

Notes from PPG AGM 25 September 2014

Maggie Samuel PPG Chair welcomed the guests to the PPG AGM being held in North Tawton.

- MS advised that this was the first time that the meeting had been held outside of Chulmleigh as the PPG group wanted to reach other patients in the Health Group area.
- MS advised that there was a copy of the minutes on the chairs from the last AGM meeting and asked if anybody was there at the meeting who attended last year that could approve them. These were approved as correct from Bill Dean North Tawton PPG and then seconded.
- MS confirmed that she was Maggie Samuel the Chair of the PPG and welcomed the other PPG Members who were present at the meeting consisted of North Tawton, Bill Dean, Jill Doe, Lapford, Lynn Lane, Okehampton, Anne Balcomb, Winkleigh, Jack Earnshaw, Burrington and Rosemary Rives Roberts, Chulmleigh.
- MS also thanked Ralph Glass and Elizabeth Russell-Lake for all their hard work and contribution over the years and advised that they had retired this year.
- MS also advised that members from Wallingbrook Health Group were Tim Burke, Will Sherlock, Karen Acott and Eve Willis.
- MS gave an update on what the PPG is about advising that they were volunteers and through their community contacts and commitments we raise any issues with WHG in our monthly meetings. Areas such as North Tawton have their own local committee meeting and they feedback their thoughts via their local representatives.
- MS North Tawton are this year's hosts for the AGM meeting, the members were mentioned by name and these are Bill Dean, Viv Coker, Ian Macleod, Keith Badman, Pauline Prew and Louise Watts. Sue Knott was not in attendance at this meeting.
- MS this particular group has been really active in promoting the needs and concerns of patients within North Tawton and included the Healthy Living Week which was really well supported and held in this hall. Chulmleigh held its 2nd Healthy Living Week which consisted of over 20 clubs and local organisations who welcomed new comers to free sessions during the week. Pictures in Chulmleigh waiting room shows some of the patients enjoying these. Funding towards this was made possible from the Clinton Estate and Active Devon to transport people in and also allow for the services of a professional coach.

- MS advised that a Summer survey had been held this year and people would be pleased to know that most patients were content with the service provided although transportation was an issue for the older patients within Winkleigh. Patients were happy to see an alternative GP rather than their usual GP and were happy to consult over the telephone. Majority of the respondents were within the older age group which reflects the demographics of WHG.
- MS There are always some issues which provoke patients and this year it has been the absence of toys within the waiting rooms which have been removed due to Infection control, the Lapford prescription service stopped at the beginning of the year and PPG expressed concern over the other changes in Okehampton where the Practice has another branch and Dr De Ferrars was promoting articles within the local newspapers but since then she has now left. It was nice to know that provision was being made for working patients to be able to make appointments out of hours. The PPG is affiliated to the National Association of Patient Participation and they organised a petition to ask the Government for better funding for General Practice.
- MS In the future we would like to recruit younger members to our regular team. We would like to create more links within the local communities.
- MS The Practice is facing many challenges and we are trying to make sure the patient voice is heard.
- MS handed over to Karen Acott
- KAC thanked Maggie and the Patient representatives who are key to the success of WHG and help deliver a service to suit all of our patients. Over the years WHG has worked hard and one of our biggest challenges has been communication which we try to do but have on occasion failed.
- KAC Like many GP Practices, WHG is under a lot of pressure particularly in North Tawton and the viability of the Practice. It is therefore with deep regret that we have advised NHSE that we are giving 6 months' notice on the North Tawton contract effective 31 March 2015.
- KAC We have been in contact with the Local MP Mel Stride who has also written to NHSE. Unfortunately there has been no response from NHSE within the last few months.
- KAC the letter to NHSE regarding the contract notice was circulated and KAC advised that she hoped it was self-explanatory and advised that a Statement was received from Mel Stride at 4pm today. This was read out at the meeting.
- WS WS greeted the attendees and advised that he was a Partner of Wallingbrook and wanted to give a brief history of WHG and where we have been as a Practice and where we are now.
- WS Dr John Warre ran the Practice for many years and then Dr Malcolm Downie took over the contract and we were keen and ambitious about spreading the services of Wallingbrook. WS and Dr Ian Guildford worked as sessional Doctors at North Tawton surgery. That relationship came to a close. We were very pleased when we were subsequently asked to take over the contract. The model we wanted to put forward for was a combined General Practice and

Pharmacy known as 'PharMedic' and would involve having new premises from which would run the Pharmacy and GP service.

We worked with an Architect to draw up plans that would be suitable for a combined pharmacy and GP surgery but those plans were rejected at planning and we had to think again.

WHG then entered into negotiations with a Third Party who offered to build a building for us but they would require signing a 25 year lease and we would have to commit to that building for the next 25 years.

The problem has been that in the last few years, GP practices have been in an increasingly unpredictable environment and investing for the future knowing that you are going to be able to provide services for the next 25 years is too uncertain currently.

We have done our best to increase the efficiency on how we provide our services from Chulmleigh to Okehampton.

WHG believe NT doesn't have receive sufficient funds to be viable long term and as professionals we are not prepared to reduce by almost half the doctor services at North Tawton because that is what we are being funded at. It is a real personal regret for me that WHG now has to retrench.

WS I am just grateful for all the support we have received. Karen mentioned the Turkey and Tinsel evenings. I was unable to attend last year but I attend the year before and it was a great laugh with great stories. I am sorry this is a difficult evening and I apologise for what is happening but we feel we have no other choice.

Hopefully NHSE will find another organisation to take on the contract and to provide the services as they have been.

We will await NHSE response and will work with them to preserve services for North Tawton patients.

Q Do the Powers that be, know that we are a growing town?

A Yes, I believe they are aware but that hasn't prompted them into having a more constructive relationship with us so far.

Q The letter that WHG has handed out sounds conclusive and not reversible; so even if the Fairy Godmother appears with £50K that decision has been made. I thought that was quite a hopeful letter from Mel Stride but it doesn't sound as if NHSE has anything to say on that. That decision is now made by WHG, isn't it?

A Yes but we are open to negotiations and will need to review the viability issues. We need to address the premises issue for the longer term and as you rightly said the Pharmacy and local community depends on the long term future of the surgery.

Q How is Wallingbrook going to announce this to patients, will they all receive a letter or is there a notice in the Parish Magazines?

A I think it is dependent on the Commissioner of Service which is NHSE and it is very much up to them. The ball is in their court now and we need to understand what their response will be. It will be inappropriate and unfair to send letters to individual people at this stage. What this signals is potentially a change of provider.

Q This is a public meeting and from tomorrow people will generally know and ask questions. As I understand it WHG have said to the NHSE that they can no longer carry on. Now it maybe that Mel Stride can work something that could affect that decision.

A We didn't put the letter in as a bidding strategy. A long term sustainable future for North Tawton GP and Pharmacy services would be of interest. However if somebody said here is funding for another year then no. However if we were offered longer term funding and appropriate building WHG would find it difficult to refuse.

Q So what WHG are saying that is a firm decision, as it is at the moment?

Patients will be asking, I am a patient at North Tawton Surgery, what will my position be in six months' time, do I become a patient of one of the other surgeries within WHG or do I as I gather several other people have, apply to Bow Practice which is geographically our nearest, what is the answer?

A That depends on what NHSE decides to do with this area. As this unfolds, there would need to be a period of consultations with the local population. If their position is that they disperse that population currently registered at North Tawton, they would have to articulate that clearly and they would have to look at other options and negotiate with the surrounding practices if they have the capacity to take them. There would have to be a process of offering patients currently registered at North Tawton the option of being registered somewhere else

Q So I am registered here and I wished to be, say registered at WHG Okehampton Practice, I would have to apply to that Practice or am I a member of Wallingbrook Group.

A Any patient is free to apply to register at any practice they choose to in their area.

Q I mean any practice within the WHG.

A Yes, all of our Practices are under separate contracts. All records are accessible across all of our sites. However in NHSE sense the Practices are separate

WS Can I give a really blunt answer? Somebody could come and take over the contract and patients can continue to be registered here. Or there will be no provider in North Tawton and people have a choice to then go to Bow, Crediton, Hatherleigh etc., The Practice may go on the 1 April so you would then have a choice to be registered wherever you like.

Q People are going to panic when they receive the information and will go anyway.

There is a formal process to be followed?

- A Yes there is a formal process and possibly NHSE will offer patients based on geography the option to move (in negotiation with the other practices).
- WS I don't think it always happens that patients hear the news and disperse. Look at the situation re Okement. Dr Taheri left; the Practice did drop down but didn't evaporate
- TB I think patients will be worried. The message is about who is contracted to provide the service, not necessarily the cessation of service.
- The NHS has an obligation to provide a GP service. It might not be as convenient as walking to North Tawton surgery but provision will be made.
- TB There has to be universal coverage.
- LL It is going to affect the older people who do not have transport.
- Q Why is North Tawton not viable?
- A There are Historical elements. Not all of our practices are funded at the same level. North Tawton is funded at the 3rd lowest in Devon historically; however, the main issue is premises. There is no proper funding stream and what there is will not support the building that North Tawton require for a new Primary Care premises. The issues we have been concerned about are that GP Practices are subject to the CQC Inspection and we acknowledge the current building is not fit for purpose.
- Q how is it that the Okehampton Medical Centre could obtain the money for a new building but WHG are finding it difficult?
- A They had a level of funding/a pot of money to support the rent allocation. There was an allocation of money from many years ago. North Tawton has a pot of money which is £35K approximately annually to support new premises but this doesn't rentalise or support the sort of building that you need.
- Q Can you rent the new building that is being built?
- A it would be the same. Just to put into context; the building in Chulmleigh space wise was built according to the rules and regulations for 6500 patients is 800 square metres so if you scale that back you need a building of a third of that size. What is the rental cost, the building cost, the mortgage cost on a building of this size?
- The environment we are working in at present is so unstable.
- Q If North Tawton does go surely the other 4 Practices do not have the capacity to take on the patients?
- A It is difficult; some of the Practices are still within WHG. We have capacity at Winkleigh and Okement but cannot speak for the other Practices.
- We would like to emphasise that if there are no longer services at North Tawton, patients can decide where they want to register locally.

Q What is the percentage patient per head? What is the difference between North Tawton and the other surgeries? What is the dynamic on contracts?

WS Rural Practices often have a dispensary which supports the surgery. Without the dispensary at Chulmleigh the service would be halved. The difference is around 10% less at North Tawton but it doesn't dispense. Stand alone doesn't achieve critical viability which is why we were keen on the PharMedic model.

Q One of the great disappointments is the healthcare we have been getting has been excellent and a good service has been provided and you have been working very hard to try and find a solution.

TB We could be here saying that actually we could reduce the number of GP sessions but actually that completely undermines the quality of service and trying to improve things. We have looked very carefully at that model and we would be shrinking the care provided to fit the money rather than the appropriate level of care for patients.

PPG The blame obviously sits with NHSE and we are certainly not going to stand by and let this happen. It is not acceptable.

PPG members need support of the Town Council and need to make things happen but not frighten the patients.

WS The PharMedic model was a solution for North Tawton and would have been great. It was a solution not only for North Tawton but for the small rural practices. These are the holes that keep popping up with NHS Primary Care Provision.

The model would have been co-locating. We would have had a building with the Pharmacy and Medical Services within it. We spoke to Mike Barbour about this and he was also keen.

TB We were prepared to go and borrow money for the extra rental and could have made things work. The planning application and business case was put forward but rejected. The new build is now beyond the scope of the funding envelope which is available.

WHG will keep patients informed going forward and advised that they are here for 6 months and will continue to provide care. There will be no reduction in the service provided during this 6 month period.

Q Is this going to be publicised in the local magazines such as the NT Roundabout.

A Yes.

WHG confirmed that there is no reason for patients to register elsewhere. This is a contractual aspect to how this service is being provided. WHG will be working with NHSE to find a solution and will do their best to cater for all patients. At this stage business is as normal.

TB thanked Maggie Samuel for all of her hard work as Chair of the PPG and advised that WHG are looking for a new chairperson as MS is stepping down from this role next month.