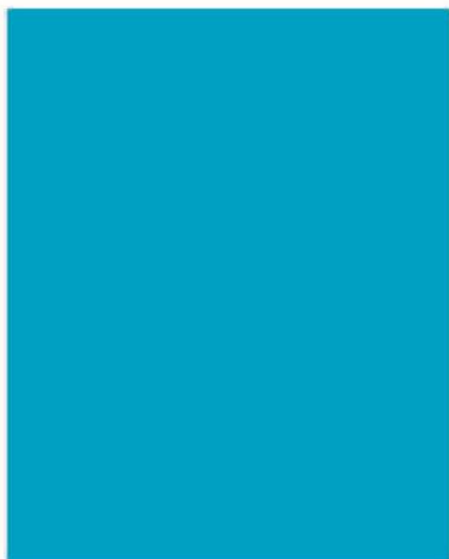


Application for  
Extension to  
Temporary List  
Closure – Dr Cook  
– Oct 2020



## Introduction

Dr Cook (Practice Code – B81095) has applied to extend the list closure for a further 12 months. The practice closed their list initially on 1<sup>st</sup> December 2019 for 6 months. An extension was granted for a further 6 months until 1<sup>st</sup> June with the list due to re-open on 1<sup>st</sup> December 2020.

The practice is located at the following address:

Field View Surgery  
87 Beverley road  
Hull  
HU6 7HP

The table below illustrates the staffing at the time of the initial practice closure and at the time of applying for an extension:

Health Care Professional	17/10/19		7/4/20			9/10/20		
	Total No. employed	WTE	Total No. employed	WTE	No. Sessions	Total No. employed	WTE	No. Sessions
GPs	1	1.12	1	1.12	xx	1	1.12	xx
Practice Based Pharmacists	0	0	0	0	0	0	0	0
Advanced Care Practitioners	0	0	0	0	0	0	0	0
Physicians Associates	0	0	0	0	0	0	0	0
Practice Nurses	1	0.96	1	0.96	xx	1	0.96	xx
Health Care Assistants	1	0.75	1	0.75	xx	1	0.75	xx
Phlebotomist	0	0	0	0	0	1	xx	xx
Other: (Please define)	1 2 locums am and pm 1 full day	0.27	1 2 locums am and pm 1 full day	0.27	xx	1 2 locums am and pm 1 full day	0.27	xx

The table below illustrates the list size movement in the time since the initial list closure both in terms of numbers and percentage:

	<b>Number of patients registered</b>	<b>% movement in the quarter</b>
<b>Quarter 31/12/19</b>	4168	2.38
<b>Quarter 31/3/20</b>	4096	-1.73
<b>Quarter 30/6/20</b>	4059	-0.9

The practice list size as at 20/9/20 was 4021 which is a further decrease in numbers.

### **Regulations / Policy**

The practice contract and GMS/PMS regulations allows for a contractor to apply to NHS England to extend its list closure at least 8 weeks before it is due to re-open.

The Policy Book for Primary Medical Services – Chapter 9 – Managing Patient Lists sets out the requirements to manage the applications

### **List Sizes**

The table below illustrates the list size movement in the time since the list closure for the neighbouring practices

			<b>Quarter 31/12/19</b>	<b>Quarter 31/3/20</b>	<b>Quarter 30/6/20</b>
B81631	Dr Raut	<b>No.</b>	4717	4653	4680
		<b>% movement</b>	-0.32	-1.36	0.58
Y02747	Haxby Kingswood	<b>No.</b>	13613	13790	13914
		<b>% movement</b>	1.36	1.30	0.90
B81046	The Bridge Group Practice	<b>No.</b>	8578	8498	8461
		<b>% movement</b>	-0.61	-0.91	-0.44
B81048	Modality Partnership (Hull)	<b>No.</b>	58,808	58,596	58,524
		<b>% movement</b>	-0.65	-0.36	-0.12
B81020	Sutton Manor	<b>No.</b>	7345	7364	7364
		<b>% movement</b>	0.22	0.26	0
B81002	CHP Bransholme	<b>No.</b>	3238	3244	3223
		<b>% movement</b>	-1.40	0.19	-0.65
B81018	Orchard 2000	<b>No.</b>	8978	9065	9101
		<b>% movement</b>	0.27	0.97	0.40
Y02344	Northpoint	<b>No.</b>	3451	3438	3431
		<b>% movement</b>	0.35	-0.38	-0.20
B81119	Goodheart	<b>No.</b>	4750	4736	4738
		<b>% movement</b>	0.06	-0.29	0.25
B81616	Dr Hendow	<b>No.</b>	2741	2765	2755
		<b>% movement</b>	-0.04	0.88	-0.36

## Practice application

What progress has been made against each of the items contained within the action plan submitted with the original application to close and was to be implemented during the current agreed list-closure period?

### Action Plan as at 3.4.20 with September updates shown in italic

Issue	Action(s)	Person Responsible	Timescale	Actions to date	Outcome
1 full time GP per full capitation list size – approx. 4104	To continue to search for additional salaried part-time GP via job adverts in NHS Jobs, Indeed job site and emails to external service users.	MS	June 2020	Advert, emails To resend/update monthly	One GP shown interest- nothing further discussed  <i>We had a GP interested however now signed up for partnership elsewhere</i>  <i>One GP shown interest- emailed me 2 weeks ago – no response</i>
Lack of GP's per capitation size – part 2	Speak to lead in international recruitment for further information	MS/BFC	End September	Nothing discussed due to COVID-19, but to speak to international recruitment once settled	Nothing further discussed  <i>Nothing further discussed</i>
The practice to invest in recruitment drive for salaried GP via a recruitment agency	Contact Practice managers who have used recruitment agencies and speak to those who have been successful in recruiting with them	MS	January 2020	2 emails sent to local practice who have been successful in recruiting this way Email sent to all local PM's asking for their experience	Have a contact but being made aware expensive  Closed – not sure if the correct route for the practice financially
Lack of clinical appointments	To introduce our extended access and to release our Minor surgery clinics as we are no longer signed up to the ES.	MS	January 2020	Extended access in place as from wk com 11.11.2019- creating extra Nurse and GP appointments Minor surgery appointments now released to regular patient appointments again this creating an extra 9-10 appointment per week.	Process in place and extra appointment now available to all patients- working well  Still running but under used due to ~COVID-19 Closed

Issue	Action(s)	Person Responsible	Timescale	Actions to date	Outcome
Daily increased workload	Restructure of admin/reception area Re-introduce our document management process	MS  MS/SF/BFC	June 2020  September 2020	Spoke to KCOM regarding putting auto attendant Changing staff admin rota Team leader left 2 part time admin members employed	Upskilling all members of the admin team releasing pressure on our receptionists  <i>Upskilling all members of the admin team- ongoing releasing pressure on our receptionists - completed</i>
The practice to introduce new ways of working for admin staff	Care navigation training and admin training for all staff with PCN and CCG	MS	June 2020	Our PCN pharmacist allocation 3.29hr per week and part of this will be used for admin care navigation training Discussions with CCG regarding upcoming admin training - TBC	To email PCN pharmacist regarding care navigation training – not sure how we stand in current COVID-19 climate  Waiting further information from CCG- nothing to date  <i>Pharmacist currently working remotely on certain medication reviews</i>  <i>1.10.20 – still nothing to date from CCG</i>
Registering of new patients created hundreds of files to be fitted into existing cabinets	Allocation of staff time to re-arrange all existing patient files and new patient files in cabinets	MS/LM and admin team	September 2020	Staff members coming in at weekends to re-arrange all note into cabinets	All New patient files will be alphabetically arranged in patient cabinets for ease of access.  Lack of cabinet space is coming to light  All new patients now filed away in cabinets however no more storage left for any new patients once re-opened.

					Closed
Storage, Cabinets and space	Need space for new cabinets if re-open list	MS	September 2020	To discuss further with BFC regarding space and cabinet storage	To assess space availability for new cabinets  <i>Space availability for new cabinets not available</i>
Registering of new patients creating hundreds of new patient files to be summarised	Allocation of staff time to summarise all new patient files	MS/LM/CN	December 2020	Nothing in place until new members of staff are employed	All new patient files will hopefully be summarised to date when new members of staff in place  <i>All new patient files will hopefully be summarised to date when new members of staff in place</i>
Practice nurse skills set	To book our new nurse on all the appropriate training sessions	MS/HB	ongoing	Actively looking into LARC training Booked on Red whale nurse update training Booked on non-medical prescribing with at Hull University to start in summer	Pessary training completed non-medical prescribing with at Hull University course on hold until COVID-19  This will build up her skill set and enhance the practice services we offer  <i>Pessary training completed Medical prescribing with at Hull University course starts January 2021</i>  <i>This will build up her skill set and enhance the practice services we offer</i>
Room shortage	To look at clinicians' clinics	MS	End May 2021	MS arranged renovation of locum room and in process of main GP room renovation – starts 12.10.20	<i>Easier for clinicians to use either rooms</i>

**Options the practice has considered, rejected or implemented in an attempt to relieve the difficulties encountered during the closure period or which may be encountered when the closure period expires?**

The previous patients we registered, when neighbouring GP practice closed (approx. 800pts) these have been a huge variety of co-morbidity patients and over 65's this having an increasing impact on our clinicians.

During our current list closure and during COVID-19, we have implemented many changes, i.e. video consultations, intercom fitted, changed to telephone system, GP telephone triage etc. We have, since COVID-19, introduced a complete change of consultation pattern within the practice. All consultations continue to be telephone triaged and patients are given the option of video consultation with Dr Cook.

We believe that once the practice re-opens, COVID-19 will still play a relevant factor within the NHS and general Practice. We will be continuing with telephone triage, video consultations, the use of SMS, social media, online consultations etc

Our Practice nurse is due to undertake the prescribing course in January which will help our GP going forward, but this will not take place until mid-end 2021. Also, one of our receptionists is now a trained phlebotomist and has recently passed her vaccination course therefore will soon be able to undertake these in the future.

Online consultations continue to increase, and our practice is still very pro-active in advertising this.

We have had difficulty in recruiting a salaried GP over the last year, but we are still currently advertising as per action plan.

We do have lack of storage and room availability on some weekdays this sometime causing problems with the amount of bodies in the building, but this is regularly managed by the practice manager.

We are all currently experiencing lots of issues during the current climate but as a practice we are adhering to all the services offered to us

**How long do you wish your closure to be extended by?**

12months

**Is there any reasonable support the Commissioner would be able to offer, which would enable your list of patients to re-open at the end of the current closure period?**

We would appreciate help and support with our recruiting campaign for a part-time salaried GP.

NHSE to update practice manager with resilience funding information for help with finder's fee.

**What further plans do you have to alleviate the difficulties you are experiencing during your closure that could be implemented during the proposed extension period? These plans would ensure your list of patient's re-opens at the end of the extended period without such difficulties**

Please see above action plan

**Do you have any other information for the Commissioner regarding this application?**

*Please see attached job advert link*



advert.doc

Currently updating NHS advert and due to email out to all again



### **Comments received following the consultation**

In line with NHS England's "Managing Closed lists" policy, neighbouring practices within the Hull CCG area and the LMC Group have been consulted.

The following comments were received:

Modality	Modality Partnership (Hull) fully support an extension to list closure, particularly in these challenging times
LMC	The LMC has reviewed the application from Dr Cook's practice B81095 for an extension to the list closure period. The LMC supports this application to extend the period of closure for a further six months

### **Additional factors to be considered by the Committee**

A virtual meeting took place with the practice in order to catch up about the list closure. Due to the current situation, the practice is struggling to recruit through the usual routes and will look to agencies to support them.

The way work is currently undertaken has changed since COVID-19. This has meant that the volume of work is sustainable whilst the pandemic is ongoing. The nurse, once completed her prescribing, will be able to support the GP with minor ailments and a receptionist is now phlebotomy trained and is looking to undertake some vaccination training to further support the practice.

The PCN visiting service has stopped and therefore this has come back to the practice to undertake which has added pressure on the practice.

The practice is utilising video / telephone / e-consultations to the maximum and will continue to use these to ensure only those that need too are coming into the practice.

There are the following options in relation to the above:

- To decline the list closure
- To allow the practice to close for a shorter period with regular reviews
- To allow the practice to extend its list for 12 months with regular reviews

### **For Action**

The CCG's Primary Care Commissioning Committee is asked to:

- Note the contents of this report
- Consider and approve the recommendations
- Confirm if the practice application to close this list is to be supported

Prepared by: Hayley Patterson, NHS England – North East & Yorkshire Primary Care Contracts Manager