

**REPORT ON PROPOSALS TO CLOSE NETHERAVON
SURGERY, AVON VALLEY PRACTICE**

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Wiltshire County Council
Patient and Public Involvement Group
Wessex Local Medical Committee
Mr. Michael Ancram MP

DATE February 2007

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SUMMARY

Background

Avon Valley Practice currently operates from three surgeries, in Upavon (main site), Netheravon (branch site) and Durrington (branch site).

The accommodation at the three sites varies hugely in size and facilities. Upavon has been recently extended and updated. The facilities there are excellent.

Netheravon has for the last 7 years, been identified as substandard by the Primary Care Trust.

Durrington surgery was purpose built in 1991, with allowance made at the time of design for extension.

Recent changes in legislation for Dispensing Practices have made it necessary to re-evaluate the infra-structure of the Practice.

Scope

This report lays out the current position at all three sites, looking at building, clinical, financial and staffing issues. It investigates possible impact of closing the Netheravon branch surgery and suggests some alternate arrangements for some of the services currently provided at that site. It considers ways to work with patients and the public on these alternatives to maintain and develop high quality health services for its registered population.

Conclusion

The conclusion drawn is that the building at Netheravon is substandard, to the extent that it should close and that the services delivered from there be maintained and successfully delivered in other ways. The proposals for a new surgery developed by Sarsen/Aster (landlords) are now financially untenable. There are extensive ways to work collaboratively with the patients and the public in order to deliver quality services now and in the future.

Recommendations

- 1. The Partners recommend that the surgery at Netheravon be closed.**
- 2. That the proposed new development of premises within the village, now being financially untenable, be abandoned.**
- 3. That the PCT support the Practice to establish other ways of delivering high quality health care to the patients currently registered at Netheravon branch surgery. These could include**
 - prescription delivery service**
 - working with LINK to establish a local transport support scheme**
 - to extend and alter Durrington surgery in order to cope with additional demand on clinical space and dispensing services**

TERMS OF REFERENCE

- AUTHOR:** Practice Manager at Avon Valley Practice managing all three current sites at Upavon, Netheravon and Durrington.
- COMMISSIONERS:** The report has been commissioned by the Partners of Avon Valley Practice and Wiltshire Primary Care Trust.
- OBJECTIVES:**
- To review and improve the quality and range of health care delivered to Netheravon patients.
 - To consider options for the re-provision of health services following the closure of the branch surgery.
 - To outline some possible alternative arrangements for delivery of those services currently delivered from that surgery.
 - To work collaboratively with patients and the public.
 - To make recommendations to the commissioners on how to minimise the disruption to patients, staff and community.
- SCOPE:**
- The report will consider the current Practice provision and resources from an estates, clinical, staffing, legal and financial perspective.
 - To evaluate several methods of providing high quality health care
 - To address obligations to meet Health and Safety and Disability Discrimination Act.
 - To work collaboratively with patients and the public.
- METHOD:**
- The report will establish the current position regarding estates and clinical provision. The following information will be evaluated:
- NHS Estates reports
 - patient demographic information
 - consultation data
 - Dispensing Services Quality Scheme Document
 - practice timetable and range of services offered.
 - transport
- It will draw conclusions from the evidence and make recommendations from those conclusions.
- REQUIRED BY:** The report is required by the commissioners by 6th February 2007.

1. INTRODUCTION TO THE PRACTICE

We are a dispensing practice working from a main site at Upavon and two branch sites at Netheravon and Durrington. We have 5839 registered patients as at November 2nd 2006. There are 3 whole-time equivalent (wte) Partners and a Flexible Career Scheme GP who works 6 sessions in the practice. We are a training practice and regularly have registrars and final year medical students in the Practice. We have two GP trainers amongst the Partners and our Flexible Career scheme GP also has an interest in training. Next year we will be receiving our first F2 doctors – doctors who are undertaking the final part of their general training. We take work experience students when space provides.

Other staff include 3 Practice Nurses – one for each site, 2 Health Care Assistants, a team of receptionists/dispensers for each site, an administrative team and a Practice Manager. In all, including GPs there are 26 staff across the 3 sites.

2. CURRENT PROVISION ACROSS THE THREE SITES

2.1 BUILDINGS

The Practice operates at present from 3 sites in Upavon, Netheravon and Durrington.

The distances between the sites are:



The sites run alongside the River Avon. An outline of the Practice area is attached to this document at Appendix 6. We have patients from Devizes, Alton Barnes and Collingbourne Kingston in the North; Shrewton, Orcheston and Winterbourne Stoke to the West; Newton Tony, Idmiston and Allington to the South and Shipton Bellinger in Hampshire, to the East. We serve a large percentage of the service families from Trenchard Lines and Netheravon camp and some from Bulford and Larkhill.

Upavon main site is open five days a week and is the administrative centre of the Practice. It has recently undergone a large extension and redevelopment to increase and improve clinical space and services for patients and also working conditions for staff. It now has:

- 4 consulting rooms
- A large waiting area
- Large treatment room, with separate sluice
- Staff/meeting room and kitchen
- Large Reception and Dispensary
- Disabled and separate able bodied cloakroom and has full disabled access, including parking and toilets

We provide an extensive range of services and are capable of extending the range available in the future. We dispense to the patients registered in Upavon and have a dispensary store which stocks the dispensaries at the other two sites. A separate car park has been built for patients with 9 parking spaces and a separate staff car park for 14 cars (double parked) The Upavon site serves 1675 patients

Durrington branch Surgery was purpose built 15 years ago and was redecorated 2 years ago. It comprises:

- 2 consulting rooms
- Health Visitor's room
- Reception and Dispensary
- Treatment room
- Small administration room
- Larger administration room off the waiting area.
- Disabled toilet as well as an able bodied cloakroom
- Waiting Room

It has disabled access and has dedicated off road car parking for 10 cars. The Durrington site serves 2588 patients. It is open five days a week and a full range of primary care services are delivered from the site.

Netheravon branch surgery was built by Kennet District Council in 1977 and the Practice rent this building from Sarsen Housing Association. It is a chalet bungalow style building with a converted flat upstairs, currently occupied by a local couple. It comprises:

- One consulting room
- Treatment room
- Small waiting area
- Small reception and dispensary
- Toilet

There is very limited disabled access and no disabled toilet facility. There is only one car parking space for staff and 3 on road parking spaces for patients.

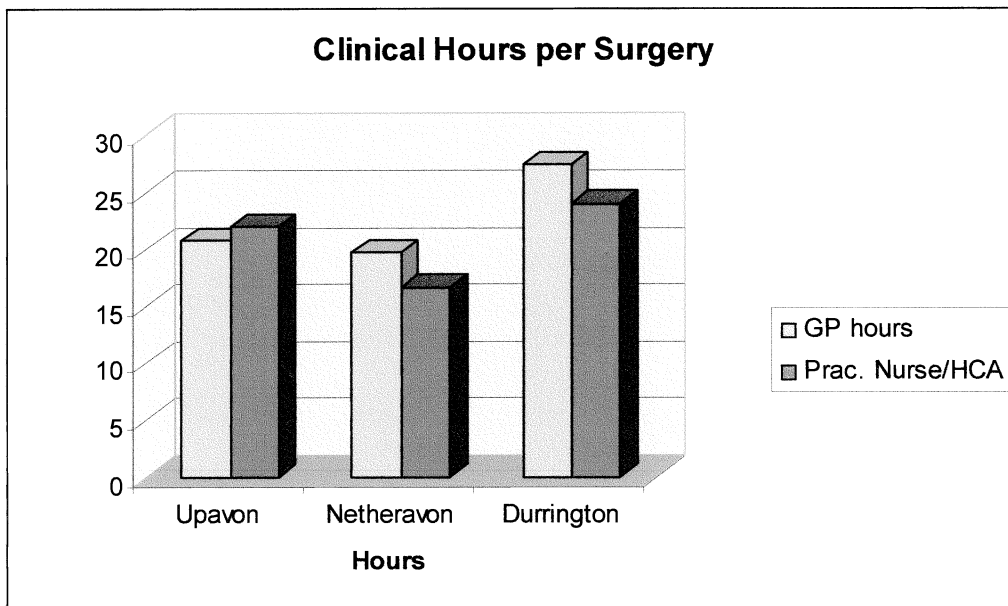
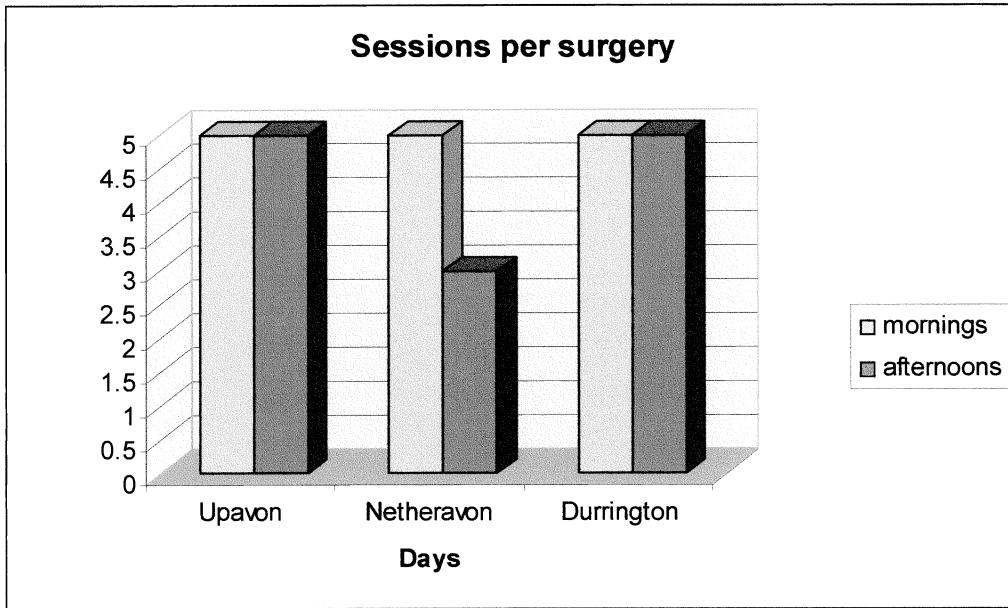
The Netheravon site serves 1557 patients. It is open five mornings and 3 afternoons a week.

A breakdown of Practice demographics are included at Appendix 1

Practice Branch Surgery Self-Assessment is included at Appendix 2

GP Premises Survey Form from 1999 is at Appendix 3

2.2 CLINICAL PROVISION



3 NETHERAVON BRANCH SURGERY

3.1 BUILDINGS

- Sound proofing and confidentiality at Netheravon is unacceptable and does not confirm to national regulations. A patient in the GP consulting room at the same time as a patient with the Practice Nurse, can overhear each others' consultations. Staff and patients in the Reception and Waiting area can overhear both conversations.

- There is a very cramped dispensary area, which limits the amount of stock that we can keep. We use a 'box system' for prescriptions that are awaiting items to complete prescriptions and these often have to be stacked 4 high. This has caused a recent significant event where a patient's medication fell into the box of another patient.
- There are structural problems with the building. A recent survey on behalf of the Primary Care Trust identified significant movement in the building. Sarsen Housing have recently undertaken an internal inspection of the building and highlighted that the electrical system needs replacing. The building is not DDA compliant.
- The building cannot be brought up to acceptable standards and some clinics are not available at this site and this restricts patient choice and access.
- We have had comments about the building in our survey of new patients. They have commented on the lack of space, poor parking and that they can be overheard.
- There is insufficient parking available.

3.2 CLINICAL ASPECTS

- The surgeries at Netheravon branch site are usually well attended. They are not always attended by Netheravon patients who often travel to other sites for their appointments. When patients express a preference to see a particular Doctor who is not next at that site at a preferred time or day, the patients travel to either Durrington or Upavon surgery to see them there. For a breakdown of appointment spread, see Appendix 2
- Patients requiring minor operations have to travel to Upavon or Durrington surgery as facilities in Netheravon do not allow us to do these there, the building not meeting minimum standards.
- The Psychological Therapy service runs from Upavon – there is no capacity to do this at Netheravon.
- Community Midwives and Health Visitors work at all sites. This is more difficult in Netheravon because of the lack of clinical space. The Midwifery team have for several years wished to cancel the Netheravon sessions, although thus far I have resisted.
- We are unable to use the site for our Registrars – there are not enough consulting rooms for this to happen. Similarly, we are unable to use sessions there for F2 Doctors. This in turn restricts the availability of regular G.Ps as they need to work at the same site as the registrar.

3.3 DISPENSARY

- Patients who live in Netheravon often collect their repeat medication from one of the other two surgeries if this is more convenient to them and we often move medication around the three sites to suit patients' requirements.
- We are limited by the size of the dispensary to having to hold a smaller range and quantity of stock in the dispensary. Patients will go to

another surgery to collect medication when Netheravon is unable to supply it because of smaller stock holding.

- Public transport to other sites runs hourly, but is well-timed to coincide with surgery sessions. The fact that patients choose to go to one of the other sites when we are unable to help them at Netheravon, confirms that this is not an insurmountable problem. A bus timetable at Appendix 5 shows that the journey from Netheravon to Upavon is 11 minutes and that a return bus leaves Upavon about 35 minutes later.

A general impression is that the surgery is used because it is there, but that most patients are prepared to travel when it is not open, or when they wish to access a service not available at Netheravon, or to see a specific G.P.

4 PARTICULAR ISSUES FOR WORKING ON THREE SITES

4.1 EQUIPMENT

- Any equipment required to deliver quality health care, has to be triplicated across the main and two branch sites. This limits the range of equipment that can be made available to patients. It also causes equivalence problems as it is often not possible to purchase three expensive pieces of equipment simultaneously and so subsequent purchases often have to be different models.

4.2 STAFF STRESSES

- The particular problems of operating a dispensing practice on three sites were brought into stark focus this summer. The Practice Manager, for the first time in 25 professional years' work, was forced to take time off work with stress-related illness.
- On her return to work, facilitated meetings with the Partners and the Local Medical Committee identified the enormous problems of effective communication in today's General Practice environment when operating three independent full-time surgeries. It was decided to look at the surgery workings and to see if we could identify ways of providing the same service, in different ways, for the benefit of patients and staff of the Practice.
- The staff at all three sites are all required to work as a very small team, within part of a whole. With the best will and highest standard of management in the world, this is far from perfect. The Practice has tried many models of working and the recent events and the possible loss of a valued member of staff brought us to the decision that this situation should be reviewed at the earliest possible opportunity.
- The Practice has an obligation to staff and patients, to recognise, address and correct working practices that exacerbate stress levels which compromises patient safety.

4.3 DISPENSING SERVICES QUALITY SCHEME

- In October 2006, the Dispensing Services Quality Scheme (DSQS) was introduced for Dispensing Practices. The specification for the DSQS is nationally directed. It is obvious that within the next two years, the requirements of the scheme will become tighter.
- The requirements for “supervised” dispensing bring us to the conclusion that we can now longer follow the direction of moving to new premises in the village. This is because Netheravon branch surgery does not always have a General Practitioner on the premises and so dispensing is “unsupervised”. The GPs therefore feel that this is not a situation that can be sustained in the light of the DSQS. Whilst there is no requirement during 06/07 for dispensaries to have an independent second check of medication dispensed, this is obviously the direction of travel for the future and discussions with the Primary Care Trust lead us to the firm belief that this will become a necessity. It is also best practice as recommended by the Dispensing Doctors Association. The recent Significant Event mentioned in Section 3 (3.1) could have been avoided in a less cramped environment and with two Dispensers working together. The need for two dispensers at each site is now an overriding consideration.
- To put in place a second checking dispenser across three sites will cost the Practice a minimum of £40,000 p.a. The additional training for staff will cost in the region of £4,000. This removes valuable resources from direct patient care.

4.4 OTHER PROPOSED DEVELOPMENTS

- For the last 8 years, the Practice has worked tirelessly to procure new premises for the village. Several schemes have been explored and partly progressed, involving Practice purchase and third party developer options.
- The most recent scheme involved a joint venture with our current landlords, Sarsen Housing. They were willing to develop a new site for the Practice, alongside the village hall. Plans for this have been ongoing for the past five years. The development would have addressed the problems outlined above in section 1. The project is a complex and difficult venture, involving Sarsen, the Village Hall, the Parish Council, South Wiltshire Primary Care Trust and Netheravon School (through Wiltshire County Council)
- It had been hoped that this project would proceed to the building stage in September 2004. Problems getting satisfactory outcomes for both the Village Hall Committee and the Parish Council have resulted in the project still not breaking soil. This would have involved a 25 year Internally Repairing Lease with the landlords. District Valuer valuations of the proposed new building, put this cost at £38,000 p.a.
- The increased recurrent cost to the Primary Care Trust of the new build was likely to be in the region of £34,000 p.a in terms of increased rent. This valuation was done approximately two years ago so this likely to have increased.

- The practice has incurred considerable costs over the past 8 years developing these schemes. Most recently, solicitors, building surveyors and many hours of Practice Manager time has been invested in the development stages.
- In view of recent organisational changes and in the current financial climate, the PCT is unlikely to sanction a further financial commitment of this scale.

5. PROPOSALS FOR THE FUTURE

5.1 OPERATING ON TWO SITES

The Practice is actively looking at the provision of current services at the remaining two sites. There will be no reduction in the number of sessions available to all patients by closing the current site at Netheravon. Indeed, it is hoped to increase both the quantity and range of appointments available at the two remaining sites. There is capacity at Durrington and particularly at Upavon to incorporate the Doctor sessions currently undertaken at Netheravon branch surgery. The return of a room at Durrington, from Community staff use to Practice use, will give us the opportunity to fit and open a third treatment room for the Practice. As the majority of the patients in the Practice are based at the Durrington site, this will be a very welcome addition to the premises there and more than compensate for the current treatment room at Netheravon, where we are unable to undertake minor operations.

5.2 PRESCRIPTION DELIVERY SERVICE

The Practice is conscious of the need for accessible dispensing for patients of the village. We are looking at the possibilities of developing a prescription delivery service for all patients, along similar lines to those offered by some community pharmacies. This would not only benefit the patients of Netheravon and Haxton, but those of the entire practice – some of whom are even more remote from Durrington and Upavon. The dispensaries at Upavon and Durrington are big enough to incorporate the amount of dispensing that would fall there.

5.3 LINK (Community Transport Service)

Discussions with the LINK service which currently operates in Durrington has shown that in November of last year, the service expanded, more drivers were recruited and it now operates services in Netheravon and Fittleton too. The Practice and PCT would hope to strengthen ties with the service to support increased use of the service in the initial stages.

5.4 STAFFING

There will be no threat to existing posts. Staff already employed at Netheravon will be redeployed at the other sites, to allow 2 dispensers on duty throughout the day.

5.5 EXTENDING DURRINGTON

The Practice wishes to extend the Durrington surgery building in order to further accommodate the sessions to be transferred from Netheravon and the increase in dispensing which will follow. Separate proposals will be made to this effect.

6. PUBLIC AND PATIENT INVOLVEMENT

The local communities have been very involved with the surgery, for the last 5 years, developing the Sarsen/Aster scheme. The Practice held a village meeting, along with the PCT during the time of the collapse of the previous development scheme. There has been considerable dialogue between members of the Village Hall Committee, the Parish Council and other notable individuals and the Practice wish to continue to actively involve the village patients. Patients will be surveyed to establish the interest in developing prescription delivery services. Further public and patient involvement will come through the formal consultation process and will be co-ordinated by the PCT to identify and address further concerns and to collectively establish some solutions to those concerns.

7. CONCLUSION

The Practice has reluctantly reached the conclusion that keeping Netheravon branch surgery open is no longer sustainable. In the present financial climate, value for money must always be demonstrated. The Practice feels that the new development would not represent a good use of public money and would divert monies which could be invested more directly in patient care. The current site is unacceptable and whilst we have managed in the building thus far in the hope that new premises would be forthcoming we cannot now continue with that scheme for financial reasons. The introduction of the Dispensing Services Quality Scheme has now rendered moving to new premises financially out of reach.

7.1 With the Practice consolidated on two sites, it is anticipated that the development of a more corporate feeling amongst all the staff, would be to the advantage not only of the staff, but also to the patients. More regular opportunities to be together to plan for an ever changing future in General Practice will be hugely beneficial to everyone. The opportunity for greater sharing of time and experience through more co-operative working is essential in today's General Practice. The

professional isolation that currently afflicts clinical staff, would be decreased and personal support for all staff will be more robust.

7.2 Plans for a prescription delivery service and a transport strategy to include development of the LINK scheme supported by the PCT will mean that the patients will not be disadvantaged. The extra services currently not offered at Netheravon branch surgery, would therefore be within reach.

7.3 We believe that whilst this change may initially be badly received in the village, we have and will continue to consider alternative ways of working and delivering high quality health services to all registered patients of the Practice so that the overall impact on Netheravon will be as small as possible. The local communities have been very involved with the surgery, for the last 5 years, developing the scheme with Sarsen/Aster. There has been considerable dialogue between members of the Village Hall Committee, the Parish Council and other notable individuals. We do not want to lose this close interaction. We want to continue our good communication with patients, public and staff:

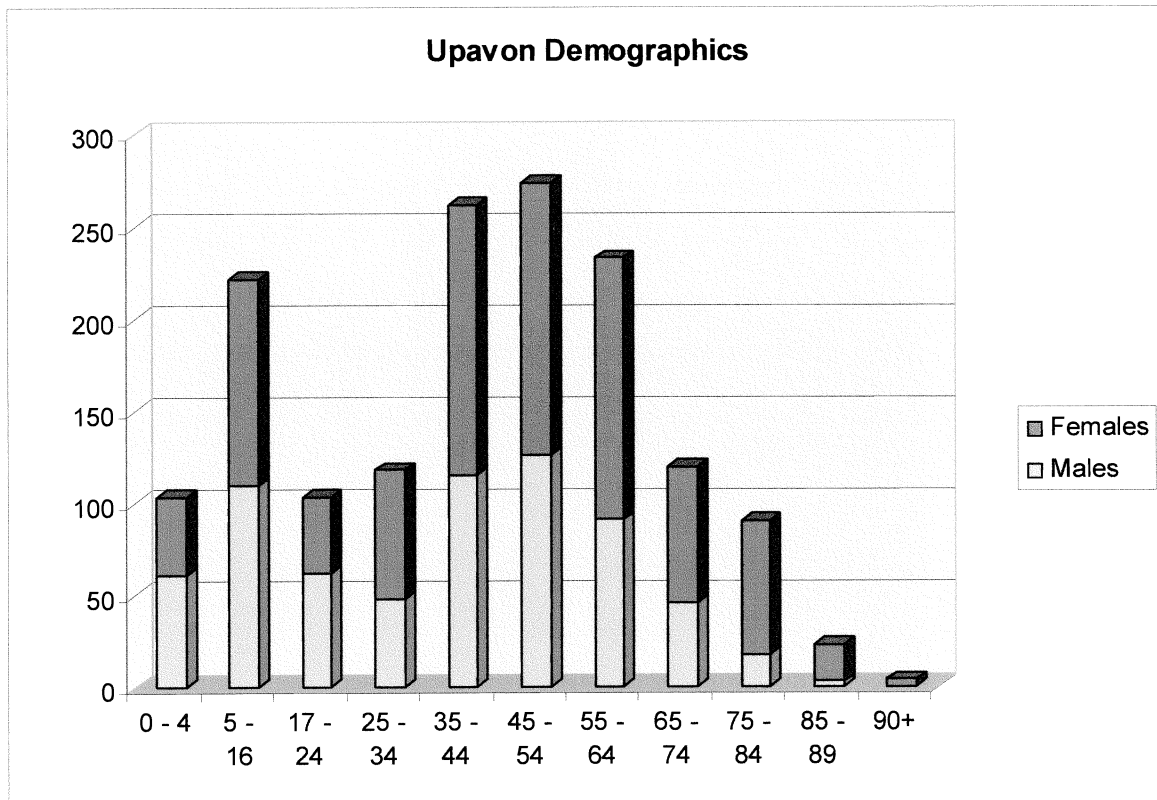
- Inform patients by letter of the decision to close the surgery and of our intentions for the future.
- Invite patients' comments on the prescription delivery scheme
- Invite and encourage feed back comments into any consultation period required, which will be undertaken by the PCT.

8. RECOMMENDATIONS

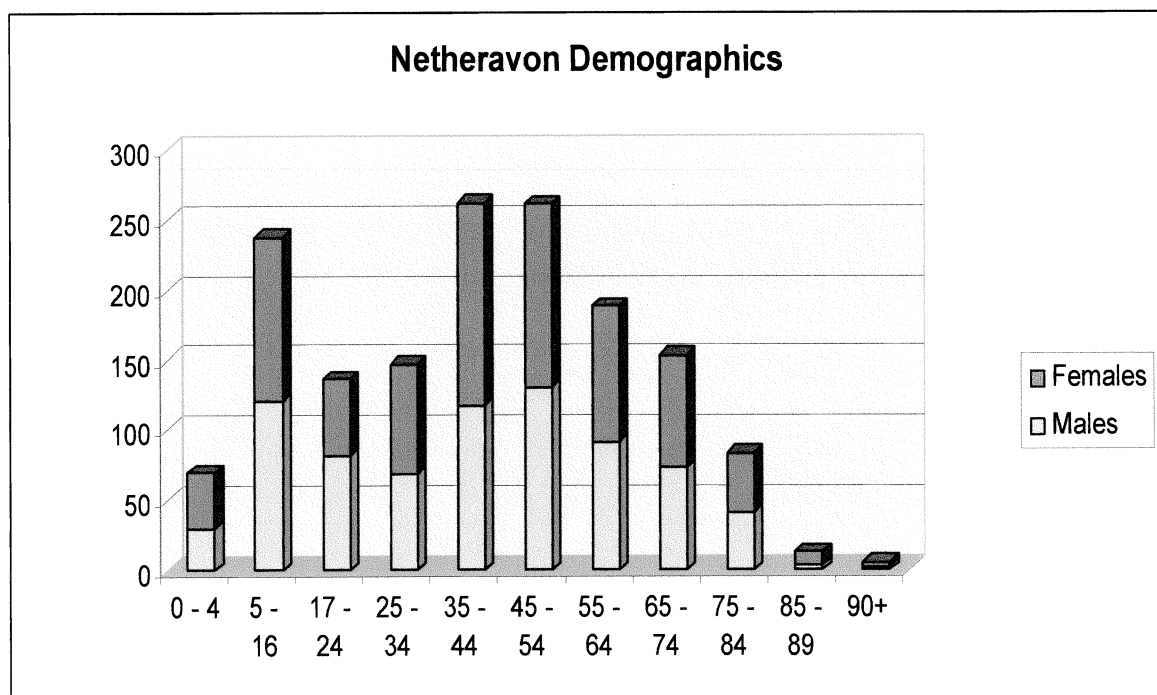
1. The Partners recommend that Netheravon branch surgery be closed.
2. That proposals for a new surgery development within Netheravon village should not be pursued any further as these are considered not to be a good use of public money .
3. That resources be directed to the remaining sites in order to increase the availability and range of high quality services to all registered patients and maximise economies of scale.
4. That the Practice and the PCT look to develop and establish, at the remaining sites the following:
 - a. prescription delivery service
 - b. a local transport support scheme (with LINK involvement)
 - c. extension and alteration of Durrington surgery in order to cope with additional demand on clinical space and dispensing service.
 - d. Dispensing Services Quality Scheme requirements
 - e. Decontamination issues and compliance achieved
 - f. Practice Based Commissioning
 - g. Choose & Book
 - h. GP to GP transfer of records
 - i. Electronic Prescription Services
 - j. Disability Discrimination Act consideration

APPENDIX 1

PATIENT DEMOGRAPHICS

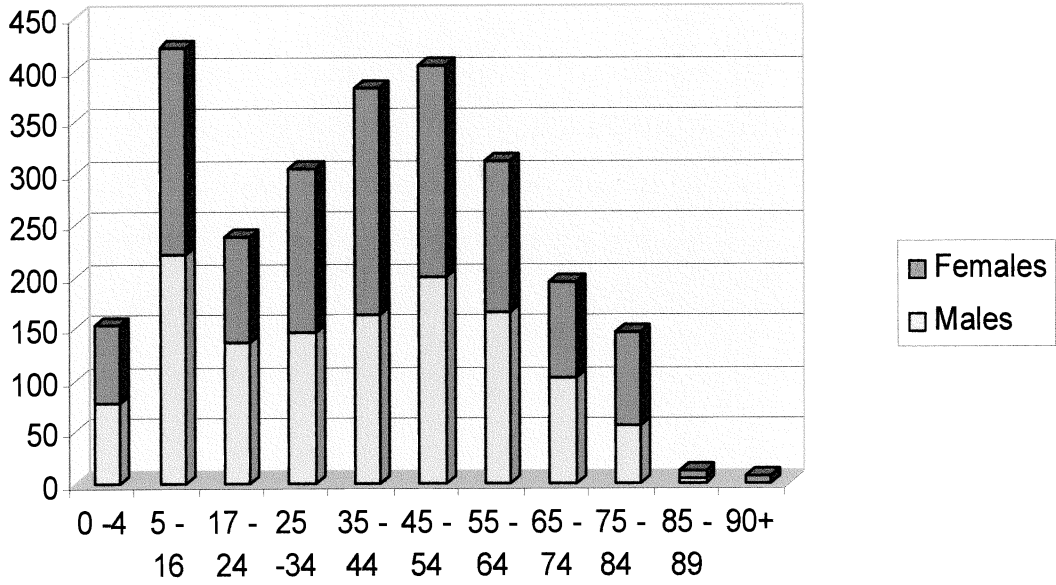


TOTAL NUMBERS 1670 registered patients



TOTAL NUMBERS 1557 registered patients

Durrington Demographics



TOTAL NUMBERS 2575 registered patients

APPENDIX 2

BRANCH SURGERY - SELF- ASSESSMENT CHECK LIST

Area	Details/Questions	Now	Alternative
Premises	Type (village hall, room of house, purpose built surgery etc.) Owned or rented? Costs per annum for Utilities, IM&T, rent and waste collection etc) DDA Compliant Number of consultation rooms Security arrangements	Bottom floor of dormer bungalow. Tenants live upstairs. Rent - £4,400 p.a. Not DDA compliant 1+1 Treatment room.	U-extended and redeveloped. D-purpose built. Both DDA compliant. 7 con.rooms in total (min) + 2 Treatment rooms. (min)
Opening hours	Days of week Total	Mon – Fri am only. Mon – Wed pm only	Mon – Fri am & pm
Services to patients	Equity Range of	Currently patients do not receive equitable service compared to U & D	Equity of services to patients will occur as the will receive complete range of services and Health Care Professionals
Type of sessions	Multi-professional (i.e. GP, Nurse, HV, DN, other professionals) Are you able to offer Enhanced Services at the branch surgery?	Limited and consist of Practice Nurse, HCSW, GP, Health Visitor	Maximises number of sessions and also involves full range of Health Care Professional clinics
Staffing	Receptionist/dispenser available?	2 for am, 1 for pm	2 for am, 2 for pm
Activity (provide 3 months figures)	No of consultations per week Type of consultation per week (i.e. repeat prescriptions, dressings, injections etc) Seasonal trends	Average hours GP – 19.5hrs.	All sessions from Netheravon to be incorporated into two sites with no reduction in total opening hours.
Consultation Room	Fully equipped (Exam couch, light etc) Confidentiality	Equipped. Issues surrounding confidentiality	Fully equipped. No issues of confidentiality
Waiting Area	Separate area?	Yes	Yes x 2
Emergency/Diagnostic Equipment	Available on site (i.e. Defibrillator, nebuliser) - please list	Limited to: Defibrillator & Nebuliser only	All available
Treatment	Is whole range of treatment & tests available? Do patients have to book a second appt at main surgery for full examination & tests?	No minor ops. No Psychological services. No Retinal Screening	All services available.
Appointments	How booked (i.e. at main surgery)?	Bookable at all sites.	Bookable at both sites.
Dispensary	If provided are there adequate security arrangements in place?	Not alarmed	Both sites alarmed CDs not stored in Dispensary
Health & Safety	Any issues i.e. Lone Worker, Clinical/Sharps waste collection?	Lone dispenser. Cramped condition.	Nil as risks reduced
Medical Notes	Available at branch surgery? How i.e. kept at branch surgery or transported in cars to branch surgery (if so do you have a policy regarding removal of patients' notes from surgery premises?)	Lack of storage for notes. All Available at site.	All notes to be stored centrally
IM&T	Linked to main surgery (by ISDN/kilo-stream etc)	Linked to main site. Issues of speed of connection	Lack of connection speed at main site could be rectified.
Telephone	Number of, landline, mobiles?	2 lines	U-4 lines.D-2 lines

Area	Details/Questions	Now	Alternative
Repeat Prescriptions	Do you dispense from branch surgery or does patient have to collect from main surgery? Is a delivery/collection service provided and if so by whom and are they aware of confidentiality issues surrounding the service?	Dispense from this site. No delivery or remote collection service.	Dispensing can be done at either end of the Practice. U: Dispensary big enough to cope. D: would be developed to accommodate service.
Any patients identified who will experience difficulty if branch surgery closes?	How will they be affected?	High proportion of Netheravon Patients currently already attend U & D for appts	Visits will be arranged for those house-bound or assessed to require specific home-visits
Transport	How do patients get to Branch Surgery? How would they get to main surgery?	By car, some walk. No LINK scheme	Potential to join with LINK Scheme to provide
Absence of regular Dr/Nurse	What happens when they are absent? Sessions cancelled or alternative healthcare professional booked?	Reduced timetable. Patients attend U or D	Full timetable operational at all times
Insurance Cover	Has Medical Indemnity Cover been refused on the premises concerned?	Not up until now but the risk is high that this may soon be the case	For: U = No D = No

Key:

U = Upavon

D = Durrington

APPENDIX 3

Please see overleaf.

GP PREMISES SURVEY FORM

APPENDIX 4

CONSULTATION DATA 20/11/2006 – 9/2/2007

UPAVON SURGERY

	G.P.		Practice Nurse		Health Care Assistant	
Upavon Patients attending	631	71.62%	376	88.47%	174	91.1%
Netheravon patients attending	115	13.05%	33	7.77%	14	7.34%
Durrington patients attending	135	15.33%	16	3.76%	3	1.56%
TOTAL	881	100%	425	100%	191	100%

NETHERAVON SURGERY

	G.P.		Practice Nurse		Health Care Assistant	
Upavon Patients attending	116	13.33%	74	18.5%	22	17.20%
Netheravon patients attending	550	63.22%	282	70.5%	101	78.90%
Durrington patients attending	204	23.45%	44	11%	5	3.90%
TOTAL	870	100%	400	100%	128	100%

DURRINGTON SURGERY

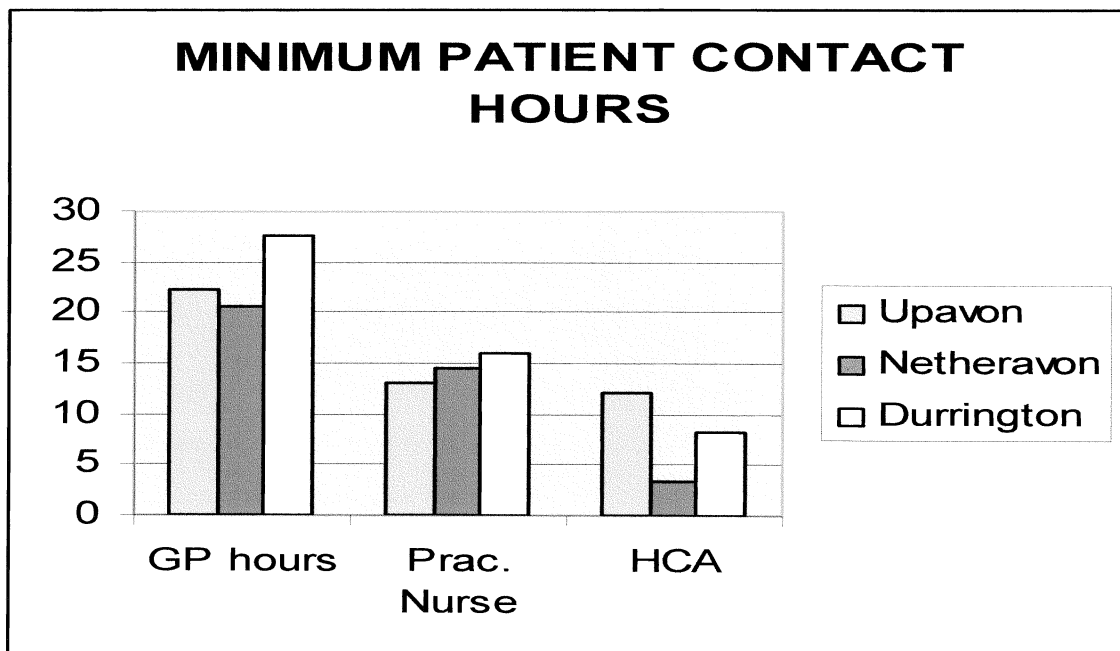
	G.P.		Practice Nurse		Health Care Assistant	
Upavon Patients attending	54	5.12%	17	2.99%	9	4.19%
Netheravon patients attending	126	11.95%	40	6.41%	16	7.44%
Durrington patients attending	874	82.93%	567	90.6%	190	88.37%
TOTAL	1054	100%	624	100%	215	100%

FURTHER RESULTS

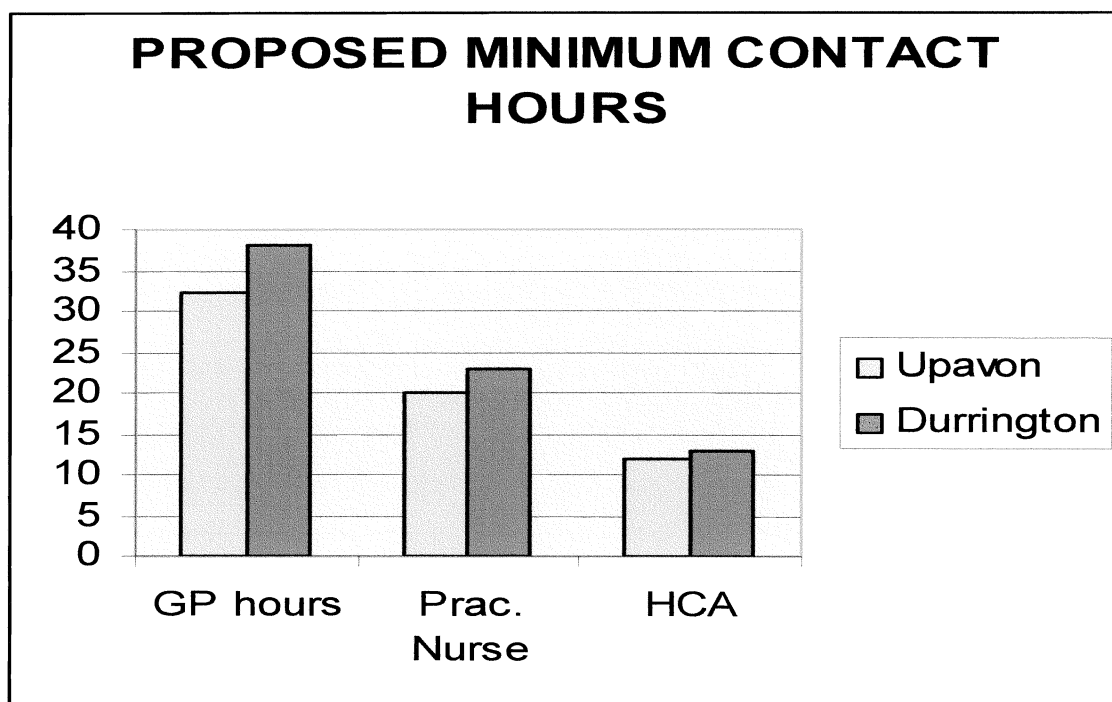
Further examination shows that 1035 patients filled the 1398 appointments (74% of G.P., Practice Nurse and Health Care Assistant appointments), making 363 appointments multiple attendances.

One patient attended 12 times during that time and another attended 8 times. This patient has also attended Durrington surgery on previous occasions.

CURRENT TIMETABLE PROVISION



PROPOSED TIMETABLE



NB. The minimum contact hours outlined above do not take account of telephone consultations which are in addition to the above.

BENEFITS

Benefits to the patients in terms of the timetable would be that:

- a) The Practice could consider a telephone triage system which currently is not a viable arrangement.
- b) The Practice would look to extend the range of appointment times, to cover longer periods of the morning and afternoon. This would be beneficial to patients who are working and also to those reliant on public transport.
- c) It would redress the imbalance of appointment availability at Durrington which is currently the surgery where the majority of patients are registered. Durrington patients attend other surgeries more than any other patient group.

APPENDIX 5

Wilts and Dorset Bus Timetable

Service

SALISBURY · SWINDON via Boscombe Down, Amesbury, Durrington, Netheravon, Pewsey and Marlborough **5**
 via Boscombe Down, Amesbury, Larkhill, Durrington, Netheravon, Pewsey and Marlborough **6**

Connecting Service 8 journey shown in *italics*. Passengers may be required to change buses at **Upavon, Pewsey or Marlborough**.

	NS		NS		NS		NS		NS		NS		NS		NS		NS	
	5	6	5	6	5	6	5	6	5	6	5	6	5	6	5	6	5	6
SALISBURY (Bus Station)	0700	0720	0700	0720	0700	0720	0700	0720	0700	0720	0700	0720	0700	0720	0700	0720	0700	0720
Waters Road (Top)			0703		0703		0703		0703		0703		0703		0703		0703	
Old Sarum (Old Castle Inn)			0704		0704		0704		0704		0704		0704		0704		0704	
High Post (Cross Roads)			0711		0711		0711		0711		0711		0711		0711		0711	
Boscombe Down (Roundabout)			0714		0714		0714		0714		0714		0714		0714		0714	
Boscombe Down (Raleigh Crescent)		0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720	0720
AMESBURY (Bus Station)		0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730	0730
Larkhill (Medical Centre)		0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735	0735
Stonehenge Inn		0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740
DURRINGTON (School Road)		0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740	0740
LARKHILL (Medical Centre)		0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744	0744
Figheldean (Bus Shelter)		0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747	0747
Netheravon (School)		0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750	0750
Netheravon (New Buildings)		0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753	0753
Enford (Bus Shelter)		0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758	0758
Upavon (Ship Inn)		0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801	0801
Woodbridge Inn		0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805	0805
PEWSEY (North Street)		0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810	0810
Pewsey (Vale Road) ‡		0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813	0813
Oare (White Hart)		0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818	0818
MARLBOROUGH (High Street)		0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820	0820
Octbourne St George (A346, Bus Shelter)		0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823	0823
Chiseldon (Butts Road)		0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827	0827
Great Western Hospital		0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830	0830
Queens Drive (New College)		0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834	0834
Fyfield Turn (A4)		0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847	0847
West Kennett (Phone Box)		0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852	0852
Avebury (Red Lion)		0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857	0857
Broad Hinton (Bell)		0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900
Wroughton (High Street)		0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905	0905
Old Town (Prospect)		0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912	0912
SWINDON (Bus Station) ‡	0830	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900	0900

CODE ‡ — Rail Station nearby.
 † — Not Saturdays.
NS — Saturdays only.
S — Saturdays only.
 ⊕ — School days (Mondays to Fridays) only.
 W — Time at Woolworts.
 U — Runs via Wilcot (Golden Swan) at 1029.
 L — Via George Lane (time at Ladbroke).
 ● — Starts from Pewsey via Everleigh, Upavon Camp and Upavon (Avon Square) as Service 18.
 ▼ — Runs five minutes later during school holidays.
 † — Via George Lane — time at Woolworts. Half and Day Return fares available.
 ⊕ — Via Stonehenge Road, continues to Rangers Garage, Stonehenge Inn, Larkhill and Amesbury.
 ‡ — On schooldays runs via Stratford Road and Stratford Bridge NOT via Waters Road and Castle Road.
 U — On Saturdays and school holidays leaves Salisbury (Bus Station) at 0857.
 L — Via George Lane (Old Castle Inn) at 0857.
 ▼ — Via Upavon (Avon Square) at 0911 and Rushall (Cross Roads) at 0914.

**JOURNEYS COLOURED PINK OPERATE VIA BUTTERFIELD DRIVE IN BOSCOMBE DOWN.
 ROUTES IN SWINDON — SEE PAGE 10**

Certain journeys operate under contract to Wiltshire County Council whose bus enquiry line (08457 090 899) can provide details of all bus services in Wiltshire.

Service
5
6

SALISBURY · SWINDON via Boscombe Down, Amesbury, Durrington, Netheravon, Pewsey and Marlborough
via Boscombe Down, Amesbury, Larkhill, Durrington, Netheravon, Pewsey and Marlborough

Service 6B and connecting Services 8 and 19 journeys are shown in *italics*. A change of bus may be required at **Upavon, Pewsey or Marlborough**.

	SM	5	6	NS	S	5	19	6	5	6	5	8	6	6	6	6	6B		
Mondays to Saturdays																			
SALISBURY (Bus Station)	1420	1420	1450	1520	1520	1555	1620	1655	1720	1755	1805	1845	1915	1935	2035	2115	2205	2235	2315
Waters Road (Top)	1425	1425	1455	1525	1525	1600	1625	1700	1725	1800	1848	1918	1938	2038	2118	2208	2238	2318	
Old Sarum (Old Castle Inn)	1427	1427	1457	1527	1527	1602	1627	1702	1727	1802	1812	1849	1919	1939	2039	2119	2209	2239	2319
Old Sarum (Partridge Way)																			2242
Old Sarum (Green Lane, The Portway)																			2243
High Post (Cross Roads)	1431	1431	1501	1531	1531	1606	1631	1706	1731	1806	1816	1858†	1923	1943	2043	2123	2213	2248†	2323
Boscombe Down (Roundabout)	1437	1437	1507	1537	1537	1612	1637	1712	1737	1812		1904	1929	1949	2049	2129	2219	2254	2329
Boscombe Down (Raleigh Crescent)				1508				1713		1813									
AMESBURY (Bus Station)	1445	1445	1515	1545	1545	1620	1645	1725	1745	1823	1825→1840	1910	1935	1955	2055	2135	2225	2300	2335
Larkhill (Medical Centre)								1735		1831		1844	1914	1947	1959	2059	2139	2229	2312
Stonehenge Inn	1451	1451	1521	1551	1551	1626	1651	1740	1751	1835		1848	1918	1950	2003	2103	2143	2233	2315
DURRINGTON (School Road)	1456	1456†	1525	1556	1556	1630	1656	1745	1756	1840		1856	1926	2011	2111	2151	2241		
LARKHILL (Medical Centre)			1535			1640													
Figliedean (Bus Shelter)	1500	1500	1600	1600	1600	1700	1749	1800	1844										2319
Netheravon (School)	1503	1503	1603	1603	1603	1703	1752	1803	1847										2321
Netheravon (New Buildings)	1506	1506	1606	1606	1606	1706	1755	1806	1849										2323
Enford (Bus Shelter)	1509	1509	1609	1609	1609	1709	1758	1809	1852										2326
Upavon (Ship Inn)	1514	1514	1614	1614	1614	1714	1803	1814	1857										2330
Woodbridge Inn	1517	1517	1617	1617	1617	1717	1806	1817	1859										2332
PEWSEY (North Street)	1525	1525	1625	1625	1630	1725	1814*	1825	1905*										2338*
Pewsey (Vale Road) ‡	1528	1538	1628	1628*	1633	1728	1818*	1828	1908*										2340*
Oare (White Hart)	1533	1543	1633			1733			1833										
MARLBOROUGH (High Street)	1545L	1555L	1645W			1745W			1845*										
Odbourne St George (A346 bus shelter)			1652			1752													
Chiseldon (Burt Road)			1658			1758													
Great Western Hospital			1702			1802													
Queens Drive (New College)			1707			1807													
Fyfield Turn (A4)	1550	1600																	
West Kennet (Phone Box)	1553	1603																	
Avebury (Red Lion)	1557	1607																	
Broad Hinton (Bell)	1605	1615																	
Wroughton (High Street)	1612	1622																	
Old Town (Prospect)	1618	1628																	
SWINDON (Bus Station) ‡	1625	1635	1715						1815										

FOR ROUTES IN SWINDON – SEE PAGE 10.

- CODE**
- NS – Not Saturdays
 - S – Saturdays only
 - ‡ – Rail Station nearby
 - L – Via George Lane (time at Ladbroke).
 - † – Stops in the Winterbourne Turning.
 - ‡ – Via Upper Avon School.
- JOURNEYS COLOURED PINK OPERATE VIA BUTTERFIELD DRIVE IN BOSCOMBE DOWN.**
- Certain journeys operate under contract to Wiltshire County Council whose bus enquiry line (08457 090 899) can provide details of all bus services in Wiltshire.

● – Diverts via St Francis Road and Pauls Dene Crescent on request to set down only. Runs up to three minutes later between Old Sarum to Pewsey if diverted.

□ – Via Stonehenge Road, continues to Rangers Garage, Stonehenge Inn, Larkhill and Amesbury.

→ – Change to connecting bus.

W – Time at Woolworths.

▲ – Saturdays and Wiltshire school holidays only.

▽ – Via Pewsey Vale School at 1535.

△ – Via Burbage

* – Calls to set down on request only.

▲ – Continues to Sling, Bulford Camp and Village to set down on request.

⊕ – School days only.

Service

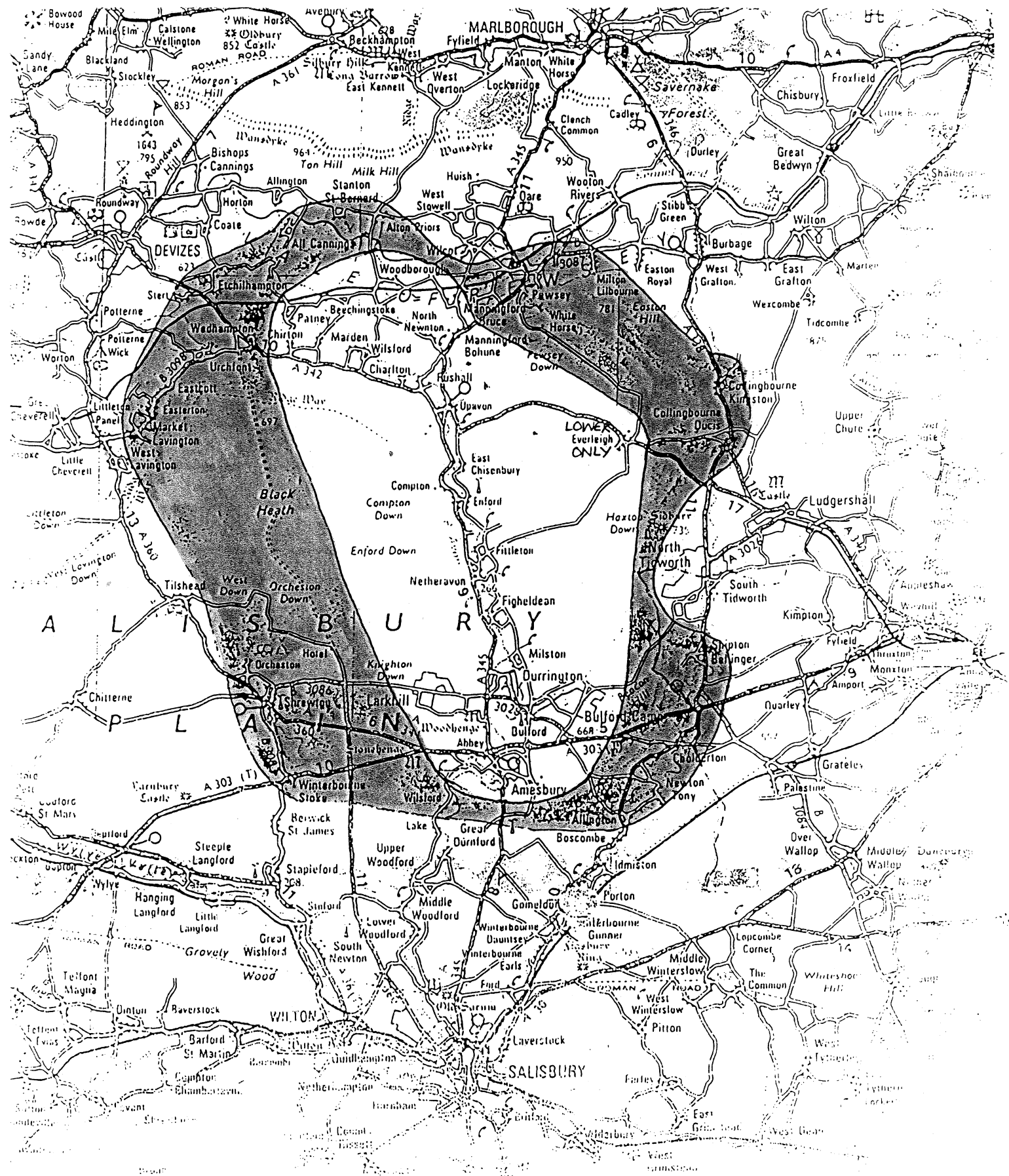
SWINDON · SALISBURY via Marlborough, Pewsey, Netheravon, Durrington, Amesbury and Boscombe Down **5**
 via Marlborough, Pewsey, Netheravon, Durrington, Larkhill, Amesbury and Boscombe Down **6**
 Connecting Service 8 journey shown in *italics*. **Passengers may be required to change buses at Marlborough or Pewsey.**

	NS		NS		NS		NS		NS		NS		NS		NS		NS		
	6	6	6	5	6	6	6	6	6	5	6	6	5	6	6	5	6	6	
SWINDON (Bus Station) ⇄																			
Old Town (Prospect)																			
Wroughton (High Street)																			
Broad Hinton (Bell)																			
Avebury (Red Lion)																			
West Kennett (Phone Box)																			
Fyfield Turn (A4)																			
Queens Drive (New College)																			
Great Western Hospital																			
Chiseldon (Butts Road)																			
Osbourne St George (A346, Slip Road)																			
MARLBOROUGH (High Street, Woolworths)																			
Oare (White Hart)																			
Pewsey (Vale Road) ⇄																			
PEWSEY (North Street)																			
Woodbridge Inn																			
Upavon (Ship Inn)																			
Enford (Bus Shelter)																			
Netheravon (New Buildings)																			
Netheravon (School)																			
Figheledean (Bus Shelter)																			
DURRINGTON (School Road)																			
Stonehenge Inn																			
Larkhill (Medical Centre)																			
AMESBURY (Bus Station)																			
Boscombe Down (Raleigh Crescent)																			
Boscombe Down (Roundabout)																			
High Post (Cross Roads)																			
Old Sarum (Green Lane, The Portway)																			
Old Sarum (Partridge Way)																			
Old Sarum (Old Castle Inn)																			
Waters Road (Top)																			
SALISBURY (Bus Station)																			

CODE NS - Not Saturdays
 S - Saturdays only
 ⇄ - Rail Station nearby
 ⇄ - School holidays (Monday to Fridays) only.
 ⇄ - School holidays (Mondays to Fridays) only.
 C - Change buses.

JOURNEYS COLOURED PINK OPERATE VIA BUTTERFIELD DRIVE IN BOSCOMBE DOWN.
ROUTES IN SWINDON - SERVICES 5 and 6
 Journeys via Avebury run via Croft Road, Devizes Road, Victoria Road and Princes Street to and from Swindon (Bus Station).
 Journeys via Chiseldon run via Marlborough Road, Queens Drive, Drove Road, Groundwell Road and Princes Street to and from Swindon (Bus Station) unless shown otherwise.
 Certain journeys operate under contract to Wiltshire County Council whose bus enquiry line (08457 090 999) can provide details of all bus services in Wiltshire.

APPENDIX 6 MAP OF PRACTICE AREA



BIBLIOGRAPHY

**“Dispensing Services Quality Scheme” - British Medical Association
August 2006**

“Health and Safety Regulation.... A Short Guide” – HSE. August 2003

**“Local Authority health overview and scrutiny committees and patient
and public involvement forums: working together. A Practical Guide.” –
Centre for Public Scrutiny June 2005**

Wiltshire PCT
Cross keys House
Salisbury
Wiltshire

16th February 2007

FAO Lisa Harding

Dear Lisa,

NETHERAVON SURGERY

I visited this surgery on 9th November 2006 and met Hilary Jenkins the Practice Manager following a request from yourself.

I took with me a survey report carried out in 1999 by the independent agency of Capitec (now Inventures), at that time part of NHS Estates and carried out a visual inspection of the premises.

Capitec's surveyor scored the building as a D for functional suitability i.e. 'unacceptable, major improvement required. The intervening years have seen no change to this situation and I would agree with the original reports conclusions on this point. The relevant part of the building is very cramped with no scope for extending. Given that the building is sited on the ground floor beneath a first floor residential flat and being leased from a housing association it would be impossible to really improve this situation. There are also some Disability Discrimination issues due to the restricted nature of the accommodation e.g. narrow door widths, access to WC etc.

In terms of condition Capitec scored the building previously as a B meaning 'good / fair minor deterioration' However I noted on my visit a number of structural cracks in both the internal and external walls. This requires further investigation by the landlord, I would suggest, as this could be an indication of serious movement occurring within the building which may require substantial works to put right. In my view this would be impossible to carry out whilst the building is in use.

Yours sincerely,

MARTIN CLEVERLY M.R.I.C.S. BSc val & est. man.
Estates Manager