Whitstable Medical Practice

Premises Review

June 2019
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Introduction

The purpose of this paper is to inform the Whitstable Medical Practice patient population of an application that Whitstable Medical Practice is considering making to Canterbury and Costal Clinical Commissioning Group. The application will seek approval to close Seasalter Surgery, the branch surgery in Faversham Road, Seasalter. The Clinical Commissioning Group is the body responsible for considering such an application and will also be responsible for approving or declining this.

This paper will seek to undertake a review of existing Whitstable Medical Practice premises. It will example the cost effectiveness and sustainability of the current situation. Our aim is to ensure that buildings are fit for purpose to deliver outstanding care for patients, now and into the future. We intend that this paper will clearly articulate the rationale for the proposed changes.
Background

Whitstable Medical Practice was founded when the NHS began in 1948. This was when the 3 pre-existing general practices in the town became a single partnership. Despite initially remaining with 3 smaller sites, in 1975 the partnership agreed the innovative concept of a ‘health centre’. This decision led to the sale of the 3 individual sites as the partnership pooled and centralised resources to become the founding tenant at the Whitstable Health Centre.

Steady population growth as well as investment and development in the local area led, over time, to an increasing need for additional primary care estate. Chestfield Medical Centre opened in 1995, followed by Estuary View Medical Centre in 2009.

In April 2018 Whitstable Medical Practice merged with Saddleton Road and Seasalter Surgery. Dr Sakel was welcomed into the partnership and the practice list size grew by 2,700 patients. Seasalter branch surgery was taken on and is now run by the new partnership. Overnight, Whitstable Medical Practice became singlehandedly responsible for delivery of primary care services to the entire Whitstable population.

The number of patients using Seasalter branch surgery through personal choice is 1203 over the year since the merger. This is just 3% of the practice population.

Today, working as a single practice Primary Care Network (PCN) under a General Medical Services (GMS) Contract, Whitstable Medical Practice is comprised of 20 GP partners, a further 6 salaried GPs, 77 clinical staff and 99 non clinical staff who work closely together to serve a patient population of 40,207 people. We are proud to have received a rating of ‘Outstanding’ from the Care Quality Commission (CQC).

The practice provides a full complement of primary care (GMS) services. It also has a growing portfolio of in house services and community contracts which means that the practice successfully provides a variety of services not usually associated with a general practice. For patients, this importantly means that they can receive high quality care, closer to home, at less cost to the NHS. They can also access a range of outpatient, diagnostic and surgical services normally associated with a trip to hospital.
Premises

The practice currently occupies and works from 4 premises in the local area:

<table>
<thead>
<tr>
<th>Whitstable Health Centre</th>
<th>Estuary View Medical Centre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harbour Street</td>
<td>Boorman Way</td>
</tr>
<tr>
<td>Whitstable</td>
<td>Whitstable</td>
</tr>
<tr>
<td>CT5 1BZ</td>
<td>CT5 3SE</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Chestfield Medical Centre</td>
<td>Seasalter Branch Surgery</td>
</tr>
<tr>
<td>Reeves Way</td>
<td></td>
</tr>
<tr>
<td>Chestfield</td>
<td>28 Faversham Rd</td>
</tr>
<tr>
<td>CT5 3QU</td>
<td>Seasalter</td>
</tr>
<tr>
<td></td>
<td>CT5 4AR</td>
</tr>
</tbody>
</table>

Below are two maps which help to show the location and proximity of the four current sites:
Rationale for Change

Location of Existing Premises

As can be seen in the maps provided, Seasalter Surgery is located in extremely close proximity to both Estuary View Medical Centre and Whitstable Health Centre.

The distance between Seasalter Surgery (Point A) and Estuary View Medical Centre (Point B) is exactly 1 mile. Journey time by car is 4 minutes and on foot is 20 minutes. Please see below:

Driving
Walking

The distance between Seasalter Surgery (Point A) and Whitstable Health Centre (Point B) is just 2.2 miles. Journey time by car is 9 minutes. Please see below:
Patients previously associated with Seasalter Surgery are now formally registered at either Estuary View Medical Centre or Whitstable Health Centre. This is because these are the sites where each patient’s usual GP (Dr Sakel or Dr Ruff) is based. Consequently, many patients, who would have traditionally been seen at Seasalter or Saddleton Road Surgery are already happy travelling to an alternative superior medical centre.

Historically, due to lack of resources and restricted opening times, patients of Saddleton Road and Seasalter Surgery would have been expected to travel between sites to be seen and treated. Journey time by car was approximately 6 minutes and 25 minutes on foot. Examples of some of the services that were exclusively available at only one site are listed below:

- NHS Health Check
- Spirometry
- Physiotherapy
- Acupuncture
- Chiropractor
- Minor Surgery

As shown in the maps above, our main sites are in very close proximity to Seasalter Surgery. We provide both a GP and Paramedic visiting service for patients unable to attend the surgery in person. Telephone consultations are also widely available for appropriate matters. Public transport from the Seasalter area is available via bus although we recognise that this may not always be convenient. To address this issue, we have formed close relations with Red Zebra, a local charitable organisation who run a volunteer car service for those patients in need of transport. More information can be found by visiting the link below or by speaking to our reception team:

http://www.redzebra.org.uk/volunteer-car-scheme

For those who can afford it, a number of local Taxi companies offer a reliable and efficient service for less than £5 for a one way trip.

To summarise, we think it is reasonable and practical to expect all able patients to travel to one of our three main sites.
**Condition of Premises**

All of our main sites are purpose built medical facilities. This ensures that we are able to provide a full range of GMS services safely on each of these 3 sites. Seasalter Branch Surgery is a converted bungalow, originally built in 1960 and later converted into a GP surgery.

As a consequence there are a number of limitations of the Seasalter Branch Surgery:

- The surgery is not equipped to the same standards as our main sites.
- There is a significant lack of clinical space. Only two rooms are available for clinical use.
- There is no space for certain facilities, for example baby changing facilities.
- The premises does not provide ease of access for wheelchair users. The combination of small consulting rooms and narrow corridors is extremely inconvenient and potentially unsafe for many patients.
- There are only a total of 4 parking spaces for both staff and patients which is insufficient. Patients are forced to park on the street which often becomes congested at busy times. This is also frustrating to some local residents who can find it difficult to enter and exit surrounding properties due to inconsiderate parking.
- A considerable amount of building work would need to be carried out in order to attempt to address any of the above issues. These changes would also be subject to planning and other permissions and consequently we do not see this as a viable or affordable option.
Access to Services

Our three main sites offer a full range of GMS Services. Due to the limited space available and reduced opening times, the GMS service offering at Seasalter Branch Surgery however is reduced in comparison. In addition to this, we are unable to offer any of our enhanced or additional services. This frequently means that patients are required to visit a main site to access the care that they need. Examples of this are our spirometry or leg ulcer clinics, physiotherapy, ultrasound and x-ray. This results in reduced continuity of care for patients and fails to provide a ‘one stop’ service in a single location.

Appointment utilisation at Seasalter Surgery is very poor compared with our main sites. Utilisation of Nurse appointments stands at a shockingly low rate of 55% whilst GP utilisation is also low at 70%. Our main sites have utilisation figures of 82% and 98% respectively. It is estimated that a single unused GP appointment costs the NHS £30. However, our main difficulty is waste of available appointments simply because they are being offered in the wrong location.

Despite attempts from reception staff to encourage patients to visit Seasalter Surgery we have been unable to improve utilisation. Patients opt for the convenience and comprehensive services at our main sites.

There are further benefits to patients in centralising services at our main sites:

- Greater range of clinical and administrative expertise available under one roof.
- A larger, more resilient team with the ability to more robustly provide primary care services in a more efficient and effective way.
- A choice of GPs (male and female), Nurses and Healthcare assistants available for face to face or telephone consultations every day for the full duration of opening times.
- Access to GP walk in surgeries.
- Availability of clinical and diagnostic equipment.
- Improved ability to book and enhanced choice of online appointments.
• Improved availability of a patient’s usual GP as all work the majority of sessions at the main sites.

• Improved telephone access with greater number of staff taking calls for the entirety of the day.

• Increased access in person or over the phone as main sites are open between 8am and 6:30pm as a minimum.

• Access to extended hours appointments before 8am and after 6:30pm.

• Access to Saturday and Sunday GP and Nurse appointments

• Ample free patient parking.

• Availability of technologies to improve patient experience for example automated check in.
Infrastructure

Generally speaking, Seasalter Branch Surgery is far less equipped to function effectively when compared with other sites. Almost all integral infrastructure, for example pipework and electrics, is original and will require significant work to be brought up to the standard of the main sites.

Specifically where IT is concerned, the Seasalter site is poorly equipped and does not benefit from the same level of interconnectivity that the main sites enjoy. Instead of the dedicated physical connections (LES 1000 links) that support our main sites, Seasalter has been provided with an inferior Virtual Private Network (VPN) connection. This drastically degrades the speed and reliability of data transfer to and from the main sites. The result, in its most extreme form, is that certain core clinical systems are unavailable to staff when working at Seasalter. Examples of this notably include Docman and LabelTrace. Administration and clinical staff are therefore hampered in what should be simple routine tasks. The quality and safety of the service we are able to provide patients is also reduced as clinicians are frequently unable to access the patient information they need.

In order to provide sufficient connectivity, significant financial investment will be required. Funding will be very difficult to obtain and even if funding were to become available, it would be better invested in the main sites due to the vast number of staff and patients they support in comparison.
Financial

Whitstable Medical Practice passionately believes that the NHS belongs to us all and as such there should be careful financial consideration where all projects and services are concerned.

Seasalter Surgery currently attracts significant monthly costs to the practice and NHS.

Total monthly running costs amount to in excess of £6000. This does not take into account staff costs.

Due to lone working regulations, we have to unnecessarily employ additional personnel at the site who would be better utilised in supporting the busier main sites. It is also increasingly difficult to cover staff leave and sickness.

We feel strongly that public money could be put to better use and indeed could be used to better resource the main sites.

There will be no redundancies as a consequence of our proposal to close Seasalter Branch Surgery. All staff will be utilised more fully within the main sites where there is greater need and demand.
Patient Consultation

We have been in detailed discussion for some time with our Patient Participation Group who accept the evidence and principles that necessitate the closure of Seasalter Branch Surgery.

Some preliminary patient research has been completed. A survey was handed to patients visiting Seasalter Surgery which demonstrated that the majority of patients would be happy to instead attend an alternative site.

Whitstable Medical Practice intends to do all it can to ensure that affected patients are communicated to and kept fully informed throughout the process. It is also important to us that all patients are given the opportunity to provide their comments and feedback.

Since 1st April 2018, the date of the merger, a total of 2264 patients have been seen or treated at Seasalter Branch Surgery. This figure represents just 5.6% of the total Whitstable Medical Practice patient population.

Of this figure, 1061 are not patients previously associated with Saddelton Road and Seasalter Surgery. This infers that 47% these patients have been persuaded to attend Seasalter Surgery instead of their usual main site, in order to try to fill some of the underutilised appointments. These patients are already used to visiting one of the main sites and have done so historically without complaint. If these patients are removed, the number of patients using Seasalter Branch Surgery through choice (as opposed to persuasion) reduces to 1203, which is 23 per week and representative of 3% of our patient population.
Options Appraisal

Option 1

Seasalter Surgery to Remain Open

<table>
<thead>
<tr>
<th>Detail</th>
<th>Constraints</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients</td>
<td>Poor utilisation = wasted appointments. Increasing demand on healthcare services and widening scope of healthcare provision.</td>
<td>Patients in the immediate area have the convenience of being able to walk to Seasalter Surgery.</td>
</tr>
<tr>
<td>Premises</td>
<td>Seasalter premises are dilapidated and require significant refurbishment. Without structural changes, access issues cannot be addressed.</td>
<td>Co-located pharmacy, which could continue to operate after removal of GP services.</td>
</tr>
<tr>
<td>Efficiency</td>
<td>Clinical time is wasted due to the clinician's travel time and poor utilisation of appointments. Lone working concerns. Reduced efficiency and effectiveness</td>
<td>-</td>
</tr>
<tr>
<td>Affordability</td>
<td>Significant cost of a small, inefficient site with very limited clinical space. Poor use of scarce NHS resources which would be better invested in main sites.</td>
<td>-</td>
</tr>
<tr>
<td>Infrastructure</td>
<td>Computer connectivity issues will have to be addressed as a priority and at significant expense.</td>
<td>-</td>
</tr>
</tbody>
</table>
## Option 2

### Closure of Seasalter Branch Surgery & Centralisation of Resources at Main Sites

<table>
<thead>
<tr>
<th>Detail</th>
<th>Constraints</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients</td>
<td>Patients in the immediate Seasalter area who are not eligible for a visit will have to travel to a main site to see a GP or Nurse</td>
<td>Patients will have access to a wider choice of clinicians and greater range of services under one roof. Better opening hours. Main sites not far away.</td>
</tr>
<tr>
<td>Premises</td>
<td>Negotiation will take place with the co-located pharmacy who will be offered the option of purchasing / occupying the remainder of the building. We anticipate that the Seasalter Pharmacy will remain in operation.</td>
<td>All main surgeries are purpose built medical facilities with additional space, parking and enhanced disabled access. Chestfield Medical Centre and Estuary View Medical Centre have outline planning permission for extension if and when required in the future</td>
</tr>
<tr>
<td>Efficiency</td>
<td>Seasalter Branch Surgery is both clinically and financially inefficient.</td>
<td>Closure will mean that clinicians will no longer need to waste time travelling and working between two sites and will be able to provide more of a ‘one stop’ service to patients</td>
</tr>
<tr>
<td>Affordability</td>
<td></td>
<td>Significantly reduced costs to the practice and NHS. Better investment of existing resources at busier sites</td>
</tr>
<tr>
<td>Infrastructure</td>
<td></td>
<td>Main sites have fully interconnected IT links supporting enhanced co-ordination, collaboration and better patient care / safety.</td>
</tr>
</tbody>
</table>
Conclusion

This document has sought to outline all relevant rationale in a clear and objective fashion. The current Seasalter branch surgery is not fit for purpose and not of an acceptable standard when compared with the facilities and services provided at the main sites. It carries a number of inherent issues which may never be able to be resolved, even with significant investment and expense.

Fundamentally it was a designed and built as a residential property and as such is not suitable as a medical facility when compared with the main sites which are purpose built.

Clinically the doctors and nurses working here have large numbers of unfilled appointments. This is wasteful. If they are located to our 3 other sites more appointments will be taken up, to the benefit of all patients.

We do not feel that the minority of patients for whom Seasalter Surgery is a short walk away will be disadvantaged by the relocation of primary care services to our main sites; in fact we feel strongly that this will enhance patient care as a comprehensive range of healthcare services is available at our 3 main sites, unlike the partial offering at the Seasalter branch.

We passionately believe that the closure of Seasalter Surgery is in the best interest of all stakeholders which most importantly includes all patients of Whitstable Medical Practice.

Thank you for taking the time to read this document.
Feedback

All patients are invited to provide feedback on our proposals. This can be done in a variety of ways:

**Email**

Patients can contact the practice by email at info.wmp@nhs.net

**Writing**

Patients can contact us by writing to:

Patient Safety & Quality Manager
Whitstable Medical Practice
Estuary View Medical Centre
Boorman Way
Whitstable
CT5 3SE

**In Person**

We will be holding a patient engagement event on Wednesday 19 June 2019 between 2 pm and 6.30 pm at the Whitstable Health Centre. You may call in at any time during these hours to meet members of the practice team and Clinical Commissioning Group in person, who will be able to answer any questions you might have.