5. Summary

This report gives details of a visit to Rotherham Community Health Centre, on March 11 2010, by members of the Adult Services and Health Scrutiny Panel (ASH).

6. Recommendations

That the ASH panel notes this report.
7. Proposals and Details

On March 11 2010, Chair Cllr Jack, co-optee Russell Wells (National Autistic Society) and Scrutiny Officer Ben Knight, were shown around Rotherham Community Health Centre by NHS Commissioning and Change Manager, Duncan Smale and Ben Chico (PCT).

The £12m Rotherham Community Health Centre (RCHC), Greasbrough Road, was developed by NHS Rotherham in order to provide patients with rapid access to a wide range of health services and is part of the delivery of the Better Health, Better Lives strategy.

It also means that some patients can receive care closer to home and avoid the need to go to hospital for some types of treatment. The services are open to all and can be accessed either by referral from a GP or other healthcare practitioner, or by self-referral.

Construction began on the Community Health Centre (hereafter referred to as ‘the centre’) in September 2007 and it opened to the public in January 2009.

7.1 GP Surgery and Walk-In Service

Located within the centre is Chantry Bridge Medical Practice. The practice, operated by Care UK, is open on weekdays from 9am-5pm, and offers a range of comprehensive services to registered patients.

Care UK now operates 10 GP surgeries and Walk-in centres across the UK as well as a range of other services, from hospices to assistance for young smokers. Care UK also manage the Diagnostic facility at the centre and provide out-of-hours care (formerly provided by primary care), all other services are provided by Rotherham Community Health Services.

The ASH panel members saw that the facility was extremely well used. The GP surgery already has more than 200 patients registered, many of whom are newly arrived in Rotherham.

A major feature of the new centre is a Walk-in service for treating minor illnesses and injuries. Anyone can walk in without an appointment to see a GP or other healthcare practitioner, whether they are registered at the practice or not, between 8am and 9pm, seven days a week and bank holidays.

The Walk-in facilities are aimed at helping people with busy lifestyles who need access to flexible and convenient health services. It is designed not to replace local GP or hospital services, but complement them by providing a range of treatments to members of the public when their GP practice is closed.
The Walk-in centre is currently used by between 600 and 700 people a week and has a capacity to see up to 1,000. On Saturdays and Sundays the centre regularly receives 150 to 200 patients a day. The centre has a target that all patients will be assessed (triaged) in ten minutes, and will be seen by a doctor within two hours. The number of patients and time-pressures, however, increase when Sheffield Walk-In services shut on Thursday Afternoons.

Staff can work flexibly across the GP and Walk-in services as need demands, and there has been even greater integration of the services from 28th March 2010.

Treatment is available for problems including: eye and nose problems, cuts, wounds, bites, skin complaints and minor burns, as well as providing Emergency contraception and assistance for Women’s health problems. A pharmacy (MedicX) is open on site (open until 10pm every day of the year). There is also a call centre for out-of-hours care in the building.

7.2 Diagnostic Centre

The Diagnostic Centre, also operated by Care UK, is part of a government initiative to provide additional, purpose built environments to efficiently and effectively meet the challenge of increasing access to healthcare in the UK.

The Diagnostic Centre is open Monday to Saturday from 8am to 8pm, including all bank holidays and offers a range of diagnostic imaging procedures, X-ray, Ultrasound, Echocardiograms and MRI.

These Diagnostic procedures were previously performed at hospitals. By bringing this facility into the centre GPs can check their suspicions as to the cause of patients’ symptoms at the beginning of the process, providing an earlier diagnosis, and putting them in the correct line for appropriate treatment.

The centre does not currently have a plaster room so when minor breaks and fractures are diagnosed the patient has to go to hospital to have the injury put in a cast. The panel members recommended that a plaster room is commissioned for the centre, and this is to be considered.

7.3 Other Services

The centre also provides most of the primary care services that were based at Doncaster Gate Hospital:

- Ear Care Centre (including audiology workshops to test and fit hearing aids),
- Speech and Language therapy (including a sound viewing gallery with a two-way mirror for discrete observation of young children with speech problems),
• Community Physiotherapy,
• Sexual Health,
• Family Planning,
• Phlebotomy (Bloods),
• Podiatory,
• Specialist surgery suite (for use by GPs with Special Interests (GPSI) to perform treatments such as vasectomies).

The Patient Advice and Liaison Services (PALS) Health Advice Centre (previously in the RAIN building) and Community Dental (previously the Ferham clinic at Doncaster Gate) have also moved to the new site. The dental practice has expanded from two to five treatment rooms and is for people who find it difficult to access conventional services, such as children (and some adults) with disabilities, high anxiety, or learning difficulties.

7.4 The Building

The health centre is close to Rotherham Interchange and directly behind Bailey House. Ease of access for members of the public was of primary concern when commissioning the building and there is free car parking for patients on site. Centre staff do not have access to parking spaces to prevent the reoccurrence of problems experienced at Doncaster Gate, where, by 8:30am, staff had sometimes taken all the available parking spaces.

The two storeys of the centre dedicated to treatment are split into four quarters (each for a different specialism) around an open and airy central area designed to maximize natural light into the building. Panel members found that the layout and sign posting was clear and care had been taken to make the centre seem bright and comfortable, with the use of friendly colour schemes and well-designed equipment.

The members heard that practitioners were delighted to be working in the new building and - when compared to the design of Doncaster Gate - the layout had created better teamwork between the disciplines. Rotherham NHS is also keen to create better communication with the local community by conducting guided tours to groups, such as a recent student party from Wickersley Comprehensive.

8. Finance

There are no cost implications in this report.
9. Risks and Uncertainties

There is potential that the Walk-in service could be misused, by patients or by local practices sending patients there, and the centre could end up doing the work of other services. The GP practices, to which Walk-in patients are registered, however, are currently recorded for internal monitoring.

There are building control concerns regarding the erosion of the river bank directly behind the centre. Commissioning and Change Manager, Duncan Smales, reassured the members that the building was safe, however, he was concerned that the partial banking collapse came so close to the centre. This could possibly result in serious access problems. Discussions were underway between parties, including the leaseholder, developer, builder and British Waterways, to deal with the situation.

The use of the health centre will need to be monitored to ensure that the various rooms are being fully utilised and used for the purposes for which they were initially commissioned.

10. Policy and Performance Agenda Implications

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11. Background Papers and Consultation

Not applicable

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