

Consultation and Engagement Plan

Relocation of Graham Road Surgery services to proposed new primary care facility in Weston-super-Mare

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Note: This plan is a live document, which will be refreshed throughout the life of the project

| Version | Date | Changes | Updated by |
|---------|------------|---------------------------------|---|
| 2.5 | 03/02/2023 | Update to introduction | Tim James |
| 2.4 | 18.03.21 | Reviewer updates | Clare McInerney, Mary Adams, Cerlei Ioris |
| 2.3 | 11.03.21 | PCCC feedback | Clare McInerney |
| 2.2 | 16.02.21 | Reviewer updates (CB/MS/AWB/MA) | Clare McInerney |
| 2.1 | 12.02.21 | PCOG, LMC feedback, | Clare McInerney |
| 2.0 | 08.02.21 | Rewrite of plan – February '21 | Clare McInerney, Mary Adams |

1. Introduction

Feb 2023 Update: This Consultation and Engagement Plan was originally drafted in 2021 and sets out the plan that has subsequently be followed by the Graham Road GP practice to engage with their patients around the proposed relocation to the new Rugby Club development. That work was completes in 2021 in advance of the full planning application for the new site being submitted for approval. Approval of that planning application was delayed, which meant the completion and submission of the Full Business Case has also been delayed.

An options appraisal of sites for a central Weston primary care facility has been underway to define viable sites to take forward to a detailed architectural design and development costing stage.

Work has been undertaken with North Somerset Council (NSC) to identify and review suitable council owned sites, to ensure that opportunities to work in partnership have been explored and considered within the site option appraisal. Clinical design work for a schedule of accommodation is being progressed with Pier Health Group Limited, with the intention that the new facility will house the service provision for Graham Road patients.

The Central Weston Estates Steering Group oversees the progress of the project, reporting to the Healthy Weston Steering Group. A Clinical Options sub-group has been tasked to define additional primary and community health services that could potentially be co-located within the primary care facility to inform a final agreed schedule of accommodation, subject to full business case and financial approval.

A list of 16 potential site options were originally identified including land and buildings in public sector ownership and other properties available on the commercial open market. This list was evaluated against an agreed set of criteria and led to a shortlist of four options in October 2019 and in November went down to three options: the NSC owned Sovereign Centre (the rooftop and ground floor), retail units in Dolphin Square and the former T.J. Hughes building. A stakeholder workshop was held in mid-October to appraise the shortlisted options against set criteria. This workshop was made up of key stakeholders including the CCG, Pier Health, Graham Road PPG, Weston GPs and Sirona care & health. Further evaluation took place on these sites and was shared with the CCG's Primary Care Commissioning Committee (PCCC). In February 2020, due to costings the T.J. Hughes option was discounted. Another option became available at the beginning of 2020 in the former M&S building on the high street, however after detailed evaluation it was deemed not viable. In April 2020 a new option was identified at Weston Rugby Club. This option along with retail units in Dolphin Square and the roof top option at the Sovereign Centre were taken forward for more detailed evaluation, including preparation of concept designs and cost plan, and these options were then presented at a stakeholder workshop in mid-June to appraise these options against set criteria. As a result of this evaluation the Weston Rugby Club option came out at the top with the Sovereign Centre roof top option second. These two options are now being worked into an outline business case (OBC) which will be presented to PCCC in July 2020 and will

then be submitted to NHSE/I for feedback. Alongside the OBC, the full business case (FBC) is currently being worked up (from June 2020) and it is expected this will be complete by December 2020. It is now planned the new healthcare facility will open in the summer 2022.

2. Background to project

Access to excellent primary care services in central Weston is a high local priority. Engagement work undertaken as part of the Healthy Weston programme found that primary care services in the town needed improvement. At the end of 2018 the CCG was successful in securing £3.2 million of NHS capital to develop a new primary care facility in central Weston, for relocation of some GP services and to improve access to primary and community healthcare to support the rapidly increasing Weston population. Formal public consultation is not required during the initial options appraisal, however during the development phase there will be patient and public involvement undertaken to help inform the service specification.

Background Primary care service provision in central Weston is a high local priority and the engagement work undertaken as part of the Healthy Weston programme found that primary care services in the town needed to improve. At the end of 2018 the CCG was successful in securing £3.2 million of NHS capital to develop a new primary care facility in central Weston, for relocation of some GP services and to improve access to primary and community healthcare to support the rapidly increasing Weston population.

The Graham Road Surgery estate is not sustainable for long term use and is constrained in ability to be extended or improved to cater to the patient population, which includes the population of the former Clarence Park Surgery (patient population of c.4,000) which closed in September 2019 when the landlords decided to sell the property. The registered list at Graham Road Surgery currently stands at just over 11,700 patients.

In 2018, the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (the CCG) was successful in securing £3.2 million of Wave 4 NHS Strategic Transformation (STP) capital to develop a new primary care facility in central Weston, for relocation of GP services currently provided at Graham Road Surgery by Pier Health Group Ltd (PHGL). In addition this would improve access to primary and community healthcare, supportive of the growth in the central Weston population.

The Central Weston Estates Steering Group was launched in June 2019 with the purpose of identifying a suitable site in Weston town centre and progression towards a Full Business Case (FBC) for a primary care centre of c.1,100m². The new facility would accommodate the relocation of Graham Road Surgery patients with room for list growth

and the co-location of community health and care services to deliver new, joined up health and care services for the population of Weston.

Initially, the timeline for accessing the STP capital was set as no later than 31st March 2022; however this deadline has subsequently been revised by NHS England and NHS Improvement (NHSEI), due to the inevitable disruption caused by Covid-19. Co-produced with patients and a range of local providers and stakeholders, an evaluation and scoring criteria was defined. 17 site options in and around the centre of Weston were considered between June 2019 and June 2020 that could be suitable for the development of a FBC for a preferred site that was achievable, accessible and affordable.

In June 2020, the final evaluation process was completed with clinical and managerial representation from PHGL, patients registered with Graham Road Surgery and representatives from Sirona Health and Care, North Somerset Council (NSC) and the CCG. From a shortlist of three viable sites, the Weston Rugby Club (the Rugby Club) was the highest scoring option overall. Working with the developer, Studio Hive, an Outline Business Case (OBC) was developed with the Rugby Club as the preferred site option and was approved by the CCG's Primary Care Commissioning Committee (PCCC) in July 2020.

The intention to develop a new primary care facility on the Rugby Club site was announced publically in December 2020. The next stages of the project include engagement and public consultation on relocation of the Graham Road Surgery services to a new facility at the Rugby Club, and the completion of a FBC by November 2021, with full planning permission in place for the new building. Subject to approval of the FBC by NHSEI and the Department of Health & Social Care, construction is planned to commence in early 2022 with completion anticipated in spring 2023 (following current programme projections).

3. Purpose

This document sets out the public engagement and consultation stages relating to the relocation of Graham Road Surgery services to the proposed new facility, It details the communications activity to support the development of the Weston Estates Primary Care Estates Project from September 2019 until June 2022.

The Communications and Engagement plan (the Plan) includes a delivery plan, detailing objectives for each stage, required activities, outputs and timeline for delivery. The level of public involvement for each phase and rationale are explained to provide assurance that the activities performed over the time period are in accordance with best practice requirements set by NHSEI, at the same time remaining proportionate to the proposed changes and context surrounding the project.

Timing and for the delivery of each output is set out in forthcoming sections, reflecting the governance timeline in order to secure FBC approval. Responsibility and leadership for each stage is also described, including the resource required to complete activities and produce deliverables for milestone governance meetings to complete the FBC stage. Key stakeholders and statutorily required consultees i.e. North Somerset Health Oversight & Scrutiny Panel (HOSP) are detailed in a stakeholder map in Appendix 1.

The Plan provides a framework to ensure the population affected by the changes are actively involved, informed, engaged, and communicated with. The population includes GRS patients, staff, stakeholders and the wider public who are interested in the progress of the project. A key objective is to listen to patients, staff, stakeholders and public views, suggestions and concerns about the development and the progress of the project.

Underpinning the Plan, An Equality Impact Assessment (EIA) of the proposal for a new primary care facility at the Rugby Club will inform the need to surface any disproportionate disadvantages for cohorts of the population that the changes might precipitate. This will also help to target engagement activities more effectively. A Quality Impact Assessment (QIA) will also be completed to surface any quality concerns regarding the implementation of a new service model. Draft EIA and QIA documents are included in Appendix 5, which will be refreshed throughout the life of the project. As the engagement and consultation progresses, the Plan may need to flex accordingly to meet any emerging needs that may surface during the process.

Outcomes of the communications and engagement activities will be reviewed at key points to understand their effectiveness. Evaluation will include reviews of the numbers of people attending events; the reach achieved into target communities, the items of feedback received and peoples' satisfaction relating to the various processes.

4. Approach to engagement and consultation

The overall aim of this communications plan is to keep patients at Graham Road Surgery and people living in and around Weston-super-Mare informed about the developments of this new GP surgery going into Central Weston.

NHSEI has provided advice on the level of engagement and/or consultation proportionate to the proposed changes. The CCG and GP provider organisation involved (PHGL) should continue to maintain involvement with the practice's Patient Participation Group (PPG) and engagement with patients and the local population on the key steps in the process as set out in the following sections of this document. This should include the continuation of the narrative from the Healthy Weston engagement which identified the need to improve primary care for the Weston population.

NHSEI has advised that there is not a requirement to undertake a formal consultation process for this particular project, with ongoing engagement with patients and stakeholders following the stages set out in sections 5 and 6. However, due to the context and circumstances surrounding the proposed changes detailed in section 1, it is recommended that a full 12 week consultation is undertaken on the relocation of GRS services to a new facility at the Rugby Club, led by the provider, PHGL.

NHSEI Partnership and Engagement leads have reviewed and provided input into the development of this plan.

5. Objectives

The overarching objectives for both pre-consultation engagement and the full consultation on the relocation of GRS services to the new facility are:

- That patients registered at GRS and the wider community understand the proposal and have the opportunity to provide feedback
- Co-production of service provision and design of the new facility.

To meet these objectives we will:

- Plan and deliver a pre-consultation and consultation process focusing on the relocation of the GRS services to the facility at the Rugby Club site, which is inclusive and reaches under-served populations
- Ensure the consultation and engagement process is led by the GP provider, with clinical leadership provided by Dr John Heather (Clinical Director Pier Health PCN and Chair of PHGL) and support from CCG and North Somerset Healthwatch resources to facilitate and develop appropriate consultation materials
- Ensure that representative members of the PHGL PPG, members of staff and community stakeholders are fully involved in the pre-consultation engagement and consultation processes
- Publicise opportunities for pre-consultation engagement and consultation process, to enable people to have a voice in influencing the new development
- Deliver an accessible and inclusive consultation process from June 2021 to September 2021 in line with Covid-19 government restrictions using appropriate methodology
- Reach out to communities identified as potentially being disproportionately disadvantaged by the changes, taking into account the EIA ensuring that their voices can be heard and opportunities to work together can be offered
- Keep staff, patients and key stakeholders informed about progress on the development of the new primary care facility

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- Reassure GRS patients and staff that there will be a smooth and managed transition from the current site to the new one
 - Prepare a feedback report to inform decision making at the FBC stage of the project
 - Inform the wider public of the outcome of the consultation and the next step
 - Work with North Somerset Council to ensure all communications are joined up
 - Publicise the final option being announced and inform patients at Graham Road Surgery and people living in Weston-Super-Mare about the developments on the new primary care facility going into central ward
 - Keep the public, patients and stakeholders informed about the developments of the project
 - Keep patients at Graham Road Surgery up to date on progress
 - Reassure patients at Graham Road Surgery that they will continue to receive GP services at Graham Road up until a new facility is up and running
 - Draw links to the Healthy Weston programme and highlight the positive impact it will have on primary care services in Weston
 - Ensure people understand this new facility supports the needs of the Weston population
 - Respond promptly and effectively to requests for information from patients, members of the public and stakeholders
 - Ensure communications reach as is inclusive as possible to reach groups with protected characteristics who may be disproportionately disadvantaged and takes account of our equality impact assessment.

6. Pre-consultation engagement (April – May 2021)

To involve and engage the local community, co-producing elements of the new facility and service model, a period of pre-consultation engagement is planned. This will entail delivering a series of facilitated workshops inviting patients and stakeholders and members of the local community during April and May 2021.

A newly constituted Graham Road and Horizon PPG has been formed, with a Patient Advisory Reference Group (PARG) comprising of patients registered at GRS who have an interest in the new primary care facility development. This group will have a key role in communicating with the PPG Steering Group and wider patients groups throughout the pre-consultation engagement period, and provide direction for the following consultation. The elected PPG Patient leader will provide continuity through membership of the PARG and the PPG Steering Group.

BNSSG Healthwatch have offered support throughout the pre consultation period, assistance in the design of the workshops, including local feedback received and production of supporting materials.

The focus of a series of pre-consultation workshops shall be on the design, 'look and feel' of the facility and also the new model of care delivered by PHGL. This will include for example, opportunities for the co-location of health and care services, proactive wellbeing orientated service delivery and maximising the opportunities presented by the location's proximity to sport and recreational space.

The intention of holding these engagement workshops prior to the consultation on the relocation to the new facility is to provide an early opportunity to consider accessibility and other impacts upon patient and staff groups, developing appropriate mitigations to reduce impacts. The EIA will assist in informing the approach to engagement, ensuring that there is reach into population groups where there may be negative impacts caused by the re-location, with feedback from these events informing further drafting of the EIA document.

Feedback from the engagement workshops will also support the development of key sections in the FBC, including definition on the new service model to be delivered by PHGL and the co-location and integration of local health and care services in the new facility.

6.1. Approach

- Deliver four co-production workshops to focus on:
 - Access and transport to the new site
 - The health and wellbeing opportunities presented by the new development
 - The look and feel of the estate from a patient/staff/user perspective
 - Exploring potential opportunities to improve the primary care service model in its operation across two sites (at the Rugby Club and Horizon Health Centre)
- The pre-consultation engagement workshops will be led by PHGL, supported by the CCG and North Somerset Healthwatch, working closely with PPG Patient Advisory Reference Group
- The CCG will be closely involved in the planning and organisation of this element of the process to ensure that engagement on key elements such as service look and feel, transport and accessibility and service model are captured for inclusion in the FBC, in addition to supporting the development of materials for the consultation process
- Project Lead, PEM and Healthwatch representative to work closely with the PARG and PHGL to provide advice on communication with patient groups, supporting development of coproduction workshop materials and logging and compiling feedback reports
- Workshop facilitation and administration support will be provided by the WW&V Locality Team
- The Communications and Engagement sub-group of the Central Weston Estates Steering Group will provide overall project control, membership includes PHGL,

Healthwatch, PPG Patient Lead and CCG External Communication team representation

6.2. Activities, deliverables and timeline

| Date: | What: | Output | Owners | Status: |
|----------------------------|--|---|---------------------|----------------|
| 1 st April 2021 | PPG Patient Advisory Reference Group – 1 st meeting | Approval of workshop dates and subject matter | CCG, PARG, PHGL | Completed |
| 16 April 2021 | Co-production workshop – access and transport | Feedback report | CCG, PARG, PHGL | Completed |
| 23 April 2021 | Co-production workshop – design look and feel | Feedback report | CCG, PARG, PHGL | Completed |
| 30 April 2021 | Co-production workshop – opportunities for health, care and wellbeing | Feedback report | CCG, PARG, PHGL | Completed |
| 07 May 2021 | Co-production workshop - improving the primary care service model for operation across 2 sites | Feedback report | CCG, PARG, PHGL | Completed |
| May 2021 | Develop consultation materials – slide deck, FAQs, website copy, survey, feedback form, consultation feedback log, | Consultation pack- to be approved by Steering Group and PCCC | PHGL CCG PARG | Completed |
| May 2021 | Communication to promote the launch of the consultation engagement and how local residents can get involved | Press release Patient letter and survey to launch consultation Stakeholder communications to launch the start of the consultation | PHGL | Completed |

7. Consultation on relocation of Graham Road Surgery services to the proposed new facility (June – Nov 2021)

To achieve a fully approved FBC, securing STP capital funding for the new development, it will be necessary to demonstrate sufficient revenue to fund the new leasehold costs. This will be achieved by the reallocation of existing revenue released by the planned closure of the Graham Road site, in combination with revenue from the previously closed Clarence Park surgery.

Therefore, the completion of a consultation process regarding relocation of the services to the new site is a pre-requisite for completing the FBC process.

It is proposed that PHGL leads on the consultation, in common with similar consultations on practice relocations undertaken by GP providers. An up to 12 week period of consultation will be undertaken with the GRS patient population and wider local public to ensure that there is good reach into the community, with particular regard to the protected characteristic groups identified in the EIA as being impacted by the proposed relocation.

The period of consultation is projected to commence in June 2021, allowing for a 12 week window to reach an aspired percentage of the target population. Analysis and report writing is anticipated from October – November to ensure that a full consultation and ‘you said, we did’ report is available to closed PCCC when the FBC is presented for approval in November (ahead of an open agenda item in January 2022).

In light of these programme timings, the consultation period runs over the month of August. This is not usually considered an optimum time for public consultation; to mitigate it is likely that the consultation events will be held multi-platform with a greater emphasis on virtual meetings, in consideration of the covid-19 epidemic. It is possible that some events may be able to be held in person, for example a panel or group convening together and broadcast over MS Teams. To ensure that there is reach into the community throughout this process, it may be necessary to flex the end date beyond 12 weeks into September to ensure as many people can respond as possible.

7.1. Approach

- Plan and prepare for a public facing consultation process – including developing questions that have arisen from the pre-engagement process
- Set up and maintain a feedback log, to be managed by PHGL

- Work with Studio Hive (developer of the Rugby Club site), ensuring that communications are sighted and approved prior to issue regarding the development
- Healthwatch to provide support to PHGL and the PARG as a reference group and organising and facilitating consultation events where required
- Co-produce a narrative with patient and stakeholder groups for the new development with a focus on healthy living and wellbeing
- Develop materials - to support consultation processes
- Target communications to engage communities with protected characteristics with e.g. older people, BAME, LGBT+, as identified in the EIA
- Keep patients, staff, public and stakeholders informed of the process and dates of forthcoming announcements and events
- The Communications and Engagement sub-group of the Central Weston Estates Steering Group will provide overall project control, membership includes PHGL, North Somerset Healthwatch, PPG Patient Lead and CCG

7.2. Activities, deliverables and timeline

| Date: | What: | Output | Owners | Status: |
|-----------------|--|---|---------------|----------------|
| June 2021 | 12 week public consultation starts | Consultation materials, informed by pre-consultation engagement process | PHGL | Completed |
| June – Sept TBC | Outreach listening events -Equality communities | Feedback reports | PHGL | Completed |
| June – Sept TBC | Older People’s Champions Group | Feedback reports | PHGL | Completed |
| June – Sept TBC | Disabled Access Group | Feedback reports | PHGL | Completed |
| June – Sept TBC | LGBTQ community groups | Feedback reports | PHGL | Completed |
| June – Sept TBC | BAME community groups | Feedback reports | PHGL | Completed |
| June – Sept TBC | GRT communities | Feedback reports | PHGL | Completed |
| June – Sept TBC | Health inclusion communities: e.g. homeless, sex workers, substance misuse | Feedback reports | PHGL | Completed |

| | | | | |
|-----------------|---|--|-------------|-----------|
| Sept - Oct 2021 | Conclusion of consultation period – report writing | Consultation feedback report. You said, We Did appended to report and advertised on practice website | PHGL | Completed |
| November 2021 | FBC completed, including feedback report from the engagement and consultation processes including you said we did summary | Approved FBC by PCCC | PHGL | Completed |
| December 2021 | Publicise the results of the consultation | Press release, publication of report on CCG and PHGL websites | PHGL CCG | Completed |

8. Considerations for delivery of engagement and communication activities during COVID-19

Due to the current COVID-19 situation, careful consideration is required in terms of which engagement and consultation methods are used. This could include a letter/email/signposting text to all patients impacted, advising of the proposal for change and providing an opportunity for feeding back any concerns via an online survey or via a telephone number for people who may not have online access at this time.

It may also be possible to set up a virtual style public meetings and co-production workshops as wished for by people who would like this opportunity. To ensure accessibility of virtual meetings platforms, regard should be taken to the use of Power point presentations and the use of simultaneous ‘chat’ sidebar interactions. These should be read out by the chair during course of the meeting and published in the record of the meeting.

Communications may also include the use of various social media platforms such as Twitter and Facebook and Instagram. There may also need to be a series of listening events and focus groups conducted as outreach into various community audiences

as identified in the EIA. Planning for these events will need to include attention to languages used in the community such as British Sign Language and community languages which are not English.

9. Issues, Risks and Mitigation

| Risk | Mitigation | Mitigated risk score |
|---|--|----------------------|
| <p>Due to the preferred site not being as close to the town centre as other evaluated options, there is a risk that there will be a lack of support for the new facility locally, that may lead to reputational damage to the CCG.</p> | <p>CW Steering Group to develop an options appraisal of mitigations to address concerns regarding accessibility of site. Briefing of NSC and Town Councillors via HOSP and Weston Town Council meetings. Work with NSC and Studio Hive (developer) and local voluntary sector regarding opportunities to improve transport links to site.</p> <p>Co-production workshops with patients and stakeholders to inform development of mitigations</p> | <p>2x4 = 8</p> |
| <p>Should patients at Graham Road Surgery perceive that the services will close or diminish prior to the opening of the new facility, there is a risk that patients may raise complaints or concerns or move practice list, resulting in loss of reputation for the practice and CCG, possible instability of the APMS contract and increasing pressure on neighbouring GP practices.</p> | <p>Graham Road patients to receive clear communications via the practice website, waiting rooms, letter and local media during plan phases, engagement and close working with GR & HHC PPG throughout course of project.</p> | <p>2x3 = 6</p> |
| <p>Due to pressures caused by response to Covid-19, there is a risk that communications and engagement activities that should be led by the GP provider cannot be sufficiently resourced by PHGL, leading to</p> | <p>PHGL have identified managerial support from One Care to lead the consultation activities and reporting</p> <p>PHGL PPG and Healthwatch to provide support to PHGL in running workshops and other activities.</p> | <p>1x3=3</p> |

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| adverse impact on milestone delivery and a lack of visibility and involvement by the provider. | | |
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APPENDIX 1 - Stakeholder Map

| | |
|--|---|
| Patients of GRS and their families/carers | Local MP - John Penrose |
| Community groups/individuals with protected characteristics identified in the Equality Impact Assessment | South West Ambulance Service Foundation Trust (SWASFT) |
| PHGL Limited. (Graham Rd & Horizon Health) PPG | Sirona Care & Health |
| Staff at GRS | University Hospitals Bristol and Weston NHS Foundation Trust |
| PHGL Limited | Avon and Wiltshire Mental Health Partnership |
| PHGL Super Partnership – Brandie Deignan (CEO) and John Heather (Chair) | Health and care system partners in North Somerset (CEOs/senior leaders for statutory and VCSE organisations including VANS and North Somerset Wellbeing Collective) |
| Weston Rugby Club | Healthwatch |
| North Somerset Council | Citizen's Advice North Somerset |
| Studio Hive (developers) | Alliance Housing Support |
| People living in and around Weston-super-Mare | Knightstone Housing |
| GP practices in and around Weston-super-Mare | Care homes in Weston-super-Mare |
| North Somerset Council - elected and officer members | Treatment centres in Weston-super-Mare e.g. Sefton Park, Broadway Lodge, Weston Counselling |
| Weston Town Council – elected members | College and schools in Weston-super-Mare |
| North Somerset Health Overview and Scrutiny Panel | Children's Centres in Weston-super-Mare |
| Avon Local Medical Committee (LMC) | In-house pharmacy at GRS |
| Estate agents with an interest in the new housing around the preferred option | Dentists and optometrists in Weston-super-Mare |
| Libraries, Leisure Facilities, Faith Groups in Weston-super-Mare | Local employers / business community e.g. supermarkets, hotels |
| Pharmacies in Weston-super-Mare | NHS England/Improvement |
| Weston Wheels – Community Transport | Weston-super-Mare and District Community Transport Group |
| First Bus | Great Weston Railway / Network Rail |



Equality Impact Assessment

Graham Road GP Surgery relocation proposal

Version 5.1 15.03.21



Follow the steps in this document and complete all the fields as fully and accurately as you can, and you will have a comprehensive equality impact assessment which will be used to inform the decision making process

Please Note: As a standalone document this EIA should have an overview of what the service is, purpose, benefits, make reference to studies, record what engagement took place (can be meetings, focus groups, clinical advice, patient feedback, stakeholder review, national studies, JNSA data), and impact on each protected characteristic etc.

To comply, the project manager and the decision maker has to demonstrate at the time of planning/decision they had due regard to eliminating discrimination, advancing equality and fostering good relations for all protected characteristics, this can best be demonstrated if the writer includes:

1. A statement of the evidence/ information used for choosing the characteristics to focus on and identifying relevant equality issues (summary section – i.e. there might be a group/s that need more focus than others due to their challenges and likely impact)
2. A statement of people who you consulted/engaged with in completing the EIA
3. A brief description of the project, policy or practice which your EIA is concerned with
4. Some assessment of whether the issues you have identified represent (actually or potentially) positive, negative or neutral impacts in relation to the PSED
5. A statement of how the project, policy or practice has been designed or amended to date in response to the equality issues identified (or not)
6. Some assessment of the legality of the project, policy or practice in relation to the PSED (could it discriminate unlawfully or help to advance equality of opportunity, foster good relations section of EIA)
7. Some recommendations for the decision-maker in response to your findings e.g.: No major change, adjust the policy or practice, continue it, stop and remove it – and name the decision maker (e.g. Governing Body)

Part 1 and Step 1 – Initial Equality Impact Assessment Form

- When completing this form, please use simple and accessible language – NO JARGON
- Please complete all the fields in this section with the relevant information
- Complete all the fields in the form. If you are missing some information, include reference to that and come back to complete that section when you have more details
- Extend acronyms to full the first time you reference them in your text. For example, Clinical Commissioning Group (CCG)
- Revisit this EIA throughout the project to update it and ensure it reflects any changes or amendments to the original proposal

1. What are the main aims, purpose and outcomes of the proposal?

Describe the policy/practice being developed and reviewed. Think about: What is the purpose of the policy or practice? In what context will it operate? Who is it intended to benefit? What results are intended and why is it needed.

Background and context of proposal

Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (the CCG) successfully secured in 2018 £3.2m STP capital funding (STP), to develop a new primary care facility in central Weston for relocation of GP services currently provided by Pier Health Group Ltd (PHGL) from the Graham Road Surgery estate.

This proposal is for an existing primary care service, currently located at Graham Road Surgery to be relocated to a new development in the centre of Weston –super-Mare. The proposal also provides an opportunity to improve the current primary care service model offered, resulting from having an improved and extended estate. The proposal will be achieved through a business case process with funding already identified from NHSE/I. The proposal will comprise delivery of a new Primary Care facility to serve a patient population of circa 11,000 and delivering a new model of primary care including:

- A digital front door and e-consulting
- The potential for closer partnership working with our BNSSG Community Services, Mental Health Service providers and Public Health teams
- The potential for closer partnership working with the Voluntary, Community and Social Enterprise Sector (VCSE) through Link Workers and social prescribing

Access to excellent primary care services in central Weston is a high local priority. Engagement work undertaken as part of the Healthy Weston programme found that primary care services in the town needed improvement. In particular, the Graham Road Surgery estate is of poor quality and constrained in ability to be extended or improve the facilities to satisfactorily cater to the patient population, which includes the population of the former Clarence Park Surgery (c 4,000 patients) that closed in September 2019 when the landlords decided to sell the property. The registered list at Graham Road Surgery currently stands at just over 11,700 patients.

The Central Weston Steering Group was launched in June 2019 with the purpose of identifying a suitable site in Weston town centre and progressing to an outline and then Full Business Case (FBC) for a primary care centre of c.1,100m², which could accommodate the relocation of Graham Road Surgery patients with room for growth and co-location of health and care services to deliver new, joined up service models for the population of Weston.

Co-produced with patients and a range of local providers and stakeholders, an evaluation and scoring criteria for assessing the site options was defined. 17 site options in and around Weston town centre were considered between June '19 and June '20 that could be suitable for FBC development for a preferred site that was achievable, accessible and affordable.

In June 2020, a final evaluation process was completed with clinical and managerial representation from PHGL, Graham Road patients and representatives from Sirona, North Somerset Council (NSC) and the CCG. From a shortlist of three viable sites, the Weston Rugby Club (the Rugby Club) was the highest scoring option overall. Working with the developer, Studio Hive, an Outline Business Case (OBC) was developed with the Rugby Club as the preferred site option. The OBC was approved by the CCG's Primary Care Commissioning Committee (PCCC) in July 2020 and regional NHSE team.

The intention to develop a FBC for a new primary care facility on the Rugby Club site was announced publically in December 2020. The next stages of the project include the development of a FBC to include public consultation and engagement, with full planning permission in place. Subject to approval of the FBC, the construction period will commence in early 2022 with completion anticipated in spring 2023 following the current programme projections.

Who will benefit

- People registered with the existing Graham Road practice
- Future registered patients, living within the new practice boundary
- People who are registered at Horizon Health Centre who may be able to access services delivered by Pier Health Group at the new site
- Clinical and administrative staff delivering services at Graham Road

Intended Results

The proposal will deliver a new primary care facility to serve a patient population of circa 20,000+ and delivering a new model of primary care including:

- A digital front door and e-consulting
- The potential for closer partnership working between primary care, community and mental health service providers and Public Health teams
- The potential for closer partnership working with the Voluntary, Community and Social Enterprise Sector (VCSE) through Link Workers, social prescribing and community transport

Wider opportunities

- Increased workforce resilience, through the ability to recruit to primary care roles by virtue of a new, purpose built and larger estate
- Taking advantage of proximity to green spaces and sporting facilities, with potential for social prescribing services working in partnership with the Rugby Club and the developer e.g. creating an allotment or garden area for patients and staff
- Ability to provide additional services tailored to the population needs, reducing inequality of provision

2. Does this Proposal relate to a new or existing programme, project, policy or service?

The proposal relates to the development of a new primary care facility and the relocation of existing Graham Road GP Surgery in Weston.

3. If existing, please provide more detail

What results are intended and why is it needed?

Pier Health Group currently provides primary care services for Graham Road Surgery to circa 11,000 patients. It has a multidisciplinary staff, which would also be relocated.

In 2019 Graham Road Surgery absorbed circa 5,000 patients from a former primary care contract with Clarence Park Surgery which was handed back to the CCG and closed the premises. This has put additional pressure on the estate at the Graham Road Surgery, in terms of being able to extend and improve their primary care service model so that it continues to be fit for purpose well into the future.

The result of the proposal will be a new, state of the art primary care facility, delivering more joined up health and care services to its registered population with room for list growth. The new premises shall provide an excellent environment for patients and staff, supporting PHGL's clinical workforce recruitment and retention plans providing an attractive location close to Weston railway station and the town centre with easy access to link roads to and from the M5.

PHGL currently provides primary care services from Graham Road Surgery to c. 11,700 patients. It has a multidisciplinary staff including new skill mix roles including mental health workers, social prescribers and physiotherapists alongside general practitioners and practice nurses.

The facilities at Graham Road that the new building will replace are old and at the lower end of the quality spectrum. A 6 Facet Survey was undertaken in 2018 which identified that there is a backlog of maintenance issues, with the estate becoming increasingly expensive to maintain and operate as time advances. This is compounded by access issues, including limited off road parking for patients (there is a small car park limited to parking for GPs and some disabled parking bays) reliant on the availability of street parking close to the building for the majority of patients.

In 2019, Graham Road Surgery absorbed circa 5,000 patients from Clarence Park Surgery after the contract was handed back to the CCG by the former provider and the premises subsequently sold. This has put additional pressure on the estate at the Graham Road Surgery, in terms of being able to extend and improve their primary care service offer, accommodating additional clinicians to meet the need of the increased population. There is no ability to further extend the building, which has been extended to the front and rear of the demise over its lifetime as a GP surgery. During the Covid-19 pandemic, the pressure on rooms and waiting/circulation area has been further exacerbated by social distancing regulation.

There is an in-house pharmacy located in Graham Road surgery. Although the re-location of this service is not within the scope of this proposal, it is highly likely that this service will relocate with the practice; negotiations to progress with the developer regarding commercial space proximate to the new facility.

4. Outline the key decision that will be informed by this EIA

The relocation of patients, staff and users of Graham Road Surgery to a new purpose-built primary care facility at the Weston Rugby Club development.

5. Does this proposal affect service users, employees and/or the wider community?

Provide more information on: Potential number of people affected, potential severity of impact, equality issues from previous audits and complaints. The key decision that will be informed by this EIA.

The proposal affects people registered at Graham Road Surgery (c.11,700) and non-clinical and clinical staff who provide services at the site. The impact of the change is assessed as low to medium, the proposed new site location being geographically close to the Graham Road site (within 0.4 mile); with the same proportion of registered patients being within a 20 minute walk to the new site as they are to the existing surgery and within 2-3 minutes driving time.

However, local concerns have been raised about the proposed location, which is yet to start being developed as a residential and commercial scheme, is on the opposite side of the railway line from the Graham Road site and currently is not regularly serviced by a bus route from the town centre.

In recent years several primary care services have closed or been relocated from the centre of Weston. NHS England closed the Boulevard walk in centre in 2013 and the Longton Grove and Newcourt surgeries relocated to Locking Road in 2014. Stafford Place surgery (branch of Locking Castle surgery) formally closed in 2020. In the context of recent movement of primary care provision beyond the centre of Weston, there is likely to be a wider public interest in this proposal. It will be important to engage with patients who were transferred to Graham Road after closure of the walk in centre and may not have been fully engaged or consulted with.

As the project progresses through the engagement and consultation period, this EIA document will be iterated and added to as more is learnt through feedback from patient and staff groups.

6. Could the proposal impact differently in relation to different characteristics protected by the Equality Act 2010?

Assess whether the Service/Policy has a positive, negative or neutral impact in relation to the Protected Characteristics.

- **Positive** impact means reducing inequality, promoting equal opportunities or improving relations between people who share a protected characteristic and those who do not
- **Negative** impact means that individuals could be disadvantaged or discriminated against in relation to a particular protected characteristic

-
- **Neutral** impact means that there is no differential effect in relation to any particular protected characteristic

Age (Positive, Negative, Neutral)

Positive

- Weston-super-mare Central ward is home to 3.1% of the North Somerset population (Census in 2011 - 6197 residents)
- There is a proposal for 2,500 more homes in the Town Centre and also plans for more higher education opportunities which has created a need for more halls of residence for students.
- Central ward residents were registered at 15 different GP practices in 2016 with 35% being registered at Graham Road Surgery. This figure will have increased due to the closure of Clarence Park Surgery and with the transfer of some 4,000 patients to Graham Road Surgery in 2019.
- A higher percentage of working age population (18-64 years) and females aged over 85 years live in Central ward than North Somerset overall.
- The main causes of death are circulatory disease, cancer and respiratory disease.
- Over one third of children who live in Central ward are in poverty. 500 adults and 119 children were helped by the Foodbank. The main reasons for Foodbank vouchers being issued were benefit delays, low income and benefit changes. (This will have increased due to covid-19).
- Six per cent of school age children have a learning disability.
- Twice as many people in Central ward have a child protection assessment compared to the average in North Somerset, however, the ratio of referrals to full child protection plans is lower in Central ward than the North Somerset average.

(NSC Weston-super-Mare, Central Ward, Health Needs Assessment May 2016)

Please provide reasons for your answer and any mitigation required

A new and more accessible primary care facility will support recruitment and retention of health staff to enable improved delivery of primary care to the population. The project will provide an opportunity for health and care staff to refocus on the health and care priorities for the catchment population which includes those living in central and south wards which have the 3rd largest health inequalities gap in England with 1% of the most deprived in in England.

A modern, accessible state of the art primary care facility that provides improved accessibility has higher opportunity to support the recruitment and retention of health care staff, which will enable improved delivery of primary care tailored to population needs. The proposal will provide an opportunity for health and care staff to refocus on the health and care priorities for the catchment population which includes those living in Central and South wards in Weston, which have the 3rd largest health inequalities gap in England with 1% of the most deprived in England. Central ward has the lowest life expectancy rates in North

Somerset (67 years for males 76 for females), with the main causes of death being circulatory disease, cancers and respiratory disease.¹

As noted in s5 above, the proposed site is close to the existing Graham Road site. However, it is on the opposite side of the railway line which would necessitate those travelling not by car from residential areas surrounding Graham Road to traverse the footbridge at the railway station, which has limited access and no ramps for mobility vehicles or buggies/pushchairs or travel via the Hildesheim Bridge to access the north end of Sunnyside Road. The area surrounding the Rugby Club and Weston station is due for major regeneration including hundreds of new residences alongside commercial units and new sporting facilities at the Rugby Club. A new primary school is also planned to the East of the Club recreational facilities. Currently there are no bus routes running past the site, however transport infrastructure is likely to come on line as the developments progress. There are concerns that in the interim, the location of the new facility would negatively impact upon older and more deprived populations with lower level of car ownership (car ownership in central Weston stands at c.45%).

There will be opportunities to engage with patient groups on this issue with a dedicated transport workshop as one of the first planned engagement events, however plans to mitigate this impact are in early development with local voluntary sector organisations to provide sustainable and green community transport options to the facility, delivering a community asset for Weston which builds upon extant local community transport provision.

Disability (Positive, Negative, Neutral)

Positive

- Physical Impairment; Sensory Impairment; Mental Health; Learning Difficulty/ Disability; Long-Term Condition
- Central ward has 42 care homes; 24% of all care homes in the North Somerset Authority.
- Central ward has the lowest life expectancy rates in North Somerset (67 years for males 76 for females).
- The main causes of death are circulatory disease, cancer and respiratory disease.
- Levels of long-term ill health are much higher in Central ward than the rest of North Somerset.
- Rates of hospital stays for intentional self-harm are high amongst Central ward residents.
- Drug and alcohol treatment services are concentrated in Central Ward with 24% of those who are receiving treatment living in the ward.
- Six per cent of school age children have a learning disability.

¹ NSC Weston-super-Mare, Central Ward, Health Needs Assessment May 2016

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- Central ward residents were registered at 15 different GP practices in 2016 with 35% being registered at Graham Road Surgery. This figure will have increased due to the closure of Clarence Park Surgery and with the transfer of some 5,000 patients to Graham Road Surgery in 2019.

(NSC Weston-super-Mare, Central Ward, Health Needs Assessment May 2016)

Please provide reasons for your answer and any mitigation required

A new and more accessible primary care facility will support recruitment and retention of health staff to enable improved delivery of primary care to the population. The project will provide an opportunity for staff to refocus on the health and care priorities (as detailed above) for the catchment population which include those living in central and south wards which have the 3rd largest health inequalities gap in England with 1% of the most deprived in in England.

The Graham Road practice boundary includes the Central ward area, with 35% of ward residents accessing primary care services from the site. The Joint Services Need Assessment (2016) identified that 6% of school age children between 7 and 15 yrs living in the ward have a learning disability, and 13% of the population are not working due to sickness and disability, which is high in comparison to the 4% North Somerset average. The new facility will have sufficient space and amenity to offer new models of care and services to support people with all types of disability, particularly with the opportunity to co-locate health and care services to deliver holistic and joined up care. As part of the development of the full business case, the engagement and consultation with patient groups including disabled people and carers to understand their health and care needs will support the design and accessibility of the service and also the clinical offer provided to this population.

Gender Reassignment (Positive, Negative, Neutral)

Positive

Weston super Mare has a small population of Trans people known by experience through the North Somerset LGBT+ Forum.

Please provide reasons for your answer and any mitigation required

The design of a new facility will provide an opportunity to ensure that the needs of this community are considered from the outset.

Through a process of engagement with patient groups to support the development of the full business case, there will be opportunity for this patient group to inform the design of the new facility and services provided, ensuring that the needs of this community are considered from the outset.

Race Including nationality and ethnicity (Positive, Negative, Neutral)

Positive

A much higher proportion of people from a non-white British background live in Central ward than in the rest of North Somerset. People are more likely to have been born outside of the UK with their first language not being English.

Please provide reasons for your answer and any mitigation required

Part of implementing a new facility will be to ensure that services are welcome to all, and that access is made as easy as possible for people who may have English as a second language. The service will need to ensure that it is culturally aware and offers appropriate choice to patients concerning their cultural needs.

There are a higher proportion of people from a non-white British background living in Central and South wards than in the rest of North Somerset. After White British (82%) (94% in North Somerset, White Other is the next most common ethnic group in Central Ward; 4% of these residents are Polish. 11% of residents have a first language that is not English, which is again much higher than the North Somerset average of 2%.²

An important part of developing the new facility and the delivery of a new service model will be to ensure that services are welcome to all and that access is made as easy as possible for people who may have English as a second language. The engagement and consultation process to inform the full business case for the proposed site shall support engagement and co-production work with community leaders and groups to ensure that the services are culturally aware and offer appropriate choice to patients concerning their cultural needs.

Religion or Belief (Positive, Negative, Neutral)

Neutral/Positive

The new building will continue to provide universal primary care services regardless of religion or beliefs.

Please provide reasons for your answer and any mitigation required

This does present a fresh opportunity to understand what needs the local community may have regarding faith and religious beliefs regarding the receipt of health care.

Approximately 52% of South ward and 56% of Central ward residents define themselves as Christian, compared to 61% across North Somerset; Islam is the second most common religion in Central ward with (1%). There are small proportions of South and Central ward residents identifying themselves as belonging to other religions including but not limited to Buddhist, Hindu, Jewish, and Sikh. Roughly 40% of the population do not identify with any religion.

The services delivered from the new building will continue to provide universal primary care services regardless of religion or beliefs. The development of a new service model to be delivered from the new facility presents a fresh opportunity to understand what needs the local community may have regarding faith and religious beliefs when in receipt of health care services

² Census 2011: NB “non-white British” includes black and minority ethnic (BAME) and White other categories

Sex (Positive, Negative, Neutral)

Neutral/Positive

The new building will provide universal primary care services regardless of sex.

Please provide reasons for your answer and any mitigation required

However, in this area which has high deprivation and higher mortality and morbidity rates than the English average, it will be important to understand the particular health needs of men and women in the community the services will serve. In particular there is a higher incidence of self-harm in this community.

The new building will provide universal primary care services regardless of sex. The population to be served by the new facility has high deprivation and higher mortality and morbidity rates than the English average, it will be important to understand the particular health needs of men and women in the community the services will serve. In particular there is a higher incidence of self-harm in this community.

Sexual Orientation (Positive, Negative, Neutral)

Positive

There is a significant LGBT+ community in Weston –super –Mare with an annual Pride celebration which draws in thousands of local people from Weston and surrounding areas. It is well known that health outcomes for this community are lower than for other communities.

Please provide reasons for your answer and any mitigation required

The new building will offer the opportunity to revisit how the accessible and welcoming the services are to people for the LGBT+ community and there will be greater opportunity to reach out and engage to see what matters most as any service changes are co-designed.

Pregnancy and Maternity (Positive, Negative, Neutral)

Neutral/positive

The new building will provide universal primary care services to pregnant women through antenatal and post-natal care

Please provide reasons for your answer and any mitigation required

There is an opportunity to review and improve services for pregnancy and maternity in this proposal.

There is a relatively younger population in South and Central ward areas, with higher levels of general fertility (86 per 1000 people in South and 76 per 1000 in Central aged 15-44 years) indicating that the birth rate in the area served by the new facility is higher than the

North Somerset average (65 per 1000 people). This highlights the importance of good access to maternity services and parenting support to the practice population.

The Central ward Health Needs Assessment³ states that between 2011 and 2013 the conception rate for under 18s in Central ward was 58 per 1000, which is over double the North Somerset under 18s conception – although the actual number of under 18 conceptions in that period was small and requires care in interpretation (n=17).

The new services will continue to provide universal primary care services to pregnant women through antenatal and post-natal care, however there is a positive opportunity during the engagement and consultation processes to review and improve services for pregnancy and maternity, in response to local need.

Marriage & Civil Partnership (Positive, Negative, Neutral)

Neutral

The new building will provide universal primary care services regardless of the marital and civil partnership status of people using the services.

Please provide reasons for your answer and any mitigation required

The services delivered at the new facility will provide universal primary care services regardless of the marital and civil partnership status of people using the services.

** Under-18s are only protected against age discrimination in relation to work, not in access to services, housing, etc. Children's rights are protected by several other laws and treaties, such as: The Children Act; the Human Rights Act 1998; the UN Convention on the Rights of the Child; the European Convention on Human Rights; the UN Convention on the Rights of Persons with Disabilities; and the UN Convention on the Elimination of Discrimination against Women*

Relevance to the Public Sector Equality Duty - Please select which of the three points are relevant to your proposal. There is a general duty which requires the system to have due regard to the need to:

7. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010?

Does this proposal address risk in relation to any particular characteristics?

Yes

There is an opportunity as this project proceeds to engage with the communities which share protected characteristics to understand what matters most to them in the new facility. It is intended to reach out to these communities and involve them in service review, redesign and development throughout the project. This will help to surface any issues of unlawful discrimination, harassment and victimisation and help to build relationships with the local community, particularly with communities that we don't hear from so often or that are marginalised in some way.

³ Donna Davies & Helen Yeo 'Weston-super-Mare Central ward Health Needs Assessment' (May 2016), p10

8. Advance equality of opportunity between people who share a protected characteristic and those who do not?

9. Will this proposal facilitate equality of opportunity in relation to particular characteristics?

Yes

Please explain your reasons

There is an opportunity as this project proceeds to engage with the communities which share protected characteristics to understand what matters most to them in the new facility. It is intended to reach out to these communities and involve them in service review, redesign and development throughout the project. This will help to build relationships with the local community, surface opportunities to facilitate equal opportunities, particularly with communities that we don't hear from so often or that are marginalised in some way.

EIA Impact Assessment Approver(s) – Please email Sharon.Woma@nhs.net for approval

Full Name

Comments from Equality Lead

Date Approved

Quality Impact Assessment

**Project name: Graham Road GP
Surgery relocation proposal**



Quality is defined in terms of three domains:

- Patient safety (doing no harm to patients)
- Patient experience (care should be characterised by compassion, dignity and respect);
- Effectiveness of care (to be measured using survival rates, complication rates, measures of clinical improvement, and patient-reported outcome measures)

The quality and safety domains should be used to outline the details of the potential impacts of the plans on quality.

Background and context of the proposal

Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (the CCG) successfully secured in 2018 £3.2m STP capital funding (STP), to develop a new primary care facility in central Weston for relocation of GP services currently provided by Pier Health Group Ltd (PHGL) from the Graham Road Surgery estate.

Access to excellent primary care services in central Weston is a high local priority. Engagement work undertaken as part of the Healthy Weston programme found that primary care services in the town needed improvement. In particular, the Graham Road Surgery estate is of poor quality and constrained in ability to be extended or improve the facilities to satisfactorily cater to the patient population, which includes the population of the former Clarence Park Surgery (c 4,000 patients) that closed in September 2019 when the landlords decided to sell the property. The registered list at Graham Road Surgery currently stands at just over 11,700 patients.

The Central Weston Steering Group was launched in June 2019 with the purpose of identifying a suitable site in Weston town centre and progressing to an outline and then Full Business Case (FBC) for a primary care centre of c.1,100m², which could accommodate the relocation of Graham Road Surgery patients with room for growth and co-location of health and care services to deliver new, joined up service models for the population of Weston.

Co-produced with patients and a range of local providers and stakeholders, an evaluation and scoring criteria for assessing the site options was defined. 17 site options in and around Weston town centre were considered between June '19 and June '20 that could be suitable for FBC development for a preferred site that was achievable, accessible and affordable.

In June 2020, a final evaluation process was completed with clinical and managerial representation from PHGL, Graham Road patients and representatives from Sirona, North Somerset Council (NSC) and the CCG. From a shortlist of three viable sites, the Weston Rugby Club (the Rugby Club) was the highest scoring option overall. Working with the developer, Studio Hive, an Outline Business Case (OBC) was developed with the Rugby Club as the preferred site option. The OBC was approved by the CCG's Primary Care Commissioning Committee (PCCC) in July 2020 and regional NHSE team.

The intention to develop a FBC for a new primary care facility on the Rugby Club site was announced publically in December 2020. The next stages of the project include the development of a FBC to include public consultation and engagement, with full planning permission in place. Subject to approval of the FBC, the construction period will commence in early 2022 with completion anticipated in spring 2023 following the current programme projections.

Part 1: Screening Tool

1.1 Does your plan affect patient safety?

1. Is there an impact on patient safety? (Yes)
2. Is there an impact on delivery of national standards? (Yes)
3. Is there an impact on the provider's duty to protect people? (Yes)
4. Is there an impact on clinical workforce capability and skills? (Yes)
5. Does the plan create an impact on the prevention of violence and aggression; or contribute to service users feeling less safe? (Yes)
6. Is there an impact on partner organisations and any aspect of shared risk? (Yes)
7. Provide a rationale for assessing the impact on Patient Safety

The proposed new primary care facility will be designed to provide sustainable, fit for purpose accommodation, replacing the former Clarence Park and Graham Road surgery premises. The accommodation and design of the new facility will be based on delivering functional, adaptable and flexible space to meet the needs of the registered practice population and providing room for growth will promote positive impacts on delivery of safe services to patients.

Therefore overall it is anticipated that the proposed project will enhance patient safety. However, patient safety will need to be considered in relation to access to the new site for some patient groups. In addition, vulnerable patient groups will require further consideration in ensuring their access to treatment, including medication, is not disrupted. Any change to treatment and/or medication provision will require further discussion with partner organisations to assess potential impact on patients and service delivery.

1.2 Does your plan affect clinical outcomes?

1. Does your plan comply with the best evidence guidance including NICE? (Yes)
2. Does your plan impact on the delivery of services in line with national clinical and quality standards? (Yes)
3. Does your plan lead to a change in care pathways? (Yes)
4. Is there an impact on the delivery of clinical outcomes? (Yes)
5. Provide a rationale for assessing the impact on Clinical Outcomes

The schedule of accommodation requirements and internal layout design has been carefully assessed with reference to the latest policy and technical guidance including health building notes (HBN). The additional space will enable the provider to deliver high quality care pathways, and new services beyond core general medical service provision. This may include the co-location of community health and care partner services either in the facility, or located in proximity in the Weston Rugby Club development, which will promote closer, integrated working with locality providers. The improvements in the quality of the facility is likely to help in attracting a new and expanded workforce, to include wider skill mix including

mental health practitioners, physios, clinical pharmacists as part of Additional Reimbursable Roles (ARRS) investment in primary care services.

As part of an engagement and consultation plan for the relocation of Graham Road services to the new facility, co-production workshops will be held with the patient population and wider community to design the service model deployed by the provider (PHGL). Improved and new patient care pathways, tailored to the needs of the local population will be able to be delivered effectively with the benefit of the capacity a modern and purpose built facility with additional space brings. This is likely to improve patient health outcomes, in turn contributing to reducing inequalities at population level.

A change to the location of the community pharmacy currently located at the Graham Road surgery site as part of the intended relocation to the Rugby Club development will need to be considered as a part of a change to care pathways. The pharmacy for example provides a methadone dispensing service to a predominantly homeless population who may be negatively impacted by a change of location.

1.3 Does your plan affect patient experience?

6. Does your plan have an impact on service user experience? (Yes)
7. Does your plan have an impact on carer experience? (Yes)
8. Does your plan support the choice agenda? (Yes)
9. Does your plan address concerns and issues identified through PALs, complaints, and national and local service user and carer surveys? (Yes)
10. Provide a rationale for assessing the impact on Patient Experience
(A summary narrative to explain answers to questions above)

A high quality, state of the art primary care facility located in an accessible location is likely to support improved patient experience. The location is not as close to populations in the centre of Weston as other site options considered during the site search; however the opportunities presented by the ability to fit out a brand new 'shell' building that could provide the required square meterage, along with good natural light and optimum internal configuration was evaluated highly in comparison to alternative locations closer to the town centre. The new location is the closest of all options considered to the existing Graham Road site and the travel times to the new location will be proportionately the same for patients as those to the current site.

It is vital, however to listen to concerns regarding accessibility, as the facility will be built on what is currently an undeveloped site, sitting in proximity to industrial units and little residential housing. This will change in light of a wider regeneration in the next 2-3 years as part of the Station Gateway as part of North Somerset Council's place making programme, with hundreds of apartments and housing built not just on the Weston Rugby Club site but also on Sunnyside Road and the former Locking Bus station. Feedback post public announcement of the site location has highlighted the lack of public transport and accessibility by foot from the town centre, which is

pertinent due to lower than national average levels of car ownership in Central ward for example.

The intention is to run a series of pre-consultation engagement workshops in April / May 2021 with service users and staff to consider key patient experience factors, including transport and accessibility, design 'look and feel' of the facility, health and wellbeing opportunities at the new site and the new service model. There will be the opportunity to not just engage and listen to issues, but to co-produce with service users and local stakeholders solutions or mitigations to any issues or risks that are raised. This will be followed by a consultation piece on the relocation of Graham Road surgery services to the new site from June – September 2021.

To measure patient experience when the facility opens in spring 2023, ongoing opportunities feedback will be provided to all service users including Friends and Family tests, practice questionnaires and the ability to feedback via the practice Patient Participation Group (PPG) and Healthwatch. Complaints will continue to be managed in the first instance by the practice provider. All feedback will be collated and used to inform continuous service improvement, with regular 'you said, we did' communications provided via the PPG steering group, practice noticeboards and other media.

1.4 Risk Scoring

Please add the risks identified for your project (copy and paste to add more if needed)

Quality Domain: Patient safety

Risk description: Due to the change in site there is a risk that access may be challenging for some patients. In addition access to prescription and treatment for vulnerable groups including those patients with substance misuse may be affected. This may also involve impacts on other services such as drug and alcohol services requiring them to make changes to their care pathways.

Probability: 3

Impact: 3

Total score: 9

Quality Domain: Clinical outcomes

Risk description Due to the intended change of location of the Graham Road surgery community pharmacy as part of the relocation to the new facility at the Rugby Club site, there is a risk that change to service pathways by virtue of change of location could impact on uptake and use of community pharmacy services such as methadone dispensing or needle exchange, which could cause adverse outcomes for these service users.

Probability: 3

Impact: 4

Total score: 12

Quality Domain: Patient experience

Risk description: Due to the preferred site not being as close to the town centre as other evaluated options, there is a risk that there will be a lack of support for the new facility locally, that may lead to reputational damage to the CCG.

Probability: 3

Impact: 4

Total score: 12

Quality Domain: Patient experience

Risk description: Should patients at Graham Road Surgery perceive that the services will close or diminish prior to the opening of the new facility, there is a risk that patients may raise complaints or concerns or move practice list, resulting in loss of reputation for the practice and CCG, possible instability of the APMS contract and increasing pressure on neighbouring GP practices.

Probability: 4

Impact: 3

Total score: 12

Scoring: The scoring is based on a standard risk matrix scoring system. The score will therefore, reflect the potential risk to quality and is summarised below. The overall risk score should be the highest score from the individual quality domains.

The **probability** of the risk

1. Rare
2. Unlikely
3. Possible
4. Likely
5. Almost certain

The **impact** of the risk

1. Very low impact
2. Low impact
3. Medium impact
4. High/Serious Impact
5. Very Serious Impact

1.5 Conclusion of Screening Tool - Project Lead to confirm

11. Based on answers to the screening questions above, do you think this project needs to proceed to full QIA? **Yes**
12. Please explain your reasons:

The initial assessment indicates that there are impacts across patient experience, outcomes and safety to be explored in further detail.

1.6 Approval – Quality Lead to complete

13. QIA Approver(s):
14. Date of Quality Assurance:
15. Comments from QIA lead

Part 2: FULL Quality Impact Assessment

Please tell us how your plan impacts on the Quality Domains

16. Patient Safety

It is likely that overall, the new development will support an improvement in the delivery of health care services, resulting in higher levels of patient safety. However it is important to note that the practice boundary for the current Graham Road location (c.11,700 list size) includes areas of deprivation and people with high levels of need both for health and social care services and include a high proportion of care home beds in Weston.

There is a patient population who access the pharmacy at Graham Road for methadone dispensing; who are may be difficult to engage with regarding the relocation of the services. Importantly, the pharmacy will re-locate with the practice (preserving the provision). However in a context of whether this proposed relocation may make the care of any patients *less safe* it is a fair assumption that the move of the pharmacy may make methadone dispensing less accessible to this population, who are often either homeless or in temporary housing and may decide/ find it harder to travel to the new site to access services. It will be important to ensure excellent links with local drug and alcohol services to support this population.

The location of the new facility is on the eastern and opposite side of the main line railway line; it is possible to cross the railway line by road bridge or via the railway station footbridge, although this is not suitable for buggies or wheelchairs. It is possible that some people may take risks to cross the railway line to reach the site, rather than using available road and pedestrian crossing infrastructure.

The patient population also includes a high number of young people and families and to reflect the needs of the population, and to improve safety for patients the service delivered from the new location would need to consider promoting the needs of children requiring safeguarding – in particular ensuring that there are excellent links with Health Visiting teams.

Co-production of the service model with groups identified in the equality impact assessment (EIA) and identified within this document to ensure that personalised and self-care forms part of the service model and that effective service provision is protected and not lost through the relocation and service model design.

17. Clinical Outcome

Clinical outcomes are likely to be improved as a result of the modern, fit for purpose environment, with a facility large enough to absorb population growth to 2030. This will also improve staff retention and recruitment. The additional space, level of amenity and location provided by the new facility will help to support the capacity for existing patient care pathways and add new pathways that support improved outcomes, to meet the needs of the local population. There are also prime opportunities to develop more social prescribing

offers from the site, to promote prevention and proactive self-care for example linking with the gym that will form part of the Rugby Club facilities, the surrounding recreational grounds and green spaces that might support activities such as allotments or gardens linked to the practice.

The preservation of the in-house pharmacy at the new location will also be a great asset to the new service, ensuring continuity of provision. However, it will be important to ensure that populations that use community pharmacy services are not disadvantaged by the relocation and mitigations are developed to support access by foot and transport to the new facility that will not inhibit people from continuing to use these services.

18. Patient Experience

Patients will benefit from a new fit for purpose clinical environment including direct ground floor access and circa 25 dedicated free parking spaces and access to additional parking within the development. Pre-consultation engagement workshops in April / May 2021 with all service users and staff will consider patient experience factors, including transport and accessibility, design 'look and feel' of the facility, health and wellbeing opportunities at the new site and the new service model. The EIA has identified patient groups with protected characteristics that may be impacted by the proposed changes and therefore contact with these groups to understand issues and garner views on the changes is vital to ensure timely and appropriate mitigations where necessary can be developed prior to the commission of the new facility in spring 2023.

Co-production workshops will be followed by a consultation piece on the relocation of Graham Road surgery services to the new site from (June – September 2021)

To familiarise and provide orientation ahead of the facility opening a walk around of the facility with for patients and members of the community will be offered by the provider.

Are there any specialist advisors that will need to be consulted or involved in the development of your plan?

19. Please Comment:

Drug and alcohol service providers (We are with you)
Local pharmacy committee (Avon LPC)
Health Visiting services
Local safeguarding leads

What is the outcome of your Quality Impact Assessment?

20. Although this QIA does not identify any potential harm to patients and staff, it has identified where there are potential risks to patient safety and experience which may be caused by the relocation to the Rugby Club location. Therefore these risks will be incorporated in the risk register with supportive mitigating actions put in place and will also inform the materials for pre consultation engagement and formal consultation on the relocation.

Full QIA Approval

21. QIA Lead approval:



Contact us:

Healthier Together PMO Office, Level 4, South Plaza, Marlborough
Street, Bristol, BS1 3NX

bnssg.htpmo@nhs.net

APPENDIX 7 - Engagement & Governance Timeline

| Graham Road GP Surgery relocation - Outline involvement, engagement and consultation timeline | | | | | | | | | | | | | |
|---|----------|----------|---|-----------------------------|----------|---|----------|----------|----------|--|----------|----------|--------|
| | Jan-21 | Feb-21 | Mar-21 | Apr-21 | May-21 | Jun-21 | Jul-21 | Aug-21 | Sep-21 | Oct-21 | Nov-21 | Dec-21 | Jan-22 |
| Involvement and engagement period | Planning | | Patient Participation Group (PPG) involvement and elections | Pre-consultation engagement | | Consultation on relocation of Graham Road Surgery | | | | Consultation analysis and report writing | | | |
| Pre-consultation co-production workshops | | | | 16.04 23.04 30.04 | 7.05 | | | | | | | | |
| Outreach listening event - Equality communities | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - Older People's Champions Group | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - Disabled Access Group | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - LGBTQ+ | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - BAME communities | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - GRT communities | | | | | | TBC | TBC | TBC | TBC | | | | |
| Outreach listening event - Health inclusion communities: e.g. homeless, sex workers, substance misuse | | | | | | TBC | TBC | TBC | TBC | | | | |
| Governance & Key Meetings for Updates and Reports | | | | | | | | | | | | | |
| CCG Primary Care Commissioning Committee | 26.1.21 | 23.2.21 | 30.3.21 | 27.4.21 | 25.5.21 | 29.6.21 | 27.7.21 | 31.8.21 | 28.9.21 | 26.10.21 | 30.11.21 | | TBC |
| CCG Primary Care Operational Group | 14.01.21 | 11.02.21 | 11.03.21 | 08.04.21 | 13.05.21 | 10.06.21 | 09.07.21 | 12.08.21 | 09.09.21 | 14.10.21 | 11.11.21 | 09.12.21 | |
| North Somerset Council Health Oversight & Scrutiny Panel (HOSP) | | | 18.3.21 | | | 3.6.21 | | | | 7.10.21 | | | |
| Weston Town Council meeting | 25.1.21 | | 22.3.21 | | 20.5.21 | | | | | | | | |
| NHSEI Assurance | | | | | | | | | | | | | |