

TRAFFIC AND ROAD SAFETY ADVISORY PANEL MEETING – 19 July 2016

REFERENCE FROM THE HEALTH AND SOCIAL CARE SCRUTINY SUB-COMMITTEE MEETING OF 1 MARCH 2016

Minute Item 69: GP Access Walk in Centres

The Sub-Committee received a report of the Chief Operating Officer, NHS Harrow CCG which set out the rationale and process being undertaken by Harrow CCG for the procurement and commissioning of GP Access Walk in Centres.

Following a brief overview of the report, the Integrated Unscheduled Urgent Care Lead at Harrow CCG, the Chair of Harrow CCG and the Chief Operating Officer at Harrow CCG responded to Members questions as follows:

- Why had the CCG not carried out a wider consultation regarding the procurement and commissioning of GP Access Walk-in Centres and why had Councillors not been notified of this process?

A large engagement programme had been undertaken in East Harrow 18 months ago, a public engagement event had been held in December 2015 and there were plans to carry out a consultation in mid-April regarding the Harrow East Clinic. An event focussing on commissioning intentions, where discussion regarding equity of access and provision in East Harrow, had been well attended. Feedback from these events would be taken on board. Patient engagement was central to everything the CCG did.

- What were the criteria for awarding the contract? Would the services at the Walk-in centres remain 7 days a week, 8.00 am to 8.00 pm?

The specification for both services would remain the same as before, with an intent to develop a whole systems integrated emergency programme for which the CCG would be required to re-procure all services.

The CCG was bound by Central Government, EU and NHS procurement legislation and guidelines. However, it would involve residents to help evaluate the bids against key criteria, the main thrust of which would be the quality of services. Interested providers had been invited to meet with the CCG.

- Had a location for the proposed new Walk-in Centre been identified yet?

There were two potential sites – the Belmont Local Health Centre and the Honeypot Lane Centre. The Service Specification would give potential providers the opportunity to comment on the suitability of any potential sites.

A Member suggested that the Edgware Walk-in Centre should also be considered as a possible alternative site.

A Member voiced concern regarding the lack of adequate public transport access to the Alexandra Avenue clinic, and that any new centre should be easily accessible by public transport.

The Chair of Harrow CCG requested that the Council lobby Transport for London and the Mayor of London regarding the poor public transport provision to the Alexandra Avenue Clinic. This coupled with the lack of parking at the clinic and its surrounding area meant that it continued to be under used. He added that some patients were needlessly attending A&E at Northwick Park Hospital (because it was more easily accessible) when it would be more appropriate for them to attend the clinic at Alexandra Road.

A Member suggested that the CCG consult the Chairs of the Harrow Public Transport Users' Association and the London Borough of Harrow Bus & Highways Liaison Meeting.

It was agreed that a Reference be sent to the Traffic and Road Safety Advisory Panel (TARSAP) regarding the lack of adequate public transport provision to the Alexandra Avenue Clinic and the lack of adequate free parking in the vicinity of the Clinic, with a request to TARSAP to lobby TfL regarding this and for TARSAP to investigate the possibility of the Council providing free parking in the vicinity of the Clinic for its users.

The Chair asked about the recent complaints reported in the media regarding problems with the NHS 111 telephone service.

The Integrated Unscheduled Urgent Care Lead at Harrow CCG advised that there were plans to re-design the NHS 111 service in North West London and work was being undertaken jointly with Brent and Hillingdon CCGs to review the service with the intention of significantly revising the service specification. The crucial change would be for telephone assessments to be carried out by clinicians. The new Service would be launched in April 2017 and would be designed to be more local and more user-friendly.

RESOLVED: That

- (1) a Reference be sent to the Traffic and Road Safety Advisory Panel (TARSAP) regarding the lack of adequate public transport provision to the Alexandra Avenue Clinic and the lack of adequate free parking in the vicinity of the Clinic, with a request to TARSAP to lobby TfL regarding this and for TARSAP to investigate the possibility of the Council providing free parking in the vicinity of the Clinic for its users;
- (2) the report be noted.