

Item No: 22

Meeting Date: Monday, 31st October 2016

Glasgow City Integration Joint Board

Report By:	Alex MacKenzie, Chief Officer Operations

Contact: Alex MacKenzie

Tel:	0141 427 8300	
SUPPORTING AT RISK GP PRACTICES IN GLASGOW		
Purpose of Report:	To advise the Integration Joint Board of the work being undertaken to support a number of GP Practices in the city and to update on on-going engagement with a number or GP Practices that have made a request to change the Practice arrangements	
Recommendations:	The Integration Joint Board is asked to note this report.	
Implications for IJB:		
Financial:	There are potential financial implications if the Integration Joint Board is required to fund alternative provision of GP practices	
Personnel:	None	
Legal:	Primary medical services provided under a general medical services contract, and arrangements for the provision of services made under section 17c of the National Health Service (Scotland) Act 1978, or an arrangement made in pursuance of section 2C(2) of the National Health Services (Scotland) Act 1978, are a delegated function of the Integration Joint Board.	
Economic Impact:	None	
Sustainability:	None	

Sustainable Procurement and Article 19:	None	
Equalities:	Consideration is given to the impact of proposed closures or relocation of GP practices on the protected characteristics a defined by the Equality Act 2010 in review of any proposals.	S
Risk Implications:	Reputational, political and public perception risks if GP practices close or run into significant difficulty	
Implications for Glasgow City Council:	None	
Implications for NHS Greater Glasgow & Clyde:	Potential requirement to employ GPs on a salaried basis if partnerships are dissolved.	
Direction Dominad to	Direction to	1
Direction Required to	Direction to:	
Council, Health Board or	1. No Direction Required	√
Both	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	1
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

1. Purpose

1.1 To advise the Integration Joint Board of the work being undertaken to support a number of GP Practices in the City and to update on on-going engagement with a number or GP Practices that have made a request to change the Practice arrangements.

2. Background

- 2.1 Primary medical services provided under a general medical services contract, and arrangements for the provision of services made under section 17c of the National Health Service (Scotland) Act 1978, or an arrangement made in pursuance of section 2C(2) of the National Health Services (Scotland) Act 1978, are a delegated function of the Integration Joint Board.
- 2.2 The Health and Social Care Partnership is currently engaged with a number of Practices that have made a request to change the Practice arrangements.
- 2.3 The Integration Joint Board has the decision-making responsibility as to whether an application to close by a Practice is approved. The Practice has the right of appeal under the 2004 General Medical Services contract, initially to the local contract dispute mechanism, and ultimately to Scottish Ministers.
- 2.4 This report provides an update on the position of a number of Practices.

3. Practice Update

- 3.1 There are currently 4 circumstances that merit reporting where HSCP Management and the Health Board's Primary Care Support function are actively engaged with Glasgow GP Practices.
- 3.2 North East Locality: An application was made to the Health and Social Care Partnership from a Practice in the North East Locality to close a Branch Surgery at Shettleston Health Centre, where approximately 2,500 patients attend, in order to concentrate services at Baillieston Health Centre where 10,720 patients attend. The Practice communicated with their patients detailing the purpose of the move and that it would lead to an improvement in access to GPs, continuity of GP/Health Care Professional, and patient safety. As well as addressing issues relating to the benefits of operating from a single site the proposal would enhance the use of Community Services, ordering and collection of repeat scripts, and car parking.

The Practice launched a formal consultation in June 2016 that included the Area Medical Council, GP Practices within the postcode, the Public Partnership Forum, local Councillors, MSPs and MPs, and other services within North East Locality. A range of responses were received that raised a number of concerns, particularly from neighbouring GP practices, with 54.8% (163) of the 297 written responses received expressing dissatisfaction with the proposals.

The Partnership notes the benefits to the practice from single site working and the commitment to looking at alternative ways of working, but has a number of concerns about the impact on the elderly and infirm; the issue of funding transport to attend the Practice in Baillieston; and the concerns expressed by neighbouring Practices. To this end, the Partnership cannot support the proposal as it stands and further discussions are planned with the Practice to explore these concerns before a final decision is taken on the application.

- 3.3 **South Locality: The Shields Centre.** Two GP partners based in the Shields centre dissolved their partnership with effect from 31st August 2016. The two GPs were subsequently employed by NHS Greater Glasgow & Clyde on a salaried basis. The Practice Manager, Practice Nurse, and reception staff transferred to the Health Board under TUPE Regulations and are currently line managed through the Partnership Primary Care Support and Development Team, with a view to them being transferred back to the Shields Centre Practice when new Partnership arrangements are established. The Practice was advertised as a going concern through GP journals and the national press, with a closing date of 7th October 2016, with interviews due to be held on 27th October 2016. The recruitment process is being led by the Partnership Primary Care Support Team with the expected date for transfer to the new GP partners being 1st December 2016.
- 3.4 **North West Locality: St. George's Cross Practice.** As a result of staff illness and a number of resignations at the Practice, and despite support being provided to the Practice by the Partnership Primary Care Support and Development Team and NHS Greater Glasgow & Clyde, a decision was made by the Chief Officer in the week beginning 10th October, to terminate the GP's contract and take over the Practice on a temporary contract under section 2C (2) of the National Health Services (Scotland) Act 1978. This decision was taken due to concerns about patient safety and financial viability, with advice taken from the NHS Central Legal Office and GP Sub-

committee. The Partnership continues to support the Practice, and is in discussions with a local neighbouring Practice that will provide support to the St. George's Cross Practice for around three months. This will allow formal assessment of the Practice's viability. Future options include a tendering process for the patient list or dispersal of patients, both of which require consultation processes with local practices, patients and local services.

3.4 **North West Locality:** A two-site Practice, situated in Possilpark, covers 2000 patients per site. New build premises were commissioned and built by the Practice and opened in 2014. The building costs escalated and a contribution was made by the Health Board due to exceptional circumstances. Ongoing issues in relation to the Practice relate to negative equity in the building, rental income is subject to tax and superannuation and there is currently a shortfall against mortgage payments. A number of meetings have taken place with the Practice to explore options where the Health and Social Care Partnership could offer assistance and more recently advice has been sought from the NHS Central Legal Office regarding funding options. At the same time, the Health and Social Care Partnership is exploring the potential of siting other local services within the building generating a potential rental income to the Practice. A further meeting has been arranged at the end of October.

4. Next Steps

4.1 The Partnership will continue to work with, and support, the Practices as outlined to identify solutions to the range of issues and will report the outcomes to the Integration Joint Board for approval in due course.

5. Recommendations

5.1 The Integration Joint Board is asked to note this report.