

**Manchester City Council  
Report for Resolution**

**Report to:** Health Scrutiny Committee – 17 December 2015

**Report:** Health and Wellbeing Update – Part 2

**Report of:** Nick Gomm – Head of Corporate Services – North, Central and South  
Manchester Clinical Commissioning Groups

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**Summary**

This report provides Members of the Committee with an overview of developments in the local NHS.

**Recommendations**

The Health Scrutiny Committee is asked to note the contents of this report.

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**Wards Affected:** All

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**Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

## 1. Introduction

1.1 This is a health update paper produced by North, Central and South Manchester Clinical Commissioning Groups (CCGs) for the Health and Wellbeing Overview and Scrutiny Committee. It provides a brief summary of issues or news items that may be of interest to the Committee.

1.2 If Committee members of the Committee have any specific questions about the contents of this paper, please email them to [n.gomm@nhs.net](mailto:n.gomm@nhs.net).

## 2. Manchester Access

2.1 At the October 2015 meeting, the Committee heard about the Manchester Access project which was funded to deliver extended GP opening hours across the city. At the meeting, the Committee asked for an update at a future meeting. The following has been written by Manchester Primary Care partnership the organisation set up between the three GP federations in the city.

2.2 The Manchester Primary Care Partnership Ltd (MPCP) was established in February 2015, when the city's three GP federations joined up to form a unique tri-federation. Together, we are in a privileged position, having achieved the backing of all 91 independent local GP practices across our three catchment areas of North, Central and South Manchester. The tri-federation comprises:

- Northern Health GPPO Ltd (North Manchester CCG area)
- Primary Care Manchester Ltd (Central Manchester CCG area)
- South Manchester GP Federation Ltd (South Manchester CCG area).

We are a GP shareholder organisation with a board of directors made up of local practicing GPs and experienced practice managers, and we represent a considerable patient population of almost 600,000. As a Manchester-wide federation, we have a significant opportunity to support our primary care colleagues and influence the shape, design, and delivery of future healthcare provision for our local communities. In March 2015, we secured £5.4m from the Prime Minister's GP Access Fund (formerly known as the Prime Minister's Challenge Fund) as a second wave pilot to deliver 'Manchester Access', a new city-wide scheme that aims to improve access to primary care services. It is the biggest seven day GP access pilot in the country in terms of patient population.

We are working closely with commissioners at the North, South and Central Manchester Clinical Commissioning Groups, providers and other key partners, to ensure the implementation of Manchester Access fits with local plans and policies. The 12-month pilot will be evaluated independently against national metrics looking at patient contact, patient experience and satisfaction, staff experience and satisfaction, and wider system change.

Manchester Access works by offering pre-bookable appointments with doctors and nurses at evenings and weekends, so patients can fit their healthcare needs around family life and work commitments. The service operates from 15 GP 'hubs' – 12 hubs are based in the community and three hubs are co-located or adjacent to A&E departments at local hospital trusts.

Community GP hubs open from 6pm-8pm during the week and 10am-6pm at weekends. The hubs are staffed by GPs, practice nurses and healthcare assistants. A&E GP hubs open from 8am-8pm, seven days a week, and are staffed by a GP. These hubs enable hospital emergency departments to book GP appointments for patients attending A&E with minor issues that can be dealt with in primary care, either with the onsite A&E GP hub or directly with the patient's own GP practice. GPs and practice nurses working in the hubs have access to patient records and notes, subject to patient consent. There are five hubs in each of the north, central and south CCG areas, and the locations align to the 12 Living Longer Living Better localities set out in the Manchester integrated care strategy. The hub locations are:

*North Manchester*

- Cheetham Hill Medical Centre, Cheetham Hill
- Conran Medical Centre, Harpurhey
- Hazeldene Medical Centre, Moston
- New Islington Medical Centre, Ancoats
- North Manchester General Hospital, Crumpsall (*A&E GP hub*)

*Central Manchester*

- Chorlton Family Practice, Chorlton
- Dickenson Road Medical Centre, Longsight
- The Arch Medical Practice, Hulme
- West Point Medical Centre, Levenshulme
- Manchester Royal Infirmary, Manchester city centre (*A&E GP hub*)

*South Manchester*

- Barlow Medical Centre, Didsbury
- Ladybarn Group Practice, Withington
- Northenden Group Practice, Northenden
- Peel Hall Medical Practice, Wythenshawe
- University Hospital of South Manchester, Wythenshawe (*A&E GP hub*)

Patients registered with a GP practice in these areas can pre-book evening and weekend appointments at any of their five local hubs. In total, around 235,000 additional appointments will be provided each year across Manchester; this includes 131,000 GP appointments, 52,000 nurse appointments, and 52,000 appointments with health care assistants. Manchester Access is also building links with other local services, including Manchester Carers Forum and Macmillan Cancer Support, to ensure that vulnerable groups in society have better access to the care they need.

We have been working together with GP practices and patients to develop a public awareness campaign to tell patients about the new seven day primary care service that is now available in Manchester. The campaign is expected to launch in the New Year and will involve local advertising across the city. We are using utilisation data to inform when we will run this campaign to ensure that we can manage demand effectively. An example of the publicity is below:



We have also designed a communications toolkit for GP practice staff, health professionals and key partner organisations, which includes resources that can be shared with your own internal and external audiences.

### 3. Re-procurement of 'Alternative Provider Medical Services' practices

3.1 NHS England (NHSE) has been undertaking a review of Alternative Provider Medical Services (APMS) contracts. As joint commissioners of primary medical care services, the Central, North and South Manchester CCGs have agreed a citywide approach to supporting this review across Manchester.

3.2 There are six APMS GP contracts within Manchester with two in Central Manchester and 4 in North Manchester CCG, all of which are reaching the end of their current contract term. These include:

#### Central

- Hawthorn Medical Centre
- New Bank Health Centre

#### North

- Victoria Mill
- Simpson Medical
- Charlestown Health Centre
- City Health Centre (Boots site)

In addition to a registered list of patients, two of these contracts (Hawthorn MC and City HC) have a walk-in facility as part of their contracts.

3.3 Following the completion of a Health Needs Assessment for each of these contracts, a decision has been made to re-procure each of the registered GP practice

lists. We are currently starting the procurement process, which will take place in a number of phases:

**Phase 1:**

Undertake a patient engagement exercise with Hawthorn MC and City HC, specific to the unregistered patients using the walk-in facilities at both sites. Patients attending the walk in centre (from mid Dec 15 to mid Feb 16) will be asked to complete a questionnaire to help commissioners gain an understanding of how both of these facilities are used. The information will be used to inform our commissioning intentions and feed into the Urgent Care First Response work which is underway.

**Phase 2:**

In January 2016, registered patients at Charlestown HC and Simpson Medical receive a letter to inform them of the procurement process, and to give them an opportunity to engage with the process and feed their views into the procurement process.

**Phase 3:**

In February / March 2016, registered patients at Victoria Mill and New Bank HC will be receiving similar letter, informing them of the procurement process and giving them the opportunity engage with the process and feed in their views.

**Phase 4:**

In April/May 2016, following the unregistered patients engagement exercise, discussions with key stakeholders (including this Committee), and further public engagement as necessary, a decision will be made with regards to the future delivery model for walk in capacity at both Hawthorn MC and City HC. In addition, registered patients at these two practices will receive the letter informing them of the procurement process and giving them the opportunity engage with the process and feed in their views.

3.4 To enable a robust, phased procurement exercise to take place, contract extensions have been agreed where necessary. The agreed timeline for the procurement process would see the new contracts awarded for registered patients from April 2017 across all of the practices.

#### **4. A&E expansion at Wythenshawe Hospital**

4.1 University Hospital of South Manchester NHS Foundation Trust is expanding its A&E department to improve patient care. The aim is to bring about substantial improvements in patient pathways, create a better patient experience and allow the staff and emergency teams to manage workloads more efficiently. Building (enabling) work on this two year programme is set to begin in early 2016 and the planned redevelopment includes additional reconfigured and upgraded major and minor injury facilities and two additional resuscitation bays, bringing the total to eight.

4.2 We are aware there has been a delay in this project which we are working hard to address. Development schemes of this kind are very complex to deliver in a busy working hospital environment and there has been a huge amount of planning work

undertaken to ensure the A&E department can continue to provide safe, high quality and effective patient care whilst this building work is taking place.

4.3 The Trust has established formal monthly project board meetings to oversee the scheme with a project manager and cost advisor in place. We have appointed highly experienced teams of architects and health planners – all with significant track records in major hospital developments. Clinical user groups are reviewing the refreshed design of the scheme and initial discussions with Manchester City Council planners regarding a revised planning application have commenced.

UHSM are happy to provide a more detailed report for the Committee if so required.