

## Introduction

Sydenham Group Practice (B81058) has applied to temporarily close its list for a period of 12 months. The practice is located at the following address:

Elliott Chappell Health Centre

215 Hessle Road

Hull

HU3 4BB

The practice is made up of the following GPs and Health Care Professionals:

Health Care Professional	Number	WTE	Sessions Worked (per clinician)
GPs	2	1.2	1 x 10 1 x 2
Practice Based Pharmacists	1	0.5	1 x 5
Advanced Care Practitioners	3	3	3 x 8
Physicians Associates	0	0	0
Practice Nurses	3	2	Nurse 1 x 6 Nurse 2 x 5 Nurse 3 x 4
Health Care Assistants	2	1.5	HCA 1 x 6 HCA 2 x 7
Other: (Please define)			
Is the practice a training practice? If so how many sessions are spent supervising students?	No (on hold)	0	0

The table below shows the practice's list size during the past 12 months:

<b>Quarter 0 31/12/20</b>	<b>Quarter 1 31/3/21</b>	<b>Quarter 2 30/6/21</b>	<b>Quarter 3 30/9/21</b>	<b>Quarter 4 31/12/21</b>	<b>Total movement during year</b>	<b>% increase / decrease during year</b>
8388	8481	8456	8436	8414	26	0.31%

The practice is part of the Symphonie PCN. List sizes during the past 12 months for all practices within that PCN are as follows:

<b>Code</b>	<b>Quarter 0 31/12/20</b>	<b>Quarter 1 31/3/21</b>	<b>Quarter 2 30/6/21</b>	<b>Quarter 3 30/9/21</b>	<b>Quarter 4 31/12/21</b>	<b>Yr chng</b>	<b>%</b>
B81032	4243	4242	4301	4391	4522	279	6.58%
B81035	6957	6994	7072	7099	7061	104	1.49
B81038	7502	7529	7574	7568	7577	75	1
B81047	7364	7417	7420	7427	7438	74	1
B81054	8641	8599	8602	8511	8537	-104	-1.2
B81075	3654	3757	3805	3804	3771	117	3.2
B81104	6981	6847	6686	6747	7633	652	9.34

## Regulations / Policy

The practice contract and GMS/PMS regulations allows for a contractor to apply to NHS England to close its list.

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

## Practice application

The practice's application included the following information:

- Main reason(s) for application:

We are struggling to provide service due to increased demand from patients with reduction in staff. Over the past year we have lost one full time and 1 part-time GP. GP Principal, Dr Thornton is working 5 full days. Our one salaried GP has reduced his sessions from 4 per week down to 2. Our regular locum who did 4 sessions is now on paternity leave and left with no clear indication of when he will return. All 3 of our ANP's are enrolled on MSc course, on day release , subsequently we lose 380 appointments per month. The workload for one GP is not sustainable when we are receiving between 80-90 new registrations every month.

- Options the practice has considered, rejected or implemented in an attempt to relieve the difficulties. If any were implemented, what success was achieved in reducing / erasing those difficulties?:

During the pandemic, we offered telephone triage first, we are continuing to offer. This has helped with patient access but we are in the process of restructuring the clinical rota's to increase the number of F2F appointments that are available. We are making use of Extended Access and the Winter Hub which has helped with capacity, but patients are reluctant to travel or be seen by unfamiliar practitioners. Using locum agencies if GP's are available

Advising patients who move out of the area to register with a local practice, We are no longer a training practice due to the current pressures of not being able to offer sufficient supervision, but hope to resume this in the future.

- Patient engagement

Sending email to PPG members – awaiting response.

- Discussions with other local contractors

Discussed with colleagues with the PCN who were supportive of temporary closure and other managers within the health centre who had no objections.

- What reasonable support could be given by the Commissioner to enable the practice to remain open?

Provision of a GP. Advertisement for full time salaried GP is currently on NHS jobs and in NHS publications. We hope to recruit a locum ANP to cover whilst ANP's complete MSc. We have also registered interest in the GP Fellowship Programme to in bid to recruit.

- Practice plans to alleviate the difficulties the practice is currently experiencing

Issue	Action Needed	Person Responsible	Timescale	Actions to date	Intended Outcome
<b>Only 1 full time GP per full capitation list size</b>	To continue with recruitment plan for addition full time salaried GP/ GP fellowship scheme	JT/MB	3 months	Contact with Locum/Recruitment agencies. Advertisement on NHS Job sites/NHS publications Word of mouth	We have had interest from one GP though only part time. Very early stages
<b>3 x ANP's currently studying for MSc Day releast for 1 day, loss of 380 appointments per month</b>	Emailed locum agency to secure temporary ANP's for next 2 years	MB	On-going for next 2 years	Correspondence (telephone and email) with locum agency Word of mouth	Awaiting response
<b>Inherited back log of notes to be summarised (still approx. 500+)</b>	Employed additional administration staff for data entry/summarising	MB/MH	On-going	Training of additional new staff	Reduction of backlog
<b>Registering of new patients adds to notes to be summarised</b>	Allocation of other admin staff from Reception	MB/MH	On-going	Juggling limited resources with reduced staffing	Once restrictions are eased following covid, pressure will be taken off staffing levels.

- Any further information presented by the practice

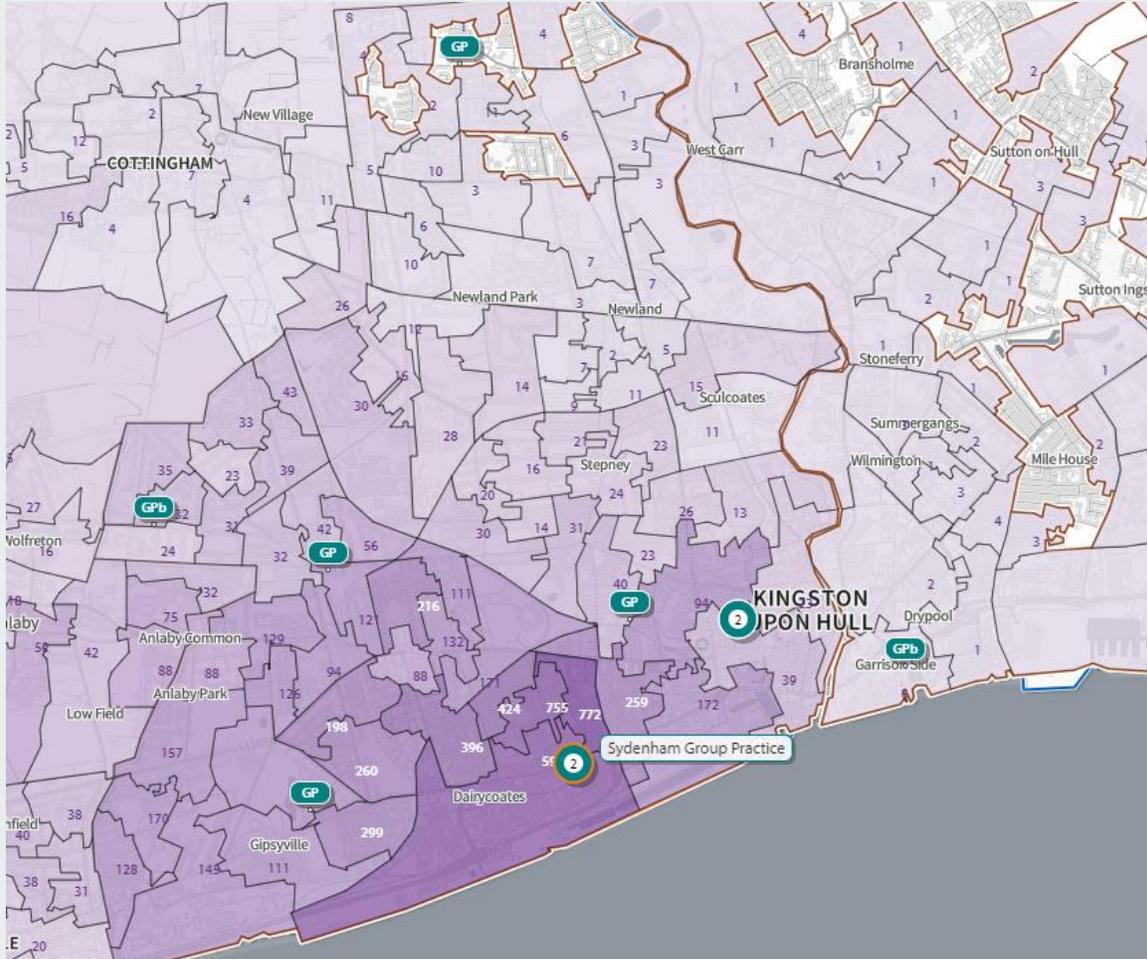
Winter Hub closes 31 March 2022

## List Sizes

The following table and graph demonstrate the changes in list sizes over the past year for the neighbouring practices:

<b>Practice</b>	<b>Practice Code</b>	<b>% List size increase / decrease over past 12 months</b>	<b>Open/Closed List</b>
East Hull Family Practice	B81008	-1.15	Open
Kingston Medical	B81017	6.21	Open
St Andrews	B81027	-3.94	Open
Wilberforce	B81032	6.58	Open
The Oaks	B81038	1	Open
Bridge Group	B81046	-1.47	Open
Wolseley	B81047	1	Open
Modality	B81048	-2.45	Open
Hastings	B81075	3.2	Open

The map below identifies the location of practices within the local area (green circles), Sydenham Group Practice (orange) and the home addresses of its registered patients (purple shading – the highest densities are shown in the darkest colours):



**Comments received in response to the consultation:**

In line with NHS England’s “Managing Closed lists” policy, nearby practices within Hull CCG area and the LMC Group have been consulted. The following comments were received:

**These will be verbally updated at the Primary Care Commissioning Meeting on 25<sup>th</sup> February as the application is currently out for consultation**

Organisation	Comments received

## **Summary of practice discussion to be considered by the Committee**

The practice is currently under pressure due to a significant reduction in the number of GPs at the practice, having only 1 full-time GP for a list size of 8400. The remaining clinical team, namely 3x ANPs, is reduced due to training commitments. The practice is currently advertising for reception staff and for GPs. Staff throughout the practice are under increasing pressure due to patient demand and increased workload, including summarising of new patient records.

The practice is engaging with the Fellowship offer to assist with recruitment of newly qualified GPs, they are working with locum agencies and will explore other avenues of advertising (e.g. LMC website, Indeed). They are also using Care Navigators successfully to signpost patients to GP Community Pharmacist Consultation Service (CPCS) and to the Winter Hub. PCN members support the idea of list closure and the practice shares premises with other practices who would be able to take on new patient registrations. Patients have been consulted but have not commented.

### **NHSE&I Recommendation**

A closure would enable the practice to:

- Manage patient safety in line with GP numbers
- Address their recruitment issues
- Support all staff groups to reduce their day-to-day pressures.

### **For Action**

The Committee will need to consider the reasonableness, or otherwise, of the timescale requested in order to implement the agreed actions.

The Committee will need also to consider the potential impact this closure would have on neighbouring practices and whether or not it would be reasonable to agree to a shorter closure period with a review during that period to consider the impact the closure is having.

### **Recommendation**

In relation to the closed list applications for Sydenham Group Practice, the Primary Care Commissioning Committee are asked to:

- Note the contents of the reports
- Consider and confirm if the practice's application to close its list are:
  - Not to be supported
  - Supported for the period of time requested or a different period