

D82017 Trinity and Bowthorpe Medical Practice
0.6 Miles

We have no objections as it does not impact on this practice.

kind regards

Sonja

Practice Manager

D82060 Bacon Road Medical Centre
0.6 Mile

With regards to the proposed request from Castle Partnership, to decrease their current boundary, and remove Roundhouse development from the catchment area; the management team at Bacon Road Surgery fully understand the rationale for this submission, and can confirm that we are supportive of the request, and would concur that our concerns and experiences mirror that of our colleagues at Castle Partnership, and also Newmarket Road Surgery. Similarly to our colleagues at Castle Partnership, we are experiencing an ever increasing demand on our available capacity, this is due to an increasing elderly population, patients with very complex medical conditions and an expansion of housing developments in the local area, with no additional resource to support this workload.

On behalf of both Dr Andrew Douglass and Dr Sarah Rushton, I can confirm that we are supportive of this request to adjust boundary line.

D82088 UEA Medical Centre
1.0 Miles

As a university practice we only register patients who have a connection with the university (and live within our boundary). As such, this request by Castle Partnership will not affect us as long as we can continue with our own registration policy.

As a resident of the Roundhouse estate in Cringleford, there is increasingly less choice of a GP practice to register with and the ability to get an appointment at the only surgery within walking distance (Cringleford Surgery) is virtually impossible. I would imagine that many practices are wanting to change their boundary so they do not have the staff to manage another care home that is located on the Roundhouse Estate. I understand this – everyone's workload is greater than the staffing and funding available.

Regards
Christina

D82064 Humbleyard Practice

1.8 Miles

I am responding on behalf of the partners of The Humbleyard Practice regarding the request for a boundary change from Mile End Road/ Castle Partnership. We are very disappointed that one of our fellow GP practices has followed through in changing their boundaries to avoid dealing with a nursing and care home in their practice area.

Cavell Court is an 80 bedded residential and nursing home which opened in 2015. They have had a number of problems since they opened and have had problems keeping a manager in post which has had an impact on their staffing and on their demands on us as a GP practice.

As the closest practice to the care home we have had more of the residents registered with us since the outset and so the impact has always been greater on us than on the other three practices (Mile End Road, Newmarket Road and Bacon Road).

The care home has recently seconded an experienced manager from another of their homes to manage Cavell Court and get them sorted out. She is already having a positive impact on their systems and the impact of the home on us as a GP practice, and this must also be having the same positive impact on the other three practices. They do still have a long way to go but things are on the right track.

A 80 bed care home is a lot for any one practice to manage and from when it opened there was a 'gentleman's' agreement between the four practices that registrations would be split evenly between the practices, this never quite happened because of our proximity to the site we have always had the bigger share but we have accepted this. However, what we can't cope with is having the full 80 residents as our responsibility.

We have had a number of meetings with the other practices, and the CCG, to try to resolve the issues and we even offered to take 50% of the residents at the home which would allow the other practices to then split the remaining patients between them. The home has never been at capacity but if it was this would mean 13-14 patients each for the three Norwich practices. We feel this is reasonable and a compromise which takes into account the additional travelling time the other practices have for a home visit, and which means that changes of boundaries are unnecessary.

During these meetings the three Norwich Practices threatened to move their boundaries if they did not get additional funding from the CCG to manage the additional demand of the care home. We are very disappointed that rather than agreeing for the partners from the four practices to meet to discuss a workable solution they are choosing to take the drastic, un-proportional, action of moving their boundaries.

I agree that a care home patient puts a much higher demand on the resources of a practice than another patient in the community, however, it is unethical to then try to wash your hands of the problem by moving your boundaries and unfairly burdening your neighbouring practices instead.

Newmarket Road stated as justification for their moving their boundaries that the area was well serviced by other practices. Now as this application is the third application to cut out the Roundhouse estate this area would only be serviced by one practice, ourselves. We do not feel that this is adequate cover.

At least Mile End Road have been honest and said that they are moving their boundaries because of Cavell Court and not tried to justify the move in terms of new developments which are pending.

However they have stated that 'this care home takes a considerable amount of time and resources and feel it will be untenable and unmanageable for The Castle Partnership if it is not serviced by other practices'. This statement proves our viewpoint. Care homes of this size are more manageable if the patient load is shared among practices, rather than having one practice pick up the full population.

If Mile End are only saying that they need to move their boundary to cut out Cavell Court because of the applications for boundary changes from Newmarket Road and Bacon Road then this is a reason to refuse the proposals of the other two surgeries – not to accept this proposal.

If all three of these applications go through then instead of four practices supporting the care home this will be reduced to one – this will then certainly be untenable and unmanageable.

Even though they don't intend to shed the patients immediately the main immediate impact will be from Cavell Court whose residents, by the nature of the age of the patients, do turn over quickly. The impact will come just as we are feeling the pressure of the winter again.

We would question the ethics of a GP practice moving their boundary in an attempt to shift their duty of care to the elderly population purely because residents in a care home are more demanding on resources than young healthy patients. This is discrimination against the elderly patients which should not be allowed. They attempted to do this informally by just refusing to register patients from Cavell Court and are now trying to do the same by making a formal request to cut Cavell Court out of their patient area. This should not be allowed to happen.

Practices picking and choosing the parts of their practice area they wish to have and the parts they don't should not be allowed. Castle Partnership are choosing to keep the affluent areas in Cringleford and along Newmarket Road but cut out the Care home and less affluent development of Roundhouse.

D82073 Lionwood Medical Practice
2.3 Miles

Dear Simon

Lionwood Medical Practice has no objections

Yours sincerely

Lyn

Lyn Bostan

Business Manager/Partner

D82048 Thorpewood Medical Group
3.4 Miles

Given that the Primary Care Committee of NHSE/Norwich CCG has already rejected one request for boundary changes to a practice catchment area (PCC extraordinary meeting of November 2017), it is inappropriate that the matter be brought up again in my view.

The PCC decision was that it would not approve any boundary changes due to increased population and new housing developments. even if this meant practice list closures, as the suggested way forward was for Norwich CCG to form a working party to look at the whole population demands and wider 'growth' plans.

As such I personally could not be in agreement to this request, as I fundamentally believe in 'one rule for all'. This view is held, even though there are plans for 10,000 new homes in our own catchment area over the next 8 years!

Further, hopefully constructive feedback, is that the NHS England letter is inconsistent in a number of regards, which probably reflects the pressure we are all under; may I take this opportunity to thank you all for your continued support of primary care, and hope that the national recommendations in GP Forward View can be fully embraced in the next 12-18 months.

I hope those comments help inform the discussion.

Ian Wilson
Practice Manager

D82018 Hellesdon Medical Practice
3.6 Miles

There have been a number of boundary change requests from Norwich practices in recent months. I include my practice in that although the CCG turned down our request. Whilst this application does not on the face of it impinge on our area I am concerned that Norwich practices are trying to control their list sizes by boundary changes and by "moving on" patients who now live outside their area. Our own list size increased by several hundred last year as a result of this practice which is entirely understandable. My comments therefore are about what provision is being considered and planned for to cope with the expected increasing population of Norwich.

D82078 Heathgate Medical Practice
4.5 Miles

We have no comments to make about this application.

We have no patients registered in the area of change and this sits outside our practice area.

Regards
Garry Whiting
Managing Partner

CCG Feedback

Below the response from NHS SN CCG.

Please find below NHS SN CCGs response to the proposed Castle Partnership boundary change.

NHS South Norfolk CCG is not supportive of the proposed Castle Partnership boundary change, as;

- 1) The proposed boundary change, as set out in annex 2, is seeking to annex a specific area / housing development and there is not a clear and equitable reduction in the overall practice boundary. The proposed changes could be perceived as the annexation of a specific patient population, based on post code, from the Castle Partnership area and associated patient list.
- 2) The application states that Castle Partnership are making the application on the grounds of not having additional infrastructure to support additional patients seeking registrations. Unfortunately, all practices within the area are facing the same pressures and though submitting this application Castle Partnership are unintentionally direction the pressures onto a single practice, Cringleford, who also experiencing similar clinical pressures and recruitment issues. A preferable solution would be for Castle Partnership, Newmarket Road, Bacon Road and Cringleford Surgeries to develop a mutually agreeable and sustainable solution.
- 3) Cavell Court Care Home, a high demand care home, is within the proposed annexed area, with any new patients being unable to registered with Castle Partnership contradicting the NHS Choices Framework and the governments commitment to giving patients greater choice and control over how they receive their health care, and to empowering patients to shape and manage their own health and care.
- 4) The proposed annexation of the Roundhouse development in Cringleford also impacts on any new patients being able to registered with Castle Partnership again, contradicting the NHS Choices Framework and the governments commitment to giving patients greater choice and control over how they receive their health care, and to empowering patients to shape and manage their own health and care.
- 5) In reality, the biggest impact will be on Cringleford Surgery, part of the Humbleyard Practice, which is already operating at clinical and physical capacity.

Regards,

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