



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	14 December 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Future provision of General Medical Services at Cross Hands and Tumble
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jill Paterson, Director of Primary Care, Community and Long Term Care
SWYDDOG ADRODD: REPORTING OFFICER:	Rhian Bond, Assistant Director of Primary Care

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

On 29 September 2023, Cross Hands and Tumble Medical Partnership served notice to the Health Board on their General Medical Services (GMS) contract giving the six calendar months' notice required as a Partnership. The Practice will cease providing General Medical Services within the Amman Gwendraeth Cluster on 31 March 2024.

A Vacant Practice Panel met on 17 October 2023 to examine the options available to the Health Board to ensure that these patients continue to have access to services. These options include a formal tender process for a new provider of GMS or APMS (Alternative Provider of Medical Services), dispersal of the Practice list or Health Board Managed Practice. Based on expressions of interest received and discussions in the Cluster, the Panel identified a formal tender process and dispersal as the preferred options, and directed that a public engagement exercise be undertaken on this basis.

This paper reports on the recommendations of the Vacant Practice Panel, summarises the public engagement undertaken and asks the Board to consider the next steps in the light of the feedback received.

Cefndir / Background

Cross Hands and Tumble Medical Partnership currently provides General Medical Services to approximately 7,600 patients from their main site in Tumble as well as from a branch site located in Cross Hands Health Centre. Cross Hands and Tumble Medical Partnership is one of two Practices due to relocate to the planned new development, Cross Hands Health and Wellbeing Centre when completed (the other Practice being Meddygfa Penygroes).

Approximately 297 of the current registered population reside outside of the Practice boundary, equating to 4% of the total list size.

Historically, there were four local care homes served by the Practice, two of which have already re-registered their patients with another GP Practice. Cross Hands and Tumble

Medical Partnership has been a training Practice for approximately eight years, although the current trainee has been moved as the Practice serves its notice period.

The Practice shares a boundary with Coalbrook Surgery, Meddygfa'r Sarn and Meddygfa Penygroes. Other local GP Practices that overlap to a lesser extent are Brynteg Surgery, Margaret Street Practice and Amman Tawe Partnership. All are Independent Contractors, with the exception of Meddygfa'r Sarn, which is a Health Board Managed Practice. Meddygfa Penygroes is co-located in the current Cross Hands Health Centre premises and both Practices are due to relocate to the new Cross Hands Health and Wellbeing Centre on its estimated completion date in 2026.

Historically, the Practice has run as a three GP partnership and has operated with support from regular GP locums and its limited Multi-Disciplinary Team (MDT). The Practice has advertised extensively over the years but has been unsuccessful in attempts to employ a salaried GP or recruit another GP Partner. In recent years, for business continuity purposes, the Practice buddied with Meddygfa Penygroes and whilst there have been good relations between the Practices, including some limited support on occasions, this did not develop any further. Recent exploratory discussions around a merger have taken place but have not progressed.

In 2020, the Practice was one of a group identified for support through the Royal College of General Practitioners (RCGP) Practice sustainability review funded by the Health Board through the former Pacesetter programme. Unfortunately, COVID-19 restrictions at the time dictated that this was largely a remote exercise. Whilst the review was completed, the main report was not shared by the Practice with the Health Board. The Practice was complementary in its feedback on the process, and it was understood that work going forward focussed chiefly on leadership and management.

The Practice approached the Health Board in September 2022 reporting financial issues, which the Health Board supported the Practice with, to ensure business continuity. Despite a continued reported improvement in the financial situation of the Practice, they again approached the Health Board at the end of May 2023 expressing concerns around operational pressures.

Regular contact was maintained with the Practice over the summer months, culminating with the Partners indicating that they were considering terminating their Contract in August 2023 due to recruitment and retention issues with key clinical roles within their team, which included the resignation of one of the three GP Partners and the loss of the Advanced Nurse Practitioner. The Partners submitted their Contract termination on 29 September 2023.

Vacant Practice Panel

The Contract resignation triggered the nationally directed Vacant Practice Process, which had been revised and reviewed by the Primary Care Contracts Review Group (PCCRG) in September 2023; and on 17 October 2023, a Vacant Practice Panel was convened to consider the options for the continued provision of General Medical Services to registered patients. The option available to a Panel are:

1. Alternative Provider Medical Services contract (APMS)
2. Dispersal or Reassignment of patient list
3. Formal Tender process for new Provider/Contractor (GMS)
4. Health Board Managed Practice

The Panel are able consider a combination of the options above where appropriate and where that best meets the needs of the population. Membership of the panel includes representatives of Llais and the Local Medical Committee along with Health Board officers.

Expressions of Interest for other Practices to take over the provision of General Medical Services under a GMS contract (or potentially APMS) for Cross Hands and Tumble Medical Partnership were requested in writing from all Carmarthenshire GP Practices and those in neighbouring Swansea Bay University Health Board. Two expressions of interest were received from neighbouring GP Practices and stakeholders' views were sought to help inform the preferred option for the ongoing provision of General Medical Services to the registered population.

The Vacant Practice Panel, in considering the information that was presented, discussed the implications of each of the four options for consideration. It was noted that option one (APMS) and option three (GMS) are essentially the same option with a variance in the contracting mechanism. Given that there had been an expression of interest in providing General Medical Services to the totality of the Practice list, it was agreed that public engagement should include the recommendation that a formal procurement exercise be undertaken to secure a new Practice to take over the delivery of General Medical Services from within existing premises and with the commitment to move into the new space at Cross Hands Health and Well Being Hub. The financial implications of this option were discussed by the Panel.

Similarly, given that there had been informal interest from a number of local GP Practices in taking over the provision of General Medical Services for proportions of the Practice list, it was agreed that the option of a list dispersal should also be considered as part of the public engagement. In considering the principle of delivering care closer to home it was noted that there are occasions where patients live closer to a GP Practice other than the one that they are registered with. The financial implications of this option (discretionary payments, data transfer costs etc) and the need to identify funding to support the receiving Practice were considered and discussed by the Panel. The costs of a managed dispersal would be in the region of £228k (£30 per patient discretionary support) plus a further £30k for data transfer costs (however, this is an estimate as actual costs would only be attributed on quotations from the clinical system providers). There is the potential that receiving Practices could request additional support to ensure the smooth transfer of patients and this could include additional clinical time for pharmacists etc, which would need to be considered on an individual Practice basis.

In considering the potential for the Practice to become a Health Board Managed Practice the panel were mindful that there are already two Managed Practices within the Amman Gwendraeth Cluster (Meddgyfa'r Sarn and Meddygfa Minafon). In both instances and in common with all the Health Board Managed Practices, the mainstay of the medical workforce is reliant on GP Locums, highlighting the recruitment and retention issues that the Practice themselves have experienced. The financial implications of operating a Managed Practice were also considered and it was noted that, due to high staff costs and lower income streams, there was a financial risk in considering taking Cross Hands and Tumble as a seventh Health Board Managed Practice at a time when there are significant financial challenges being faced by the NHS in Wales. Panel members noted that, given that there was interest in either taking the Practice list in its totality or partially across a number of Practices, the public engagement should be undertaken on the basis that the Vacant Practice Panel recommendation was to either seek a new GMS/APMS contract or to disperse the Practice list. It was noted that this was a recommendation and that any decisions, following public engagement, would require Board consideration and approval.

Accordingly, a Public Engagement Plan was developed to seek the views of patients and other stakeholders on the preferred options identified by the Vacant Practice Panel, working closely with Llais. Where options are identified as not the preferred option because other options are seen as more favourable for the patients, Practice and wider sustainability of the Cluster, the Health Board undertakes to explain in full the rationale for this as part of the engagement.

Asesiad / Assessment

An analysis of the feedback received from the public engagement is at *Appendix 1*.

Patients were able to engage:

- In writing by returning paper questionnaires to FREE POST address. Paper copies of the questionnaire were made available at both Tumble and Cross Hands and all Community Pharmacies locally.
- Online through 'Have Your Say / Dweud eich Dweud' site (online version of the same questionnaire, no registration required). Link with QR code was included in a letter to all patients.
- By telephone to the Communications Hub. All callers were spoken to by the team at the Hub or were individually responded to by the Primary Care team where a response was indicated
- By email to the Communications Hub, responded to where indicated
- In person at either of the two drop-in public engagement events (Tumble village hall on 8 November 2023, and Cross Hands Club & Institute on 21 November 2023)
- Feedback direct to Llais online (using the Health Board questionnaire)

A questionnaire was developed with the Engagement team to ask patients about their views on the viable options and to explain why the Health Board had identified these options as most viable. Patients were also asked what was important to them about their Practice. 500 questionnaire responses were received either electronically or paper form, alongside another 88 responses by email, letter, telephone or via Llais. A verbatim report of the questionnaire responses produced by the Engagement team is at *Appendix 2* (English) and *Appendix 3* (Welsh).

Public engagement

The first public engagement event was held on 8 November 2023 in Tumble Village Hall. Whilst it was identified prior to the event that the individual patient letters had not been sent due to issues with the NHS Wales Shared Services Partnership (NWSSP) bulk mailing service, the Communications and Engagement Team felt that through the level of information that had been shared on social media and through local media that the event should continue. 97 people attended this event, and it was agreed with Llais that a further event should be held. The second public engagement event was held on 21 November 2023 in Cross Hands Working Mens Club where 151 people attended. Both events were successful in their aim of providing a platform for face-to-face discussions between Health Board staff and patients with detailed conversations on the situation, background, concerns raised and the options going forward.

588 responses were received in total, which equates to 7.7% of the Practice population. 65.9% of the respondents were aged over 55 years old, 27% considered themselves to have a disability and 23% identified as being carers. From the 500 questionnaires that were completed 48.4% said that they had been seen at either Practice site in the last month, however some of

those would have been for the Autumn Booster or flu vaccination, compared to 24% of people who said that they had not been to the Practice in the last six months. 81% of respondents advised that they got to the Practice by car, with 14% walking to the Practice and 1.6% by public transport and 3.4% by other transport methods such as cycling or taxi.

426 people (85%) said that they would like to see the provision of General Medical Services continued to be delivered out of Tumble and Cross Hands by a new Service provider whilst 46 people said that they were happy to be dispersed to another GP Practice that might be closer to where they live. Seven people identified a Health Board Managed Practice as their preferred option. Patients attending the drop-in events told us they viewed this as the option closest to the current service provision and the option that would cause the least change as it would mean that there would continue to be a Practice for them in the community, even if the current Partnership could not continue.

46 patients (9% of respondents) indicated they would prefer their registration to be transferred by the Health Board to another local GP Practice. Conversations at the drop-in events suggest that these may be patients living more rurally who already travelled some distance.

28 patients (5.6%) ticked the box in the questionnaire for 'Other', although the free text responses by these patients tended to be comments on the dispersal or tender options rather than an alternative. Seven patients or 1.4% of respondents cited Health Board Managed Practice as their preference.

When asked what was most important to patients about their Practice, patients consistently responded that they wanted to be able to get through easily on the telephone, and to be able to make appointments on request. Patients also valued continuity with regular doctors and a stable Practice team. Very many patients felt that the continuation of the Practice was central to the community, which itself is expanding with new housing developments.

Stakeholder feedback

Stakeholder feedback is at *Appendix 4* and respondents include the Amman Gwendraeth Cluster Lead, Community Councillors for Llannon and Gorslas Wards, Dame Nia Griffiths MP and Practice submissions from Penygroes Surgery and Llandeilo Surgery. Feedback from Llais on the engagement process is attached at *Appendix 5*.

Argymhelliad / Recommendation

The Board is asked to:

- **NOTE** the recommendations of the Vacant Practice Panel
- **CONSIDER** the outcome of the public and stakeholder engagement, including the response from Llais
- **AGREE** that, in response to the public and stakeholder engagement, a formal Procurement exercise should be undertaken to secure a new General Medical Services provider to deliver care to the current registered population for Tumble and Cross Hands
- **AGREE** that, if the Procurement exercise does not identify a suitable single GMS provider for the onward provision of General Medical Services, the Board gives full consideration to the other options available which includes managed list dispersal or Health Board Managed Practice

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	1451 Score: 16 (for review 16 December 2023)
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	5. Whole systems perspective
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	7a Population Health 7c Social model 1a Recruitment plan 6a Clinical services plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Contained within the body of the report

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Potential financial impact if there is not the successful awarding of a GMS or APMS contract and the Practice operates as a Health Board Managed Practice. There is also an additional cost in relation to the managed dispersal of the Practice list.

Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A
Risg: Risk:	There are a number of potential risks associated with the contract termination which have been considered.
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	There is the potential for media, public and political interest.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	

Cross Hands & Tumble Surgery

Public engagement summary V1

(30th October – 26th November 2023)



Background

- On 29 September 2023, Cross Hands & Tumble Medical Partnership served notice to the Health Board on their General Medical Services (GMS) contract giving the six calendar months' notice required as a partnership. The Practice will cease providing General Medical Services within the Amman Gwendraeth Cluster on 31 March 2024.
- The Practice currently provides services to approximately 7,600 patients from their main site in Tumble and their branch site located in Cross Hands Health Centre. The Practice is due to relocate wholesale to the new Cross Hands Health & Wellbeing Centre when completed (target date of 2026), along with neighbouring Penygroes Surgery.
- A Vacant Practice Panel met in October to examine the options available to the Health Board to ensure that these patients continue to have access to services. These options include a formal tender process for a new provider of GMS or APMS, dispersal of the practice list or Health Board managed practice. Based on expressions of interest received and discussions in the Cluster at that time, the Panel identified a formal tender process and dispersal as the preferred options and directed that a public engagement exercise be undertaken on this basis.

The Patient Engagement Plan

- The purpose of this engagement exercise was to raise awareness and provide opportunities for feedback, to target those who use the service through engagement methods that are appropriate, and to use appropriate engagement and communication tools and methods to do this effectively.
- The engagement activity was led by the Health Board Primary Care team supported by the Patient Engagement and Communications teams, and was undertaken from **30th October – 26th November 2023**. The engagement plan was agreed with Llais.
- Communications were sent by post to all registered patients and were bilingual. Social media and press releases were used to raise the profile of the engagement. Two public engagement drop-in events were held in November, one in Tumble and a second in Cross Hands.
- Regular meetings have been held to support team working (Primary Care, Patient Engagement, Communications, Communications Hub, Llais) and to regularly review the plan and its implementation.

Ways patients could engage

- in **writing** by returning paper **questionnaires** to FREE POST address. Paper copies of the questionnaire were made available at both Tumble and Cross Hands and all Community Pharmacies locally
- **online** through 'Have Your Say / Dweud eich Dweud' site (online version of the same questionnaire, no registration required). Link with QR code was included in a letter to all patients.
- by **telephone** to the Communications Hub. All callers were spoken to by the team at the Hub or were individually responded to by the Primary Care team where a response was indicated
- by **email** to the Communications Hub, responded to where indicated
- in person at either of the two **drop-in public engagement events** (Tumble village hall on 8th November, and Cross Hands Club & Institute on 21st November)
- feedback direct to **Llais** online (using the Health Board questionnaire)

Please answer the questions below by selecting the response that best reflects your views.

1. Please let us know the first 5 characters of your postcode [e.g.](#) SA14 6.

2. When was the last time you attended Cross Hands and Tumble Practice?

- ☐ in the last month
- ☐ in the last six months
- ☐ in the last year
- ☐ more than a year ago

3. Thinking about the last time you went to the Practice; how did you travel there?

- ☐ On foot
- ☐ By car
- ☐ By bus
- ☐ By taxi
- ☐ Other ([please state](#))

4. The Health Board is working with stakeholders on a limited number of available options to find a solution to how services can be delivered to patients in future. The Health Board believes that there are opportunities locally for another provider, such as another GP Practice or GP Practices, to provide these services to patients. This would offer patients greater sustainable service provision and continuity of care, therefore at this stage the option for a Health Board Managed Practice has not been considered.

Managed Practices often operate with a GP locum workforce which we know can mean that patients do not get to see the same GP on a regular basis. We recognise that continuity of care is important in delivering quality services to patients. The costs associated with GP locums can be more expensive than having another GP Practice delivering care.

How would you prefer GP Practice services to be delivered for you after March 2024?

- ☐ I would prefer to have Cross Hands and Tumble Surgery operated by another provider (such as another GP Practice).
To do this the Health Board would need to undertake an open procurement process for the contract, and a new service provider would need to evidence how they can deliver

safe and effective care to the Practice population.

- ☐ I would prefer the Health Board to transfer my registration to another local GP Practice.
This would probably be the nearest one to your home address, depending on where you live; this could mean that you are allocated to a Practice that is already closer to your home than Cross Hands and Tumble Medical Partnership.

☐ Other (please state)

5. What is most important to you about your GP Practice (e.g., telephone access, appointment availability, seeing the same team, car parking, friendly staff etc.)?

6. How easy or difficult do you find it to access care from other Primary Care providers in your area (community pharmacies, opticians, dentists). Please rate 1 – very difficult – 5 very easy.

	1 - very difficult	2	3	4	5 - very easy
Community pharmacy					
Opticians					
Dentists					

7. Do you have any other comments or feedback?

Who fed back?

- 588 responses from patients were received in total. This approximates to 7.7% of registered patients
- Patients who completed the questionnaire (by post, online or at the drop-in events) were asked to complete an optional equalities monitoring survey – some patients chose not to complete some or all of the questions in the equalities survey, so the profile data is based on those responses we were able to capture:
 - 65.9% of respondents were aged over 55
 - 27% of respondents considered themselves to have a disability
 - 23% of respondents were carers
 - 60.83% of respondents were women

Q2 When was the last time you attended the Practice?

500 responses to the questionnaire were received

- 48.4% said they had been to either Tumble or Cross Hands in the last month. This included many who said they had been for just a flu or Covid jab. Many of those who attended the drop-in events talked about needing to use the services at the practice on a regular basis.
- 24% said they had not been in the last 6 months

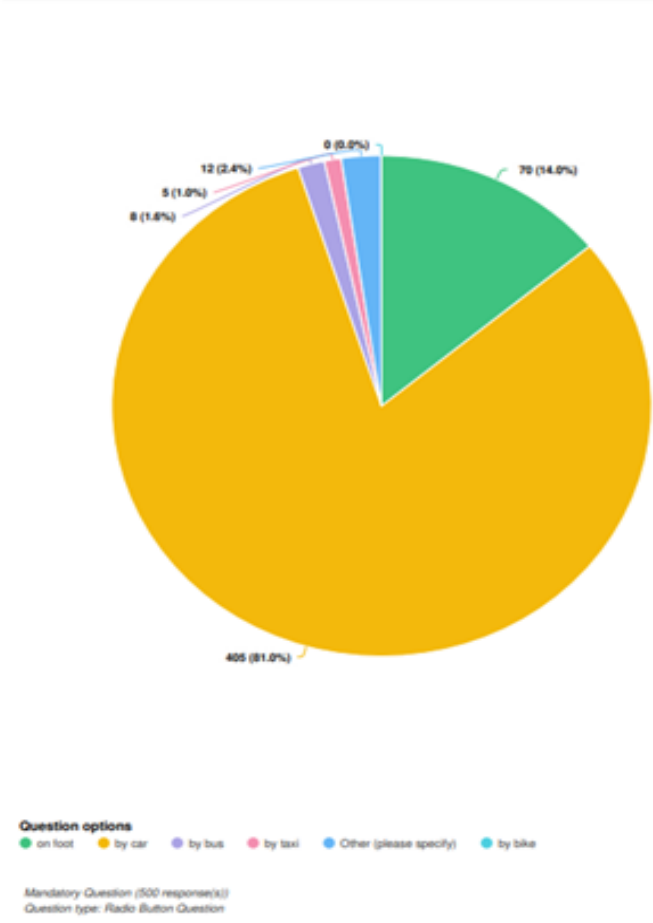
Q3. Travel and transport



Q2 Thinking about the last time you went to the Surgery, how did you travel there?

- a. On foot (14%)
- b. By car (81%)
- c. By bus (1.6%)
- d. Other (including by taxi or by bike – 3.4%)

Q3 Thinking about the last time you went to the Practice, how did you travel there?



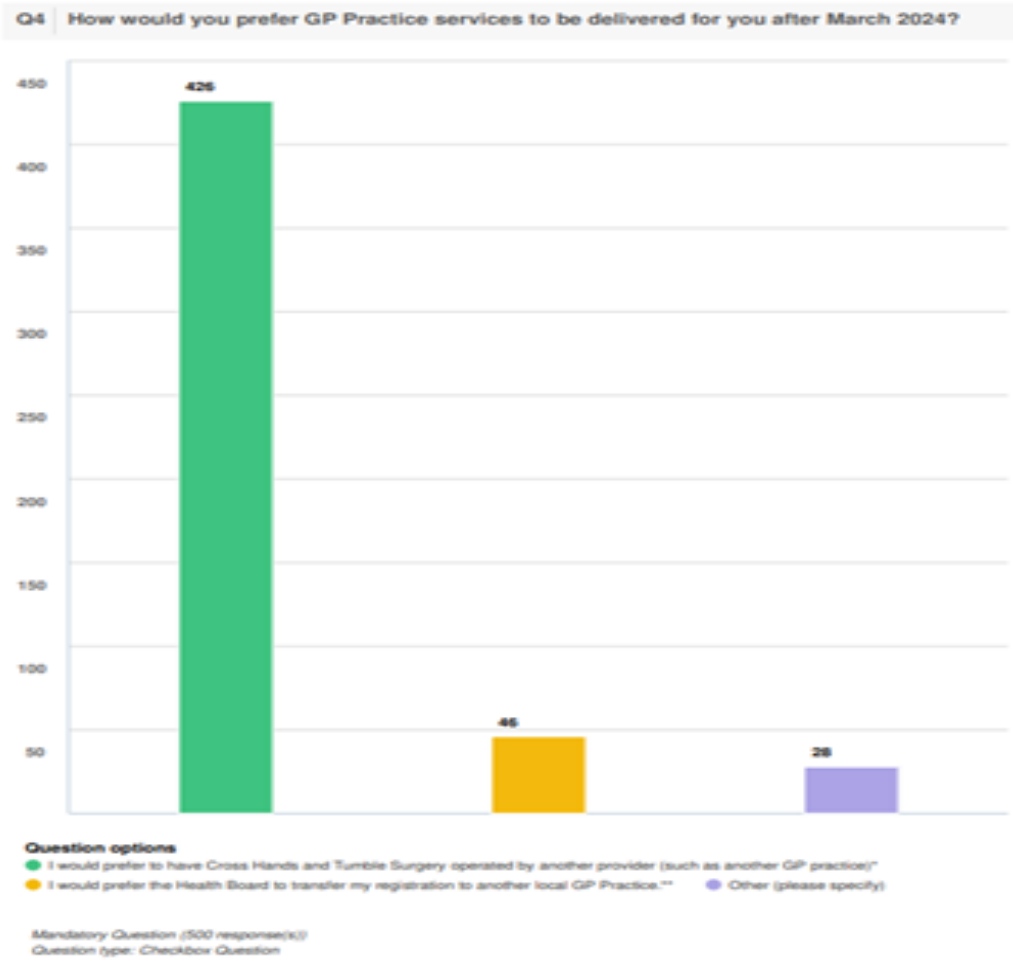
Q4 Options



“The Health Board is working with stakeholders on a limited number of available options to find a solution to how services can be delivered to patients in future. The Health Board believes that there are opportunities locally for another provider, such as another GP practice or GP practices, to provide these services to patients. This would offer patients greater sustainable service provision and continuity of care, therefore at this stage the option for a Health Board managed practice has not been considered.

Managed practices often operate with a GP locum workforce which we know can mean that patients do not get to see the same GP on a regular basis. We recognise that continuity of care is important in delivering quality services to patients. The costs associated with GP locums can be more expensive than having another GP practice delivering care.

How would you prefer GP practice services to be delivered for you after March 2024?”



Q4 Options

- 426 patients (85% of respondents) indicated that they would prefer services to be operated by another provider (such as another GP practice).

Patients attending the drop-in event told us they viewed this as ‘the least worst option’ as it would mean that there would continue to be a Practice for them in the community, even if the current Partnership could not continue.

- 46 patients (9% of respondents) indicated they would prefer their registration to be transferred by the Health Board to another local GP Practice. Conversations at the drop-in events suggest that these may be patients living more rurally who already travelled some distance.

Q4 Other Options



28 patients (5.6%) ticked the box for 'Other', although the free text responses by these patients tended to be comments on the dispersal or tender options rather than an alternative. 7 patients or 1.4% of respondents cited Health Board managed practice as their preference.

At the public engagement events there were some conversations about the option of Health Board managed practice and some patients had some awareness of this through Minafon and Sarn (same Cluster). Patients understood that managed practices were often dependent on locum GPs.

Q5. Patients' priorities

What is most important to you about your GP practice?

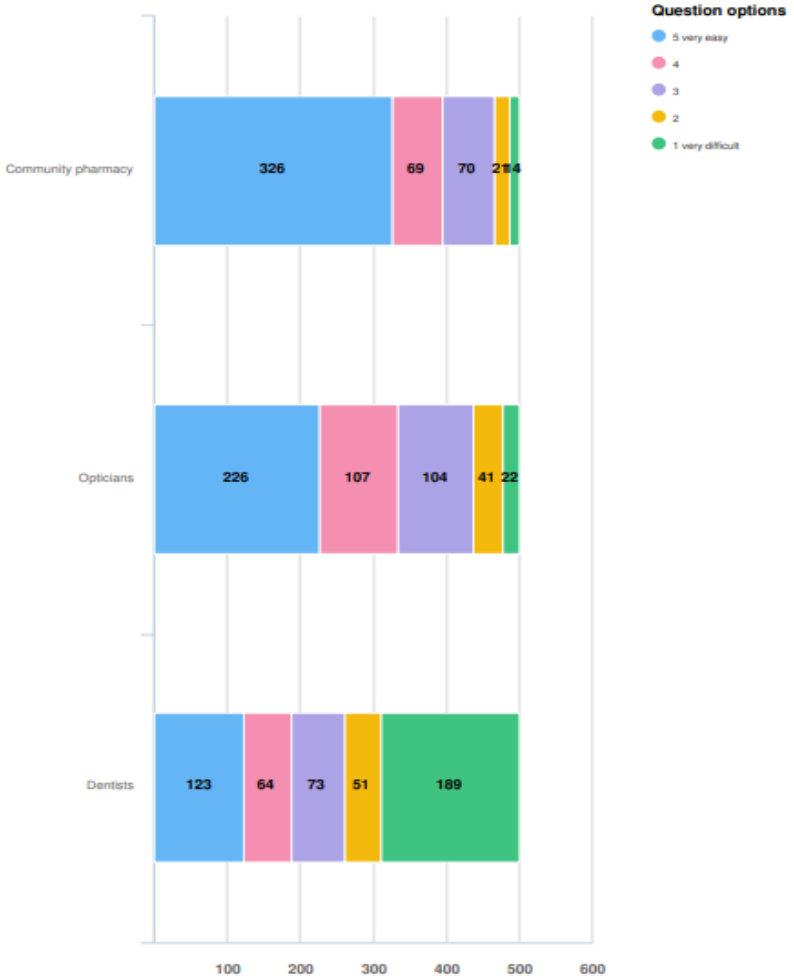
- Access – patients told us they most valued the basics: the ability to get through on the phone and make an appointment, and some said that this was difficult currently. They also valued continuity with familiar doctors when that was possible.
- Patients appreciated the practice team, and having a surgery in their community. Some were critical of the condition of the current premises.



Q6. Other Primary Care providers



Q6 How easy or difficult do you find it to access care from other Primary Care providers in your area (community pharmacies, opticians, dentists). Please rate 1 - very difficult; 5 - very easy.



Mandatory Question (500 response(s))
Question type: Likert Question

We asked patients about their experience of accessing other Primary Care providers locally, including Community Pharmacy, Opticians and Dentists.

Summary of what patients said

A number of common cross-cutting themes emerged during the analysis of responses, including:

- concern about the impact on the **community** if the practice closed due to a dispersal
- concern about the wider picture with neighbouring practices and **GP recruitment** and what this might mean if patients were dispersed to another practice. Many people were of the opinion that other local practices are already 'full' and would struggle to offer them the same level of service.
- concern about **travel** to another GP practice in the event of a dispersal. Many patients at the drop-in events wanted to be able to choose the practice they would be allocated to and sometimes this was not the closest geographically
- concern about **access** to the practice's services currently during the notice period, including issues with the '8am bottleneck' on the phones and difficulties seeing a GP.
- Many patients recognised the challenges experienced by the practice over recent years are not unique but favoured the opportunity to continue the practice through another provider.

Drop-in events

Public engagement drop-in events were held on 8 November in Tumble village hall, and 21 November at Cross Hands Club & Institute. Both were well-supported with a total of 248 people attending.

Those attending took the opportunity to share their views with members of the Primary Care team and to ask questions. Patients were able to complete questionnaires at the event.

Feedback from both events was positive.

Governance process

- 14 December 2023: Extraordinary Public Board meeting to review the engagement feedback and identify the preferred option for the continuation of services for the registered patients
- 30 January 2024: Public Board meeting to receive progress on the implementation of the preferred option
- 31 March 2024: end of the notice period
- 1 April 2024: transition to the preferred solution for how services will be delivered