# **Wiltshire County Council**

# **Health Overview & Scrutiny Committee**

Comments on the consultation on services provided by the Avon Valley Practice in Netheravon

The Health Overview & Scrutiny Committee delegated responsibility for producing its response to three of its members; Councillors Paula Winchcombe and Mike Hewitt and Terry White of Wiltshire PPIF.

#### **Process**

The Health OSC was first informed of the intention to carry out a consultation in March 2007. It was agreed that the consultation wouldn't begin until the end of May at the earliest to allow the consultation documents to be finalised and plans for the consultation to be drawn up. This gave an eleven week lead in to the consultation. The Health OSC is satisfied that the lead in gave the practice and the PCT ample opportunity to engage with the community in order to ensure widespread knowledge of the consultation within that community.

The Health OSC did not decide that the proposed change represented a substantial variation under the terms of Section 11 of the Health & Social Care Act, 2001, however members did agree that it was right and proper that consultation with the service users took place.

The Health OSC had discussions with the PCT in March about what form that consultation should take and agreed a time period of not less than six weeks would be needed to consult with the patients registered with the practice.

The subject of the consultation was very specific, regarding the closure of the surgery at Netheravon. The Health OSC agreed the consultation should be targeted at all those registered with the Avon Valley Practice as the proposed change affected only those registered with the practice. The Health OSC was satisfied with this approach.

#### **Public Meetings**

Members felt that the public meetings should have been confirmed and advertised at the time the consultation document was published.

Prior to the public meetings the OSC members had advised the PCT to use independent chairmen in order to allow all those concerned to have their say in a neutral and unbiased manner. The members noted that the Netheravon meeting was quite tense and felt this could have been avoided if an independent chair had been used.

# General comments about the proposal

It is unfortunate that the reprovision of the surgery at Netheravon has not been resolved over the last eight years that the various parties have been involved in discussions. However, it must be acknowledged that aspects of the service provided, such as dispensing of prescription drugs, may have been superseded by events nationally.

Issues of transport are, understandably, in the forefront of peoples' minds and it may be more difficult for some people, particularly older residents in Netheravon to access GP services than it had previously been if that surgery closes.

The Avon Valley Practice has publicly stated that it may be willing to improve the LINK service in the area, but it has not given indication of how this might be achieved and LINK services across the county are largely stretched.

Members noted that, when it was suggested that an alternative practice might bid to take over and run the surgery in Netheravon, representatives of the Avon Valley Practice stated that they would then reconsider their position as presumably this would mean a loss of revenue should patients re-register with an alternative practice.

Certain proposals outlined in the consultation document, such as extended appointment times, increased home visits, more appointment times, development of minor surgery and dispensary delivery would all be viewed as being of benefit to the wider community.

Members would fully expect the Avon Valley Practice to make use of the burgeoning Neighbourhood Teams to improve services for patients with long term conditions.

The members noted that people who want to see community midwives or health visitors, or who need access to drugs not held at the Netheravon surgery are already travelling to either Upavon or Durrington.

### **Further Questions**

Members have identified a number of questions that they would like the PCT to give consideration to as part of their deliberation of the outcomes of the consultation in September:

- What services should the PCT be commissioning for the population of Netheravon?
- Does the Avon Valley Practice have grounds to leave the surgery in Netheravon?
- Why, in eight years, has the project to replace the surgery in Netheravon come to nothing?
- Is there another GP practice interested in running a surgery at Netheravon and if so, what consideration has been given to that practice's proposal?

- What are the financial implications to the PCT of a). retaining a surgery in Netheravon and b). closing and concentrating services in Upavon and Durrington?
- In the consultation document the possibility of improved services are explored. Precisely what would those improved services be and how could the PCT be assured that those improvements would be made before agreeing to the closure of the surgery in Netheravon?
- What is the PCT's view of the improvements to services suggested by the Avon Valley Practice if agreement is given to closure of the Netheravon surgery? Is the PCT satisfied that these improvements are good enough?
- How does the Avon Valley Practice intend to improve the LINK service?

#### Recommendations

Members would expect the PCT to use any lessons learned to improve the process for similar consultations in the future, in particular to consider using independent chairs for public meetings that are likely to be heated or contentious, and to ensure that details of public meetings can be published at the same time as consultation documents.

Members would like the PCT to address the concerns raised in the above section as part of its presentation to the Health OSC on 20 September.