, Sholing,
 Thornhill, Hightown, Weston, Netley, Bursledon
- Woolston Lodge, Old Fire Station & St Peters all adjacent on Portsmouth Road
- Sufficient capacity across current Woolston sites for some future growth and possibly other health and care services for East Locality
- Opportunity to extend Woolston Lodge to support site consolidation
- Potential capacity at Weston Lane

3. Opportunity for site consolidation

Opportunity to consider service mix in Woolston sites

Emerging ideas and options – Outer city



Emerging ideas and options – in summary

1. Bitterne Park & Midanbury

Opportunity to "right-size" primary care provision and possible site consolidation Opportunity to consider service mix at Bitterne Park

2. Bitterne

Opportunity for site consolidation

Opportunity to revisit service mix at Bitterne Health Centre. Opportunity to improve – potential new facility Application from Peartree pending – decision deferred.

3. Woolston

Opportunity for site consolidation

Opportunity to consider service mix in Woolston sites

4. Harefield & Thornhill

Potential opportunity for site consolidation to be explored

Linked to maximisation of sites

5. Sholing

Priority for improvement of facility

In particular access to site and surroundings

6. Weston

Opportunity to better utilise capacity

Opportunity to consider service mix