

# APMS Public Consultation – 19th October Update

## 1. INTRODUCTION

This update paper follows the discussions and recommendations made by the Primary Care Commissioning Committee (PCCC) on 19<sup>th</sup> October and is supplementary to the APMS Recommendations report previously circulated. Although this report contains recommendations, no formal decisions have been made and the views of HOSC will be fed back to Walsall CCG Governing Body (GB) for consideration for the GB to make the final decision.

Once a final decision is made by Walsall CCG GB a communications plan will be put in place where there are any changes in services, so that patients are well informed.

# 2. AREA 1 – WALSALL (MANOR MEDICAL, SAI (INTRAHEALTH) AND WHARF FAMILY PRACTICE)

The options that went out to public consultation for area 1 were:-

- **Option 1** combine Manor Medical, and Wharf Family Practice, and base at Forrester Street. Sai Medical Practice would remain a separate practice for now, although in the same building. This would mean current patients of Wharf Family Practice would go to Forrester Street for care.
- **Option 2** combine Manor Medical, Wharf Family Practice and Sai Medical Practice, and base at Forrester Street. This would mean current patients of Wharf Family Practice would go to Forrester Street for care. Please note that Sai Medical Practice and Manor Medical Practice are already based at Forrester Street.

## The PCCC preference is for option 2.

This option provides a better strategic fit as a larger practice could provide a greater skill mix and be more sustainable in the future. The area is of high deprivation and high BME population and a larger practice would be in a better position to provide specialised services for the community and provide male and female GPs and patients highlighted that these were important factors for them. The area has many health challenges and a larger practice would be in a better position to improve access to appointments, the quality of the health and care of patients to reduce health inequalities. This option provides a better opportunity to utilise the space within the building and respondents to the consultation were concerned about this.

The results of the consultation were that 62.5% (60) preferred option 1 and 37.5% (36) preferred option 2. The biggest difference in the preferred option was seen at Sai and Manor (roughly a 70/30 split in favour of option 1) and these practices are already based at Forrester Street. However there is a smaller split of opinion from the Wharf patients of a 60/40 split in favour of option 1 and these patients are the ones who would need to move into the building. Many of the patient concerns regarding option 2 related to parking and getting to the practice, which apply to both options.

# 2.1. AREA 2 – HARDEN, COALPOOL AND BLAKENALL

- Option 1 is to combine the three GP practice contracts of Blakenall Family Practice, Harden Family
  Practice and Coalpool Family Practice and base at one site, Harden Health Centre. Patients of the
  three practices would all be part of the new single practice and those who currently go to Blakenall
  would go to Harden Health Centre.
- **Option 2** is to combine the three GP practice contracts of Blakenall Family Practice, Harden Family Practice and Coalpool Family Practice and base them at two sites, Harden Health Centre and Blakenall. There would be a single reception desk at Harden Health Centre, and patients of the combined practice would be able to go to either Harden Health Centre or Blakenall.

## The PCCC recommendation is for option 2 to be implemented.

The option provides a good strategic fit whilst allowing for the needs of the people in the area. The Public Consultation raised some key points that the CCG could not mitigate around parking and access to the building at the Harden/Coalpool site and many patients would be disadvantaged under option 1.

The results of the consultation were that 83% (199) respondents preferred option 2 over option 1, 17% (41).

## 2.2. AREA 3A – KINGFISHER

The options that went out to public consultation for area 3a - Kingfisher were:-

- Option 1 is to allow the contract to expire at Kingfisher Practice and not procure anything in its place. This
  means that patients would go to other nearby practices. Patients of Kingfisher Practice could register at
  Berkley Practice and Stroud Practice, which are in the same building as Kingfisher Practice or other
  surrounding practices.
- **Option 2** is to retain the practice at Kingfisher Practice.

# The PCCC recommendation is for option 1 to be implemented.

The option provides a good strategic fit and allows surrounding practices, which have the capacity to expand their practice size to grow to become more sustainable in the future. The quality of the surrounding practices is good and patients would not be disadvantaged by registering at one of these practices. Although patients would be free to register at a practice of their choice, the natural options are likely to be with one of the two practices in the same building as Kingfisher and this would result in no change of travel or parking for patients. Rooms within the building that Kingfisher currently utilises could be divided up between the other two practices in the building, depending on where patients decide to register. Allowing our local GPs to expand their practice list size provides them with the opportunity to be more sustainable in the future and look to offer more services to their patient population.

The results of the consultation were that 88 people responded on behalf of Kingfisher and out of these only 61 responded to the preferred option, leaving 31% who didn't answer this question. Of the 61 respondents the majority preferred option 2 (42, 69%) compared to option 1 (19, 31%). When respondents were asked to rate whether option 1 and 2 would have a positive, negative or no impact on them both options were stated as largely having no impact if implemented.

#### 2.3. AREA 3B - KEYS FAMILY PRACTICE

The options that went out to public consultation for area 3b (Keys) were:-

- **Option 1** is to allow the contract to expire at Keys Family Practice and not procure anything in its place. Patients of Keys Family Practice could register at one of the three practices based at the nearby Willenhall Medical Centre, Lockfield, Lockstown, Croft or other surrounding practices.
- **Option 2** is to retain the practice at Keys Family Practice.

# The PCCC recommendation is for option 2 to be implemented.

The option provides the best option for future sustainability of surrounding practices in the area and addresses the social economic challenges of the people in the area. There is currently insufficient capacity in local practices to accommodate the patients registered at the Keys to make the option sustainable long term.

The results of the consultation were that 93% (150) respondents preferred option 2 over option 1 (7%, 11).

#### 2.4. ACCESS

Removal of out of hours morning, evening and weekend appointments from the APMS contracts, with the view to replace with clauses to provide these types of appointments through a national Directed Enhanced Service, remove half day closing and provision of a Walsall wide extended access scheme where patients can access appointments at hubs across Walsall.

The PCCC recommendation is for the morning, evening and weekend appointments to be removed from the APMS Contracts for the procurement.

The option provides the best option to create equity across Walsall. For the majority of contracts the new clauses would see an increase in opening times of practices as the new contracts will remove half day closing for all APMS practices and will require the Providers to participate in the national Directed Enhance Service for Extended Access to provide some out of hours appointments for their patients.

The concerns raised by patients will be considered by the Steering Group responsible for implementing extended access within Walsall.

## 3. CONCLUSION AND DECISION MAKING

This update services as update to the summary report previously circulated. These recommendations will be subject to Governing Body approval on the 7<sup>th</sup> November 2017. Walsall CCG are requesting that HOSC consider and respond to the recommendations by 6th November, prior to the final decision being made at the Governing Body on 7th November.

## 4. APPENDICES

Public Consultation	APMS Consultation.pdf
Draft post-consultation Equality Impact Assessment	EQIA APMS - post consultation V2.docx