

**Notes of the Inaugural Meeting of the Deer Park Surgery Working Party
Held on Wednesday 26 October 2016 at 5:15pm
In Room G24, Woodgreen, Witney**

PRESENT

Councillors: Mr A C Beaney, Mr J C Cooper, Mrs J M Doughty, Mr H B Eaglestone,
Mr D S T Enright and Mr P D Kelland

Officers: Christine Gore, Bill Wragge and Paul Cracknell

1. ELECTION OF CHAIRMAN

It was **Agreed** that Mr A C Beaney be elected as Chairman of the Working Party.

2. APPOINTMENT OF VICE-CHAIRMAN

It was **Agreed** that Mr D S T Enright be appointed as Vice-Chairman of the Working Party.

3. APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

Apologies for absence were received from Mrs L E C Little. Mr Eaglestone attended in her stead and it was noted that he was to join the Working Party at future meetings as the local representative.

4. BACKGROUND TO THE MANAGEMENT PLAN

The Working Party received a briefing paper which outlined the background to the Working Party.

Catherine Mountford, Director of Governance at the Oxfordshire Clinical Commissioning Group (CCG), attended the meeting and presented a briefing paper summarising the process through which services are commissioned, explaining how the current position in respect of the Deer Park Surgery had been reached and outlining the future action that the CCG intended to take.

Ms Mountford also presented a list of frequently asked questions and a briefing note that had been sent to the local press for publication in advance of a public meeting that was to take place later in the day.

Members considered these documents and the information provided.

Mrs Doughty questioned whether the tendering process had been restricted to local practices only. In response, Ms Mountford confirmed that initial tenders had been sought on a national basis in accordance with the established guidelines. Mrs Doughty also expressed her concern over the lack of consultation over the closure. Ms Mountford advised that the matter had

been raised with the Chairman of the Health Overview and Scrutiny Committee.

Members noted that the CCG had concluded that the clinical model offered (which differed from the current service at the practice) did not give adequate assurance that they would be able to consistently provide the services to the standard required. Mr Kelland questioned how the arrangements proposed differed from those currently in operation and Ms Mountford explained that these details were subject to commercial confidentiality.

Mr Beaney enquired whether the service provider had appealed against the decision not to award the contract. Ms Mountford indicated that she was not aware of an appeal being lodged but undertook to check on this aspect. In response to a further question from Mr Beaney, she confirmed that to consider another procurement process there would have to be something substantially different that the CCG had not previously been aware of and that could be incorporated in the guidance within which they work.

Members of the Working Party indicated that significant residential expansion was envisaged to take place in that quadrant of the town and questioned how far this had been taken into account by the CCG when reaching its decision. Mr Kelland questioned whether there was any way in which the surgery could be retained in order to address this projected increase in population.

The Strategic Director indicated that the health service did not have a strong history of engaging with the strategic planning process, although this had improved somewhat in recent months.

Mr Enright questioned how the CCG dealt with the need to accommodate new residents and Ms Mountford advised that requirements were assessed as new developments were built out.

If the current operators were unable to put forward a satisfactory proposal, Mr Enright questioned whether existing practices would be able to provide a satellite service at Deer Park. He indicated that he had heard suggestions of concerns over significant commercial risk associated with the practice and questioned whether this related to the specific premises. In response, Ms Mountford advised that there was no financial risk in relation to the premises as associated costs were met as part of the contract on the basis of a DV's valuation.

Mrs Doughty expressed concern that a significant number of patients would fail to register and thus place unnecessary pressure on accident and Emergency services. In response, Ms Mountford advised that efforts were being made to ensure an appropriate dispersal of the patient list and that the existing contract had been extended to allow time to do so. The current service provider was also committed to ensuring a successful handover.

In response to questions regarding catchment areas, Ms Mountford advised that practice boundaries frequently overlapped and confirmed that the CCG

was committed to ensuring services were available to all. Further, the CCG was satisfied that the necessary arrangements to ensure continuity of service could be achieved.

Mr Enright suggested that, in future, different service models would be employed with more patients being seen by nurse practitioners rather than GPs. He enquired whether local surgeries or other providers could be invited to reconsider providing satellite facilities at Deer Park and expressed the opinion that practice sizes would increase through amalgamation or federation.

The Council's Health Policy Officer advised that recruitment of GPs was difficult nationally and that triage arrangements could allow for a more effective use of resources.

Mr Beaney questioned whether existing surgeries could close admission to their patient lists. Ms Mountford advised that this was only possible with the consent of the CCG and confirmed that discussions were on-going with existing practices regarding dispersal of the Deer Park list. Mr Enright indicated that some patients had been told that existing lists were full. In response, Ms Mountford explained that the contract with Deer Park had been extended to allow other practices time to make the necessary arrangements to absorb additional patients. Existing Deer Park patients would continue to be served by that practice and had been advised not to seek to register elsewhere at this stage. Further information as to their options would be provided at a later stage.

Mr Cooper questioned whether the Council could provide some form of financial assistance, for example by way of rate relief, to enhance the viability of the Deer Park Practice. The Strategic Director undertook to explore this suggestion further.

Mr Beaney suggested that, if a re-procurement process was unlikely, the Working Group should concentrate on the possibility of the Deer Park surgery being absorbed and operated by an existing practice or, as a last resort, ensuring adequate arrangements were in place for the dispersal of their list.

Members expressed a desire to meet with representatives of the Patients Forum and indicated that any problems encountered would be referred to the CCG

Mr Enright emphasised the importance of ensuring that arrangements were put in place to assist those most vulnerable patients. Ms Mountford concurred, indicating that there could well be a need for individual transfers arrangements to be made in some cases. It was suggested that Citizens Advice Oxfordshire might be able to help in this respect and officers undertook to provide the necessary contact details.

It was **AGREED** that arrangements be made to meet with representatives of the Deer Park Patients Forum and representatives of the existing local practices to discuss the matter further.

6. FUTURE MEETINGS

The Working Party **AGREED** that, if possible, arrangements be made for a meeting with representatives of the Deer Park Patients Forum to be held the following week.

The meeting closed at 6.15pm

**Notes of the Meeting of the Deer Park Surgery Working Party
Held on Wednesday 9 November 2016 at 4:00pm
In Committee Room 2, Council Offices, Woodgreen, Witney**

PRESENT

Councillors: Mr A C Beaney, (Chairman) Mr D S T Enright (Vice-Chairman)
Mr J C Cooper, Mrs J M Doughty, Mr H B Eaglestone, Mr P D Kelland
and Mrs L E C Little

Also in Attendance: Mrs J C Baker and Mr P J Handley (WODC)
Mrs Brenda Churchill and Ms Jane Southworth (Deer Park
Medical Practice Patients Forum)

Officers: Christine Gore, Diana Shelton, Bill Wragge and Paul Cracknell

2. NOTES OF THE MEETING HED ON 26 OCTOBER 2016

The Working Party received the notes of the meeting held on 26 October 2016

2. APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

There were no apologies for absence or temporary appointments.

4. DEER PARK MEDICAL PRACTICE PATIENTS FORUM

The Working Party received a submission prepared by the Deer Park Medical Practice Patients Forum, together with further correspondence received from the Forum, copies of which had been circulated to Members by email.

Mrs Churchill then addressed the meeting and made reference to the document entitled 'Frequently Asked Questions' produced by the Oxfordshire Clinical Commissioning Group.

Mrs Churchill indicated that she believed that a number of the statements made in that document were misleading. She indicated that, rather than giving a three month period for applications and assessment, the tender was only open for a five week period from 3 March to 11 April. Mrs Churchill advised that Virgincare had submitted a Nurse led Clinical Model and that, whilst two expressions of interest had been forthcoming, this was the only application that had been submitted. She suggested that, had the tender been open for a full three month period, a greater level of interest and response could have been engendered.

Mrs Churchill indicated that there had only been one meeting between the CCG and other GP practices in the town and that none had expressed an interest in bidding for the contract.

Mrs Churchill stressed that the contract had been offered at a 24% reduction on the previous level and advised that, prior to being let on the current

APMS contract, the Deer Park practice had operated under a GMS contract. She contended that the practice did not have to continue to operate on an APMS basis.

Mrs Churchill indicated that, whilst NHS England had been made aware of future development proposals through the planning consultation process, the proposed closure of the surgery failed to take account of impending and projected growth in that quadrant of the town. Further, it did not recognise the lack of public transport serving that area.

Mrs Churchill indicated that she believed that the clinical model proposed by Virgincare would provide an appropriate level of care for patients enabling the surgery to remain open. She expressed concern that the CCG was only now negotiating with other local practices as to their ability to absorb a significant increase in the number of patients having already taken the decision to close the Deer Park practice. The Patient Forum believed that a full impact assessment should have been carried out prior to any decision on the future of the Deer Park practice.

Mrs Churchill expressed concern that arrangements were to be made to allocate vulnerable patients to particular alternative practices. This would result in a loss of patient choice and gave rise to concerns that patients' confidential records would be made available to the CCG without their consent.

All the Patient Participation Groups in the town opposed the closure, suggesting that the dispersal of the Deer Park patient list would result in further delays in securing appointments.

Mrs Churchill indicated that the Deer Park group was not prepared to assist in placing vulnerable patients unless it became certain that the surgery was to close. She reiterated the concern over the lack of public transport and advised that the Town Council had invited the CCG to attend a working party meeting with a view to securing their assistance in providing buses.

She advised that those patients living in villages were not receiving any practical assistance having been advised of the alternative provision available to them. The alternative surgeries were not served by public transport and were located some distance away. An Environmental Health Impact Survey prior to a decision to close the existing facility would have highlighted this fact.

Mrs Churchill indicated that the CCG had failed to keep patients advised of the plans, the only information that it had made available being through the local press and public meetings. Whilst patients had a right to move to another practice, at present, the remaining surgeries in the town were discouraging them from doing so. Mrs Churchill saw this as a negotiating stance by the other practices in the town.

Mrs Churchill indicated that she had been advised that the patient list at the Deer Park practice was weighted towards the upper age range with some 65.5% of the patients being over 65 years of age.

Mrs Churchill advised that the Forum intended to attend the next meeting of the Oxfordshire Joint Health Overview and Scrutiny Committee on 17 November to ask that the proposals be treated as a substantial change to the level of service and extend the contract for a 12 month period to allow sufficient time for alternative provision to be put in place. To pursue a closure by the end of March 2017 would be to do so with indecent haste. A 12 month extension would allow for a full three month tender period with the hope that a greater level of interest could be secured.

In response to a question from the Chairman, Mrs Churchill advised that representatives of Virgincare had declined to meet with the Forum.

Mr Beaney explained that the CCG had advised that it would be unwilling to re-tender the contract unless there was any substantial change in circumstances.

Mr Enright suggested that the Working Group advise the Joint Health Overview and Scrutiny Committee that it considered the proposed closure should be treated as a substantial change in the level of service provision.

Mrs Churchill questioned why the CCG had concluded that a Nurse led Clinical Model was inappropriate given that this appeared to be the general direction in which practices were moving nationally.

Mr Handley expressed his support for a 12 month extension to the contract. By that time the Local Plan would have been finalised and the projected levels of development around the town would be more certain. He suggested that representatives of the other surgeries in the town should be invited to meet with the Working Party to discuss their capacity to absorb the Deer Park patient list. Mr Handley also recalled that the Council had previously applied for Judicial Review of an earlier decision regarding health service provision.

Mr Beaney advised that the Working Party had already indicated its wish to meet with representatives of the other Witney surgeries and that, at the previous meeting, representatives of the CCG had advised that the need to provide additional primary care facilities was assessed not on the basis of projected levels of development but as new developments were built out.

Mrs Baker advised that the Local Member of Parliament was also keen to meet with all parties involved but, in considering the specific issue of Deer Park, it was necessary to do so in light of the emerging Transformation Programme. It was important to know how this process would be delivered and what monitoring arrangements would be put in place. Mr Courts was keen to look at the whole transformation process.

Mrs Doughty advised that she had been in touch with other Members of the Joint Health Overview and Scrutiny Committee who intended to seek to have this matter considered as a substantial change to service provision. She also noted that the question of Judicial Review had been raised at the public meeting held at the Corn Exchange.

Ms Southworth suggested that, in view of the time constraints and potential cost, the District Council would be best placed to seek an application for Judicial Review based upon the lack of consultation with patients and patient groups. Whilst the CCG maintained that the proposed closure did not represent a substantial change to service provision, the Patient Forum considered that it did. If a 12 month extension to the contract was granted it would offer an opportunity for full consultation on and assessment of the impact of a potential closure.

Mr Cooper indicated that questions remained around the capability of the remaining practices to absorb the Deer Park list and the discrepancy between the age profiles suggested by the CCG and the Patient Forum.

Ms Southworth reiterated the concerns previously expressed in relation to access to patient's records and Mrs Churchill those regarding the impact upon the remaining practices.

Mrs Little suggested that the Working Group should seek clarification from the CCG over the questions raised with regard to age profile, the treatment of patient records and the length of the tender period.

Mrs Churchill doubted the financial efficiency of expanding existing practices to meet the demand generated by a closure elsewhere and questioned the CCG's decision to reject a nurse based clinical model that had been found to be acceptable elsewhere.

Mrs Doughty indicated that local surgeries had already been unsuccessful in seeking to recruit doctors and questioned whether they would be able to do so to meet this increased demand. Mr Kelland noted that surgeries were closing across the country due to under funding and drew attention to recent press reports highlighting the difficulties in recruiting GP's.

Mr Handley expressed concern over the level of funding made available to the universities for research, indicating that he would prefer to see this directed towards primary care.

Mrs Doughty suggested that the Working Party should investigate the impact of the recent closure of a surgery in Bicester and explore ways in which a presence at Deer Park could be maintained.

Mrs Churchill expressed her disappointment at the lack of support provided by Healthwatch and Ms Southworth made reference to a response to a Freedom of Information request received by the Forum in which it was indicated that:-

'In the case of the Deer Park Medical Centre, it was evident that the change was not substantial and the toolkit process need not apply. However, the OCCG was asked to complete the toolkit assessment to outline the key elements of the preferred option, once it had been identified'

Miss Southworth indicated that the determining factor as to whether or not a proposal was a substantial change was the impact on patients and questioned whether the substantial change toolkit assessment had been undertaken.

The Chairman confirmed that the Working Party would make appropriate enquiries.

Mr Enright indicated that it was not for the Council to initiate an application for Judicial Review and the Working Party acknowledged that the most appropriate form of challenge was referral to the Secretary of State through the Joint Health Overview and Scrutiny Committee.

Mr Cooper noted that both Bicester and Witney were designated development areas and drew attention to various development proposals in the vicinity of Deer Park. He questioned the CCG's logic in failing to take account of impending development and enquired whether the Council could pursue this through Parliamentary channels.

Mrs Baker suggested that Members concentrate on the immediate issue of the Deer Park Surgery. She noted that the closure of a surgery in Bicester was a decision taken by the doctors operating the practice in question, not a result of a re-tendering process. In that instance, the practice had merged with another. She stressed that the Deer Park practice was a commercial operation operating under a fixed term APMS contract.

(Mr Kelland left the meeting at this juncture)

Mrs Baker questioned whether it would be possible for the Deer Park surgery to operate as a satellite to one of the existing practices.

Mr Enright indicated that all GP practices operated on a commercial basis and questioned why the other practices had not expressed an interest in taking it on. He too wished to see the surgery remain open as a satellite to an existing practice or federation.

It was **AGREED:-**

- (a) that the Oxfordshire Joint Health Overview and Scrutiny Committee be advised that the Working Party considers the proposed closure of the Deer Park Medical Practice as a substantial change in the level of service provision and, in consequence, should be treated by the Committee as such.

- (b) that Officers seek clarification from the Oxfordshire Clinical Commissioning Group with regard to the questions raised by the Patient Forum in relation to the age profile of patients, the treatment of patient records and the length of the tender period.

The Chairman thanked Mrs Churchill and Ms Southworth for their attendance at the meeting and for their work in preparing the Forum's report.

The Strategic Director reminded Members that, at the last meeting Members had enquired whether the Council could provide some form of financial assistance, for example by way of rate relief, to enhance the viability of the Deer Park Practice.

Whilst there did not appear to be any legal impediment to doing so, enquiries of the CCG had revealed that to do so would be unlikely to assist in retaining the surgery either with Virgin Care or by another practice as business rates are actually paid by the CCG via a reimbursement mechanism.

6. FUTURE MEETINGS

The Working Party **AGREED** that representatives of the three remaining GP practices in Witney be invited to attend the next meeting of the Working Party to discuss their capacity to absorb the Deer Park patient list.

The meeting closed at 5.30pm