

## BOARD MEETING

04 September 2008  
 Item No 08/09/14

### Darlington Consultation – Darzi Health Centre Procurement

#### 1. Introduction

Public consultations in Darlington were undertaken during the period 2 May – 4 August 2008 in order to seek the views of the public and patients of the proposed GP Led Health Centre to be co-located with the Urgent Care Walk in Centre at Dr Piper House in Darlington Town Centre.

Consultation was primarily focused around the following issues:

- Views on the proposed location of a new GP led health centre in Dr Piper House
- Views on the proposals relating to the services to be delivered
- The criteria to be used to assess potential service providers.

#### 2. Implications and Risks

<p><i>Will there be a significant impact on patients or patient care?</i></p>	<p>Patients will have access to a GP Led Health Centre open 8am to 8pm, 7 days a week for both registered and non-registered patients. The outcome will increase primary care capacity, improve health outcomes in deprived areas, create innovative services, increase competition and choice and improve people's health and reduce health inequalities and address specific issues. It is expected that the following specialist services will be delivered: mental health and learning disability, cardiovascular screening, sexual health, smoking cessation and weight management. The aim is to give 400 patients access to mental health services and 500 patients access to learning disabilities services per year.</p>
<p><i>Are there any financial implications to implementing this item?</i></p>	<p>There are no financial implications to implementing the issues arising from the consultation.</p>
<p><i>Will there be an impact on Equality, Diversity or Human Rights?</i></p>	<p>The procurement of the GP Led Health Centres will offer a range of new services to all members of the local</p>

	population.			
<i>Does this item form an essential part of quality or performance standards e.g. Healthcare Commission, NHS Litigation Authority? If yes, detail which standard.</i>	Operating Framework 2008/09 – 2010/11 (item 12.i)			
Primary care access: <ul style="list-style-type: none"> <li>To increase capacity in primary care</li> </ul>				
<b>3. Recommendation</b> <p>The Board is requested to note the issues in responding to the consultation feedback which are outlined in the Executive Summary attached as Appendix A. A full report is available upon request from <a href="mailto:verna.fee@cdpct.nhs.uk">verna.fee@cdpct.nhs.uk</a>. The following issues to be incorporated into the Invitation to Tender:</p> <ul style="list-style-type: none"> <li>The need for a robust communication and engagement plan from the provider to be included as part of the service specification and contractual arrangements.</li> <li>Parking at Dr Piper House. Consideration of practical arrangements for parking at the site including drop off and disabled parking in the short term and considering existing circumstances, the possibility of dedicated patient only bays to be explored by the provider.</li> <li>Access to pharmacy to support the delivery of the extended services.</li> </ul>				
<b>4. Submitted by</b> <p><b>Author:</b> Theresa Huddart  <b>Title:</b> Assistant Director Pathway Development Primary Care and Community  <b>Sponsoring Director:</b> Pat Taylor  <b>Title:</b> Director of Investment Planning  <b>Date:</b> August 2008</p>				
<b>5. Purpose of the Paper</b> <p>Information sharing <input type="checkbox"/> ✓ Development/discussion <input type="checkbox"/> Decision/action <input type="checkbox"/></p>				
<b>Version</b>	<b>Date</b>	<b>Summary</b>	<b>Owners Name</b>	<b>Approved</b>
V1-0	260808	Presented to Management Group CDPCT	Theresa Huddart	260808
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V2-0	040908	Presented to Board		

**Darlington Primary Care Trust**  
**Proposals for Improving Access to GP Services in Darlington**  
**Consultation Evaluation 2008 - Draft August 4<sup>th</sup> 2008**

### **Executive Summary**

#### **Introduction**

The following report summarises the comments and questions which have been gathered by and submitted to Darlington PCT in response to the consultation on the proposals to improve access to GP services in Darlington.

The consultation proposals were developed in line with Professor Lord Ara Darzi's NHS Next Stage Review Interim Report (published in October 2007).

The feedback from the full consultation report has in the first instance acted to inform the development of the service specification but has also been used to form the basis of a formal consultation response document which will be issued by the PCT in line with section 242 and 244 of the NHS Act 2006.

#### **Consultation Methodology**

The formal consultation was implemented between 2 May and 4 August 2008 in line with Darlington PCT's consultation plan. Consultation primarily focused upon the following issues

- Views on the proposed location of a new GP led health centre – health needs assessment had provided evidence that the area of need in Darlington was the town centre Dr Piper House
- Views on proposals relating to the services to be delivered
- The criteria to be used to assess potential service providers

#### **Summary of Consultation Feedback**

- There was generally a great deal of scepticism about the proposal and what this would mean for existing primary care provision and this was reflected in the discussion points at meetings and some feedback the PCT received in writing and on surveys.

- A wide range of views were expressed at public meetings and on surveys about the proposed service being provided from Dr Piper House. Some felt that Dr Piper House was a central, fair and equitable location. Conversely a significant number of participants raised concerns about access issues particularly public transport and parking at the site. No other viable alternative site was identified by consultation participants.
- Of those participants who were supportive of the proposal, the vast majority made the point that this should be an additional service and not negatively impact on existing primary care provision.
- Some participants were not clear about why Darlington needs this additional service and felt that existing GP practices provided an adequate service or felt that the extra resources should be given to the practices to expand their hours.
- A number of survey respondents and those who attended meetings commented that they felt that the proposed service would be beneficial to those who work, have children and caring responsibilities.
- Concerns were raised about where the extra GPs were going to come from, the quality of the services they would provide and communication between this service and GP practices.
- Of those who responded by survey (n 36) 60 % scored quality issues as being more important than cost; 40 % thought quality was as important as cost.
- A key component of the Darlington scheme was the additional services that this would offer people with mental health problems and learning disabilities and children and young people. A letter of support was received from Tees, Esk and Wear Valleys NHS Foundation Trust along with a request that the potential for co-location of services be considered. Support was also received from the PCTs Children's Directorate and Darlington's Teenage Pregnancy and Sexual Health Services Coordinator.
- Although beyond the remit of this scheme, in relation to what other services the PCT should consider providing, NHS dentistry including emergency provision , podiatry and health checks by age and well mens' and womens' clinics were themes highlighted both on surveys and at meetings. This feedback should be acknowledged in the response document.
- The Local Pharmaceutical Committee (LPC) requested that the PCT liaise closely with the pharmacies in the vicinity of the centre during the planning stage.

## **Darlington Borough Council - Health and Well Being Scrutiny Committee Response (Draft minute August 2008)**

**RESOLVED** – (a) That the Health and Well Being Scrutiny Committee support the proposals for the addition of services to the Walk In Centre at Dr Piper House operating from 8am -8pm, in principle, as it will increase the services available in the town, that are needed regardless. Although, the Committee do have concerns to relation to:-

(i) the number of people who have been consulted and that the PCT should think about consulting in supermarkets, on Saturdays, to talk to more people; and

(ii) the overarching issues surrounding transport services.

### **Issues for Consideration in Responding to the Consultation Feedback**

- A number of points raised during discussion at meetings and in questionnaire responses reflect the need for a robust communication and engagement plan that provides clear and consistent information on what services will be available, when and for whom. This should include comprehensive guidance on what is available for registered and unregistered patients and clear advice and co-ordination in respect of nurse led service, GP led provision and cross over with OOHs at Dr Piper House and Accident and Emergency. Commissioners should expect this from the provider and consider including this as part of the service specification and contractual arrangements.
- The communications plan should also provide clarity over the potential impact, if any, on existing services as this will be vital if the proposals are to be viewed positively by the residents of Darlington and services owned and used to their full potential.
- The main issue raised by members of the public was by far public transport and parking at Dr Piper House. There will need to be some consideration of practical arrangements for parking at the site including drop off and disabled parking in the short term and considering existing circumstances, the possibility of dedicated patient only bays may need to be explored. Commissioners will need to be able to demonstrate that concerns regarding this issue have been taken on board and acted upon. On a medium to long term basis there will be a need to look at the current public transport and parking arrangements following analysis of additional patient numbers and transport methods used to the site. This may need to link to equality impact assessment.
- The commissioner will need to develop support arrangements including access to pharmacy to support the delivery of the extended services.

- The PCT will need to produce a formal response to the consultation feedback and consideration could be given to establishing an implementation group that includes local patient and public representation to encourage ownership and take up of the new services being offered.