

## Response to questions about Deer Park Medical Centre for Board January 2017

	Questions	Response
<b>1</b>	<p><b>Capacity in local practices to take Deer Park patients</b></p> <p>Where will the present four thousand patients at the Deer Park Medical Centre go as the Windrush and Nuffield Surgeries in Witney are already overflowing?</p> <p>Can you please advise what alternative services you will be supplying in Witney to cover the closure of the Deer Park Medical centre? The existing Health centres in Witney are already over subscribed and waiting lists for routine appointments are far too long now and closure of this facility will only put additional pressure on the other centres. Also with the increased housing going up with in the area additional resources are required not closures.</p> <p>With often long waiting times to get an appointment at the remaining three Doctors Surgeries in Witney, what is the sense in closing Deer Park Surgery?</p> <p>How can you close Deer Park when there are 4-5 weeks wait to see a Dr at the Windrush and there is all the house building going on round Witney? We need more medical practices, not less.</p> <p>I am a patient at Deer Park surgery. My many friends who attend the other three surgeries in Witney tell me that they have to wait longer and longer for a non- emergency appointment with a doctor already. The addition of more patients from the Deer Park practice alongside all the new patients from the houses to be built off Deer Park Road is likely to put the provision at the other practices under enormous</p>	<p>The CCG has been working closely with local practices in order that they are able to take on the Deer Park patients, in particular Windrush Medical Partnership, The Nuffield Health Centre and Cogges Surgery as it is anticipated that the majority of patients currently registered with Deer Park Medical Centre will transfer to these practices. These discussions began in July 2016 as part of the risk assessment process related to the Deer Park procurement and continued after the decision was made not to award the contract to Virgin Care. Early in September, a meeting was held with the partners and practice managers of the three Witney practices to discuss in detail their capacity to take on large numbers of new patients and what support they might need from the CCG to do so. All the practices confirmed that they wished to grow their lists of patients and provided information on their preferred timescales for the list dispersal and the additional resources required. The key messages from the practices were that they needed time to prepare for the new patients and that they were likely to need additional clinical and administrative support during the period when new patients were registering from Deer Park. The practices have continued to meet regularly with the CCG over the past 6 months to ensure that they are prepared to take the patients.</p> <p>The CCG is committed to supporting the Witney practices to</p>

strain. How do you propose to combat this as I expect it will mean more people asking for emergency appointments as the only way to see a doctor?

With the ever growing population of Witney where on earth do you think the Patients of Deer Park Medical Centre all 4.000 plus are going to go. Given that the remaining Surgeries are already stretched to the limit. No drop-ins no readily available appointment lucky if you can see a GP within a 2 week time scale. This is an absolute disgrace if the closure goes ahead. We need this surgery to remain open for the health and wellbeing of the large amount of patients that attend this Practice. This being possibly the Very Best Medical Centre that we have in Witney. Leave Deer Park Medical Centre alone to do the amazing work that it already does and has been doing for a long time. We need this surgery.

remain stable as the new patients transfer to them and has put in place the following:

- Agreed a 5-month extension to the Virgin Care contract for Deer Park to allow neighbouring practices sufficient time to recruit staff and make other preparations for receiving the Deer Park patients.
- Developed an Impact Assessment and Action Plan with all the Witney practices and Virgin Care and met regularly to monitor progress.
- Commissioned additional GP and Nurse appointments in the Witney Neighbourhood Hub from Principal Medical Limited (a local federation of GPs) to relieve the pressure on practice appointments when patients from Deer Park begin to register with their new practices.
- Provided additional funds to the three Witney practices to enable them to take on extra reception/administrative staff to manage the registration process efficiently.
- Provided further funding to practices to cover additional consultations with GPs, nurses, emergency care practitioners to both existing and new patients.

In addition to the three Witney practices, there are 6 other practices with open lists covering the areas where Deer Park patients live so it is not anticipated that there will be any shortfall in available places.

Waiting times for a routine GP appointment have varied greatly recently, however the model of care in GP practices is changing and now includes a range of alternative clinicians including Nurse Practitioners, Emergency Care Practitioners, Physiotherapists and clinical pharmacists.

		<p>This enables practices to be responsive to patient requests to see a clinician whilst ensuring that the particular skills and knowledge of GPs is focused on patients who have the most need of medical care. Patients preferring to see a named GP rather than another suitably-qualified clinician for non-urgent conditions will be accommodated, but may experience longer waits.</p>
2	<p><b>Re. future population growth</b></p> <p>Given the large amount of new homes that have been given planning permission in West Witney, and the construction of the Richmond Retirement Village - a development that in itself will have an impact on the existing medical centre, how do you propose to care for the patients of West Witney if the Deer Park medical centre is closed? The construction of these properties alone would stretch the existing medical centre. Simply stating that the other medical centres in Witney will have capacity is a ludicrous and ill thought out suggestion that clearly hasn't been investigated properly. Existing patients of the Windrush and Cogges medical centres already face long waits for routine appointments – they can't recruit the GPs they need at the moment, so why would an influx of Deerpark patients change this?</p> <p>Also, in the near future, more houses are going to be built in the catchment area of Deer Park, so the need for the surgery will be even greater. We keep being told we have an ageing population, so is it sensible for elderly people to be forced to travel into town when a doctor's surgery could be on their doorstep?</p> <p>How can you close Deer Park when there are 4-5 weeks wait to see a Dr at the Windrush and there is all the house building going on</p>	<p>The CCG is aware of the housing growth within West Witney and has met with the West Oxfordshire District council to discuss the impact of planned housing developments on primary care services. The CCG is also carefully monitoring the growth in the list size of the existing Witney practices and discussing their ability to absorb the new population over the time period expected.</p> <p>More information on the work we are doing around housing growth can be found at</p> <p><a href="http://www.oxfordshireccg.nhs.uk/wp-content/uploads/2017/02/2017.02.28-Paper-6-Primary-Care-Infrastructure.pdf">http://www.oxfordshireccg.nhs.uk/wp-content/uploads/2017/02/2017.02.28-Paper-6-Primary-Care-Infrastructure.pdf</a></p>

round Witney? We need more medical practices, not less.

The question I would like answered is how you think the existing doctor surgeries in Witney will cope with the extra demand? Witney is a growing town with more housing estates being built increasing the number of patients that will need to use the surgeries. If you close Deer Park there will definitely be a shortage of places causing bigger delays and a change of increased numbers going to A&E instead. My 91 year old grandmother already has to wait 3 weeks for an appointment at Windrush medical centre. This will get even worse if you add extra patients to their books. This whole thought process is not very well thought out and is very much looking inside the box rather than outside. With the amount of new houses being built in Witney you will end up needing to build new doctor surgery in the not too distant future which will be more expensive than keeping the existing one open.

Given that Deer Park currently caters for 4,000+ patients, that housing developments in the area could generate at least a further 1,100 + , and that other Witney Practices are already overstretched, how does the CCG justify its contention that the closure of Deer Park does not represent 'a substantial change' in medical provision within the Witney area?

Closing the Deer Park GP practice will immediately and significantly increase the patient lists in surrounding surgeries..

Looking forward, the current [plan](#) for Witney is to build at least 3,550 houses in the period 2011-2029, of which 1,569 in West Witney, assume 2,500 new residents. 1,000 house will be built in the short term in West Witney

	<p>a. What is the plan to provide GE services to this large group of new residents in the area currently served by the Deer Park surgery?</p> <p>In view of the fact that more properties are being built in Witney, one development in the immediate catchment area of Deer Park Medical Centre, what reassurance can the CCG provide that the current GP Surgeries can take the extra patients? Or more to the point what is the shortfall.</p> <p>I have read the literature that is available and spoken to James Mills on this topic and asked for Robert Courts support in doing all they can to keep this centre open.</p> <p>There have been new houses built not far from this practice recently and for some that moved having this medical facility so close was a deciding factor as they could walk or drive without being in the centre of Witney.</p> <p>I have heard nothing but good things about Deer Park Medical Practice and with the ever growing Witney and surrounding area it would be really short sighted to close it. A bit like Witney losing its rail service. You will look back and realise you made a mistake.</p>	
3	<p><b>Re: GP practice profit</b></p> <p>'Is it right that so many areas of the NHS are being privately run and when these agencies fail to make a profit, they are closed down. Thus further depriving local residents of an accessible health centre and adversely affecting the remaining GP practices?'</p> <p>Please could you tell me why profit has been put before the needs of the community and the future welfare of new residents of Witney?</p>	<p>All GP practices are independent businesses, mainly partnerships of GPs, but also limited companies and social enterprises. Clinical Commissioning Groups (CCGs) are not able to employ GPs to provide general medical services themselves, so commissioning from these businesses is the only option. When commissioning new contracts for medical services, CCGs are required to carry out rigorous</p>

	<p>The town is growing and to close an important medical centre will only cause problems in the future.</p>	<p>assessments of an organisation's ability to deliver the services in a safe, high quality, affordable and sustainable way.</p> <p>The CCG is not otherwise able to comment on the profitability of organisations providing GP services.</p>
<p><b>4</b></p>	<p><b>Re: Access</b>  Issues relating to access for disabled people or those with mobility problems  There are new homes being built at the end of the Deer Park estate. There is a new retirement village opposite this new housing development. Where will all of these potential patients find a local surgery? There are several GP surgeries in and around Witney. The parking spaces do not allow for an influx of displaced people from the Deer Park area. Where will they park? The alternative places for patients to park are in pay car parking, or the multi storey car park. This is just not feasible for the elderly, traumatised, anxious, generally ill people. Disabled persons would be unable to walk far enough to use the surgery. I believe that this is discriminatory. What will happen to these people? It would also be unsafe for vulnerable people to be using public car parks in the dark. Speaking for myself; I used to use the physio unit at Witney hospital. There are so few parking places that even with a blue badge I had to be there for 7.40 am to park on the site and sit in my car and wait until my appointment. There were no alternatives for me because I couldn't walk from the public car parks. I eventually gave up trying to get my knees better. I will not be able to use any of the Witney surgeries because of the parking situation. I can't use the Burford surgery because I can't cope with driving along the busy A40. I have PTSD and injuries sustained in a car crash. So what will happen to people like me? The irony is that Deer Park Med Centre has ample parking</p>	<p>The practices in Witney all have parking areas designated for disabled patients outside their premises. In addition, the large multi-storey car park which is just across the road from both the Windrush and Nuffield practices is free to park, has designated disabled spaces on the lower levels for patients with Blue Badges and also has lifts to the upper levels. Cogges Surgery also has car parking available outside the surgery and across the road by the shops. The Witney town centre practices are on good bus routes and there is a local Volunteer Link service which provides low cost transport to patients who have mobility problems.</p> <p>The Witney town practices all have patients who are disabled and/or have mobility problems, but the CCG is not aware of any issues relating to accessibility being raised by patients.</p>

	<p>right beside the door and a pharmacy opposite. This isn't a case of "if it isn't broke don't fix it" This is more a case of "it works, let's break it". So where are the disadvantaged folk supposed to find a usable surgery? The A&amp;E units at the hospitals are overrun with folk turning up for things that could have been treated by a GP. This will be the only way that many people will be able to get treatment. Things will get a hell of a lot worse if this GP surgery closes.</p>	
<p><b>5.</b></p>	<p><b>Practices accepting patients</b> I've been told that the Windrush Health Centre is no longer accepting new patients. So that leaves one health centre The Nuffield and one up on Cogges for patients to register at.</p>	<p>All Witney practices are currently accepting new patient registrations but patients will need to live in the practice boundary in order to be able to register with a practice.</p> <p>If a disproportionate number of patients wish to join one particular practice, the CCG would consider a temporary list closure of that practice. In the event that a patient was not able to register at their first choice practice because of this, they would of course have the option of registering in the future when the list became open again.</p>
<p><b>6</b></p>	<p><b>Re: Reasons for not awarding the contract</b> At the meeting of WODC Economic &amp; Social Overview &amp; Scrutiny Committee held on 6th October 2016, Ms Dandridge representing OCCG, repeatedly refused to explain why the bid for a new contract had not been taken up 'for reasons of commercial confidentiality'. As a patient registered at Deer Park who will be deeply affected by the proposed closure, I hereby request a full and transparent explanation of <b>why</b> a new contract was not awarded</p>	<p>The bid submitted was evaluated but did not meet the required standard for the contract to be awarded. The clinical model offered (which differs from the current service supplied by Virgin at the practice) did not give us assurance that they would be able to consistently provide the services to the standard required. The existing APMS contract with Virgin Care had been for 5 years and extended by a year to November 2016; this had then been further extended to 31 March 2017. Both these extensions have incurred additional cost over and above the contract. As it was a contract that had come to an end we are required to retender not just</p>

		renew with the incumbent provider.
7	<p><b>Re: Funding</b></p> <p>Please explain why, when the CCG received £4 million from the Prime Minister's Challenge Fund to support primary care, and total funding for NHS provision in Oxfordshire has increased by 8%, reduction in funding for the Deer Park practice contract is 13% per patient, on top of a substantial reduction in the weighted list, resulting in a total reduction in the contract value of 23-24% (figures from Minutes of WODC Economic &amp; Social Overview &amp; Scrutiny Committee, 06.10.16)</p>	<p>The money received from the Prime Ministers Challenge Fund was non recurrent funding for specific services that were commissioned from the Federations within Oxfordshire. There is new national funding now available for extending GP access and the CCG has also invested £4M into ensuring the sustainability of primary care. The use of this money has bene decided locally.</p> <p>Virgin Care had a contract for Deer Park from 2010 to 2015, with an option to extend for up to two years beyond that date. The value of the contract in 2015 was £452,461.</p> <p>The proposed value of the contract in the ITT issued in March 2016 was £442,626, a reduction of 2%. This funding level is still 13% higher than for any other practice in Oxfordshire.</p> <p>A 1-year contract extension was agreed at a significantly higher price for 2015-16 as a short-term measure to cover the period when the contract would be put out to tender. This temporarily raised the value of the contract to £547,782 in recognition of the risks to Virgin Care of providing the service over the procurement period.</p> <p>The CCG believes that comparing the ITT contract value to the inflated contract value during the extension period gives a misleading picture of the impact of changes in funding of the contract.</p>



<p><b>8</b></p>	<p><b>Re: Saving money</b>  Please could the CCG provide a costs analysis of the additional resources it will have to find to ensure that other Practices in the Witney area are able to accommodate the dispersed Deer Park patients? How much money does it estimate will be saved to the NHS by closing Deer Park, once these dispersal costs are taken into account?</p> <p>Has anyone costed the public investment required to (presumably) set up a new surgery vs. maintaining the Deer Park surgery in place?</p>	<p>The CCG had no intention of closing Deer Park Medical Centre and went out to procurement fully expecting to find a provider. However this was not the case. The CCG could not find a provider and as such had no option but to close the practice.</p> <p>Closing a practice does not save money in the short term as all newly registered patients will attract a premium in the first year. Money has also invested in extending the contract until March 2017 in order to ensure the safe dispersal of patients.</p> <p>It has been agreed that the local GP Federation PML (Principal Medical Limited), will be commissioned to provide support in-kind in the form of additional home visits and nurse appointments at the local neighbourhood hub in Witney for patients of Windrush, Nuffield and Cogges.</p> <p>As funding follows the patients in primary care, the payments that would have been made to Deer Park will transfer to the practices receiving the patients. Where large numbers of patients transfer to a practice, that practice also receives additional funding via an adjustment in the payment formula in recognition of the additional workload due to high list turnover. It is not possible to quantify this payment in advance of patients transferring. Other types of support are still under discussion with the practices.</p>
	<p><b>Re: Consultation</b>  Will any of these questions have any effect - or are we simply wasting our time on a so-called "consultation" process?</p>	<p>We have not stated that this is part of a consultation process.</p>

**Re Role of Councillors**

It is clear that county councils have very little autonomy in relation to either spending or raising of funds, and that they and local councils are bearing the brunt of an austerity programme that is cutting council budgets by unprecedented amounts. These cuts are profoundly affecting councils' abilities to deliver core social services that they are responsible for by legal mandate. We are seeing the affects of this radical programme of reform across every key sector of our society and economy, from health and education to housing, transport and the judiciary. The closure of deer park medical centre is a symptom of this.

My question is, what are you doing about it? Are you raising opposition in conjunction with other councils to this central-government led agenda? These reforms are not only drastically undermining the social fabric and social pact that has been in place since the Second World War, but undermining democratic governance as such. That 91p in every tax pound is allocated by central government means it doesn't really matter who we vote for locally as they have little power to implement the will of their constituents. Democratic accountability is thus fundamentally compromised. So, when are councillors going to start standing up and fighting this incredibly destructive, centrally imposed agenda?

The CCG is not able to answer this question which should be directed to local Councillors