



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	23 February 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Solva Surgery, North Pembrokeshire Cluster
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jill Paterson, Director of Primary Care, Long Term Care and Community
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 8 December 2022, Solva Surgery terminated their General Medical Services (GMS) Contract held by the Practice, giving the required three calendar months' notice to the Health Board as a single-handed Practice. The Practice will therefore cease providing General Medical Services to its registered patients within the North Pembrokeshire Cluster on 31 March 2023.

The Health Board's Vacant Practice Panel met on 9 January 2023 to consider an options appraisal for how general medical services could be delivered to the patients of Solva Surgery from 1 April 2023. After detailed discussion, the Panel agreed that a recommendation be made that the public be engaged on two options; a managed dispersal of the patient list (whereby patients would be allocated to another GP Practice closest to their home address) or that the Practice become a Health Board Managed Practice. An update on the process was presented to the Health Board at its Public Board meeting on 26 January 2023.

A period of public engagement was undertaken from 9 January 2023 to 5 February 2023 to seek the views of patients and stakeholders on the two viable options identified by the Panel. All patient feedback was shared with the Community Health Council (CHC) ahead of its Executive meeting of 13 February 2023.

A second Vacant Practice Panel was convened on 13 February 2023 to consider the patient and stakeholder engagement feedback received, and the work alongside this on the two options under consideration. The Health Board is asked to consider the engagement feedback and the Recommendation of the Vacant Practice Panel of 13 February 2023 and to decide on how general medical services should be provided to the Practice population of Solva from 1 April 2023.

Cefndir / Background

Patient Engagement

A public engagement plan was drafted and then approved by the CHC on 5 January 2023. This has been subject to regular review with the CHC during the engagement period which ran from 9 January 2023 to 5 February 2023. In line with good practice, the engagement was on the basis of viable options only as defined by the Panel on 9 January 2023; that is the dispersal of the patient list, or a Health Board Managed Practice.

The plan aimed to raise awareness of the engagement and provide opportunities for feedback, for patients and stakeholders to give their views, and included a drop-in event in Solva, a questionnaire (returnable by Freepost, online and at the drop-in event) and other routes to feed back or share concerns, including by email and telephone. All registered patients were sent a letter of invitation to the event along with the questionnaire, and the messaging promoting engagement was supported at a local level by Solva Community Council, Solva Care and Together for Change.

People were able to share their views by the following methods:

- In-person at the public engagement drop-in event on 24 January 2023 at Solva Memorial Hall
- By questionnaire (paper copy posted to all patients): to be returned by Freepost or to a collection box at Solva Surgery
- By telephone to the Communications Hub: calls were logged in Sharepoint for the Primary Care team to respond to where indicated
- By email to the Communications Hub: emails were logged in Sharepoint for the Primary Care team to respond to where indicated
- In writing (Freepost)
- Online: by questionnaire on the Health Board's Have Your Say / Dweud eich Dweud website
- By feeding back to the CHC (using the Health Board questionnaire)

The drop-in event on Tuesday 24 January 2023 at Solva Memorial Hall was very well-supported, with 249 people attending over the course of the afternoon and evening (over 10% of the Practice population). This event was an opportunity for people to discuss their concerns with members of the Primary Care team (and other teams supporting) and share their views. The concerns expressed by people at the event mirror those reflected through the questionnaire.

A Power Point summary of the feedback from the public engagement exercise is at Appendix 1. This summarises the approach, methodology and key themes to emerge from the feedback. Anonymised verbatim feedback from patients responding to the questionnaire is provided at Appendix 2.1 (English) and Appendix 2.2 (Welsh). Feedback received by email, telephone and by letter is at Appendix 2.3, and feedback received by the CHC is at Appendix 2.4.

The main themes to have emerged from the broader patient engagement were:

- Concern about the impact on the community of Solva if the Surgery closed, as it is central to the quality of life for residents
- Concern about travel to another GP practice in the event of a managed patient dispersal. Many patients expressed their appreciation for the good car parking facilities at Solva Surgery, as opposed to other neighbouring practices (and especially St David's)

- Concern about continuity of care. Many patients noted the friendly and professional staff at Solva Surgery
- Concern about the future of dispensing services. Patients noted how they valued the convenience of collecting medication from the Practice and how they would struggle to do this from a Community Pharmacy as an alternative
- Concern that if the Practice is dispersed, that the neighbouring Practices did not have the capacity to absorb the influx of patients, especially St David's Surgery. Many patients commented that they thought other practices are 'full' and that they would struggle to offer the same level of service as Solva Surgery.

The majority of those patients feeding back through the questionnaire and attending the drop-in event were older in age and many of their concerns reflected this, with references to 'MOTs' for older people, chronic disease monitoring and care of the elderly. Relatively fewer patients from the younger age groups have engaged (19.7% of respondents who answered the question about their age said they were under 45 years of age), 46% of the Practice population are aged 49 and under.

An equalities monitoring survey was appended to the questionnaire, along with an explanation in the letter to patients of why this is being requested. The Equality Impact Assessment is at Appendix 3.

Stakeholder Engagement

In parallel with the patient engagement period, stakeholders were identified and were sent a letter dated 6 January 2023 to invite their feedback. These included other services within the Health Board which could be affected by changes such as the Community Pharmacy team, County team, the North Pembrokeshire Cluster Lead, the General Manager at Withybush and Out of Hours service. Stakeholders external to the Health Board included all neighbouring GMS Practices, local Community Pharmacies, local, regional and national politicians and community councillors for the eight community councils covered by the Practice area. Also included were Solva Care and Shalom in St David's.

A virtual meeting took place with Council and Community Council representatives of the wards covered by the Practice area on 30 January 2023, chaired by the Director of Primary Care, Community and Long Term Care. This meeting provided an opportunity for representatives to have a briefing on the situation and process, and the public engagement exercise. This was attended by four local Councillors (Appendix 4.1).

Among the prominent and active stakeholders in the local community is Solva Community Council, Solva Care and Together for Change. Solva Care is a registered charity and community project to improve the health and quality of life of Solva residents (not the wider area), established in 2015. Solva Community Council has established a working group and two public meetings have been held by the Community Council. The first meeting included small groups discussing their thoughts on services currently at the Surgery which focussed chiefly on access and services, and how services could better meet the needs of the community. This identified a number of diverse services beyond the scope of general medical services (Appendix 4.2).

E mail correspondence has also been received from Solva Community Council and Together for Change (Pembrokeshire-wide partnership project looking at the legacy of COVID-19 which is founded by and funded through Solva Care). A written proposal has been forwarded to the Health Board (Appendix 4.3) by Solva Community Council for a 'Solva and District Community Health and Care Hub' based at the Surgery and providing a very wide range of functions and

services from the Surgery premises. The proposal asks that the Health Board considers purchasing the building as a base to provide GP services, community-based clinics, other clinics such as physiotherapy, chiropody and ophthalmology, and also to provide a base for community carers and an educational facility for the community. In the event that the Practice becomes managed by the Health Board, there would need to be structured engagement with the community on their proposal.

A letter from the Chair of Solva Care is at Appendix 4.4, with accompanying detail at Appendix 4.5. Solva Care coordinates a team of volunteers who visit older and more vulnerable people who need help with daily tasks and also provides respite support to carers. Examples of support includes lifts to appointments, help with shopping, collecting prescriptions and befriending.

Following the virtual meeting with local councillors of 30 January 2023, feedback was received from Llanrhian Community Council (Appendix 4.6) and Mathry Community Council (Appendix 4.7).

Dispensing

One of the chief concerns expressed by patients was regarding the risk to the dispensing service posed by the Contract termination. The dispensing rights sit with the current single-handed Contractor (GP) as the named individual and legal advice has indicated that these rights cannot be transferred to another GP in the event of either a dispersal or a Managed Practice. Legal advice has been sought and a review of the provision of Pharmaceutical Services will need to be undertaken, in line with the Pharmaceutical Needs Assessment (PNA) Regulations following the cessation of dispensing rights on 31 March 2023. If it is determined that dispensing rights should be reinstated, following a review of the provision of services under the PNA, which will entail public engagement, then the Regulatory process to do this will need to be considered and followed. In the meantime, work will continue with the Community Pharmacy Collaborative and the North Pembrokeshire Cluster to look at interim service provision from existing contractors. The Health Board will work with the CHC to increase the awareness of patients regarding the services which are available through Community Pharmacies and how these services can be appropriately accessed.

Solva Surgery has not previously engaged with the Dispensing Services Quality Scheme (DSQS). However, the Practice did agree to a visit on 27 January 2023, which has identified some areas of concern that are being addressed through the contract Regulations.

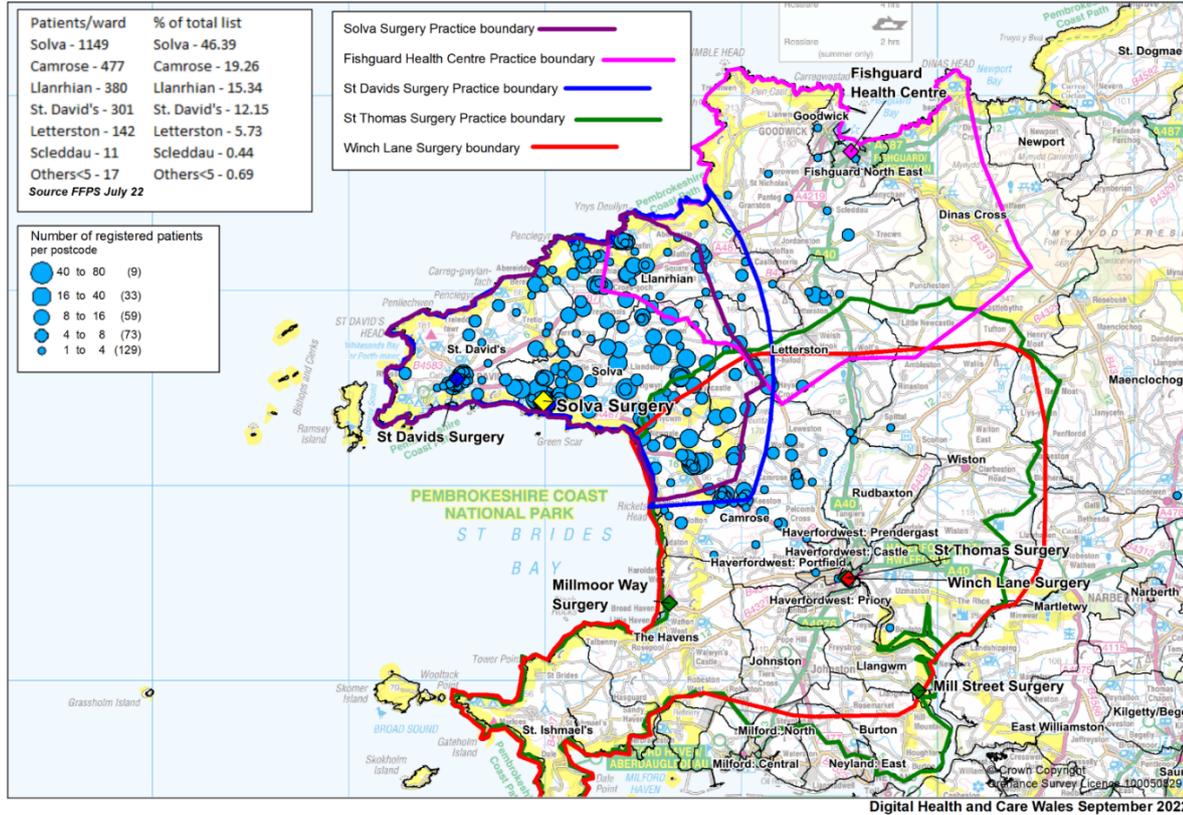
In comparison with other Pembrokeshire Practices, Solva Surgery issues the lowest average quantity of medication per item. Therefore, it is to be expected that Solva patients make more trips on average to collect medication than other Pembrokeshire patients and that the potential loss of this service is prominent in the feedback from patients.

Engagement with neighbouring GMS Practices

The Vacant Practice Panel of 9 January 2023 identified the managed dispersal of the patient list to neighbouring Practices as a feasible option which should be further explored. The neighbouring Practices identified as having Practice boundaries that overlap with the current Solva Surgery patient areas include St. David's Surgery, Fishguard Health Centre, Winch Lane Surgery and St Thomas's Surgery in Haverfordwest. This option was re-examined by the Vacant Practice Panel of 13 February 2023.

Figure 1 Solva Surgery boundary and patient distribution, and boundaries of neighbouring practices

Hywel Dda UHB patient distribution - W92059 Solva Surgery



An exercise was undertaken to examine travel times from postcodes of patients to the nearest Practice other than Solva Surgery. This produced software modelling of the numbers of patients and maps of their postcode locations (all data anonymised and aggregated by postcode) which informed face-to-face discussions with Partners and managers from these four Practices. The number of patients to be allocated to each of the four Practices was determined by the minimum travel time from the patient's home address (by postcode) to one of sites operated by these Practices. In the case of St Thomas's Surgery and Winch Lane Surgery, which are located very close together, a further exercise was undertaken to identify those postcode areas where either Practice already had patients registered (and was therefore already serving that postcode area with home visits where clinically appropriate).

Based on the revised software modelling the numbers for allocation are as follows (ie. the closest Practice to the patient's postcode):

Practice name	Current list size	Allocation of patients from Solva Surgery	New list size	% increase in list size
St. David's	2575	1751	4326	68%
Fishguard Health Centre	9574	87	9661	0.9%
Winch Lane Surgery	15081	327	15408	2.2%
St. Thomas's Surgery	13058	267	13325	2%

Feedback in writing from the four Practices is at appended to this report:

- Feedback from St David's Surgery – Appendix 5.1
- Feedback from Fishguard Health Centre – Appendix 5.2
- Feedback from St. Thomas's Surgery, Haverfordwest – Appendix 5.3
- Feedback from Winch Lane Surgery, Haverfordwest – Appendix 5.4

Separate meetings took place in January 2023 with representatives from all four Practices (virtual or in person) and were characterised by an empathetic recognition of the unfortunate situation in Solva and realism about the limited options that the Health Board has to work with in the circumstances.

The objection to any dispersal to St David's Surgery from that Practice was that they would be expected to take over 70% of the patients, which is a significant consideration, recognised by the Vacant Practice Panel. In recent discussions, St David's Surgery has stated to the Health Board that a dispersal would be perceived as a threat to their own sustainability and may trigger them to service notice on their GMS Contract. The longer-term future of St David's Surgery is also uncertain due to planned retirements, the lease and challenging financial viability for very small Practices. The Practice has consistently opposed a managed dispersal on the basis that it could not manage such a large influx of new patients within the constraints of staffing, space and clinical oversight. In the event of a managed dispersal, it should be anticipated that St David's Surgery would decline to co-operate with the necessary data transfer of electronic patient records and registrations.

295 patients, equivalent to approximately 12% of the total list size, reside outside of the Practice boundary. In the event that the Health Board decided to establish a Managed Practice in Solva, consideration should be given to dispersing these patients as part of the transition into the new working arrangements. If this decision is taken, it is important to note that this would be managed through a direct allocation process with the patients notified of the outcome, but that this would be supported with an appeals process to deal with any exceptional circumstances that might prevent patients from registering with a Practice closer to their home address.

- Fishguard - 50 patients
- St Thomas - 108 patients
- Winch Lane -136 patients

Feedback from the Cluster Lead for North Pembrokeshire is at Appendix 6.

Data transfers (dispersal)

The electronic transfer of patient records from the Solva Surgery clinical system to the receiving Practices for their allocated patients is intrinsically complicated and this is compounded by the five Practices involved running a combination of Vision and Emis clinical systems and scanning solutions.

An outline plan has been discussed with Shared Services Partnership (SSP) and Digital Health and Care Wales (DHCW) for the bulk transfer of electronic records for St David's Surgery and St Thomas's Surgery through the system supplier, and GP2GP for Winch Lane Surgery and Fishguard Health Centre.

It should be noted that both processes require the explicit consent of the receiving Practice, either through a signed consent process ahead of a trial data merge for St David's and St Thomas's or through the acceptance of the electronic transmission of records via the Links system for Winch Lane Surgery and Fishguard. It is not possible to transfer either the registration or electronic patient records without the consent and co-operation of the receiving Practice.

Transitional support funding

An offer of discretionary transitional support is available to eligible Practices receiving new patients who are allocated to their Practice through a managed dispersal, to provide additional resources to assist in this process:

- The ongoing assimilation of the new patients;
- The assessment of their health needs; and
- Integration into the receiving Practices' model of care.

This is claimable at £30 per patient and is addition to GMS income associated with each patient.

Asesiad / Assessment

Vacant Practice Panel 1: 9 January 2023

Following detailed discussion at the Vacant Practice Panel of 9 January 2023, the Panel agreed a recommendation that the following two options should be further explored through public and stakeholder engagement as options which may be feasible for the delivery of GMS services from 1 April 2023:

- The dispersal or re-assignment of Solva Surgery's Patient List to neighbouring Practices (those being St David's Surgery, Fishguard Health Centre, Winch Lane Surgery and St Thomas's Surgery); and
- Establishing a Health Board Managed Practice.

No Expressions of Interest were received from existing GMS Practices in Pembrokeshire to take over the provision of general medical services for Solva Surgery from 1 April 2023. The Panel considered the options requiring procurement of a new GMS or Alternative Provider Medical Services (APMS) Contract as not feasible within the challenging timescale.

Following the Panel meeting of 9 January 2023, separate workstreams were defined to further explore the two options of managed dispersal or Managed Practice. Targeted conversations have taken place with the four Practices that would be affected by a dispersal, and work has been undertaken on some elements of initial due diligence for a Managed Practice.

A period of Public Engagement was undertaken from 9 January 2023 to 5 February 2023 to seek the views of patients and stakeholders on how they would prefer services to be delivered in the area after 31 March 2023 and to identify any concerns that they may have. All patient feedback was shared with the CHC and was considered by their Executive at a meeting on 13 February 2023.

Vacant Practice Panel 2: 13 February 2023

The Panel met a second time on 13 February 2023 to consider the two options in light of the patient and stakeholder feedback. There was a robust discussion on the level of risk posed by both options, recognising that neither offered the desired outcome of a solution for the provision of a longer term sustainable service for health care within the North Pembrokeshire Peninsula. The Panel recognised that concerns about the challenge of staffing the medical rota in a Health Board Managed Practice persist, as it would be likely that the Practice would be dependent on locums to a large degree, at least in the short-term. It was however unanimously agreed that, notwithstanding the risks, the Panel would recommend that the Health Board take over the provision of General Medical Services for the registered population of Solva Surgery via a Health Board Managed Practice for a period of 12 months initially, during which time further work would be undertaken to secure the future Service provision, including more detailed discussions with the local community.

It was acknowledged that, in doing this, the current dispensing rights would cease on 31 March 2023, and the CHC therefore committed to working with the Health Board to ensure that patients were given as much information as possible about accessing alternative Community Pharmacy services and recognised that, in doing so, patients would also be able to access the wider range of services provided by Community Pharmacies which are not provided through the Practice Dispensing service upon which they have relied to date. It was noted that, whilst the dispensing rights would cease, there would be an opportunity to review the provision of Pharmaceutical services and to make a determination on the future model through the Pharmaceutical Needs Assessment (PNA) Regulations.

The Panel also recognised that there are currently 295 patients registered with Solva Surgery who live outside of the Practice boundary and, as such, they should be removed and registered with a Practice which is geographically closer to their home address. In taking this action it was acknowledged that an appeals process would be put in place for any exceptional cases to be considered.

Whilst there was concern over both a reduction in the Practice list size, and the loss of the Dispensary, it was considered that neither would be detrimental to the future strategic aspiration of finding a longer term sustainable solution for the provision of Primary Care services on the Peninsula. The Panel recognised that very small Practices are increasingly challenged with sustainability due to their small scale and that it will be essential that discussions are initiated to consider opportunities to develop the strategy for the Peninsula, and within that context, determine what services may be provided locally within the Solva area.

Current position

Work to support the team in the Practice through the notice period continues. Meetings with the Practice Manager are held weekly and communication is constructive. To date the staff have remained in-post, despite the uncertainty about the future of their roles. The Practice has been asked to disclose information about the current staffing in line with The National Health Service (General Medical Services Contracts) (Wales) 2004 Regulations – Schedule 6, part 5, Paragraph 76, as there will be limited time to run any appropriate Transfer of Undertakings (Protection of Employment) (TUPE) process for any staff transferring to Health Board employment. The Practice has indicated that in the event that the Practice becomes managed by the Health Board, the retiring Partner who is the property owner would be willing to enter discussions with the Health Board regarding a lease. Some initial work has been undertaken by the Health Boards Estates team to assess the Solva Surgery building.

Argymhelliad / Recommendation

The Board is asked to:

- **NOTE** the work undertaken as part of the Vacant Practice Process and the associated patient and stakeholder feedback.
- **SUPPORT** the recommendation from the Vacant Practice Panel on 13 February 2023 that the ongoing provision of General Medical Services for patients currently registered with Solva Surgery should be transferred to a Health Board Managed Practice from 1 April 2023 and that the Health Board will review the arrangements in 12 months.
- **AGREE** that a working group with members of Solva Community and Partner Agencies, Primary Care Contractors and the Health Board, is established, with clear terms of reference to explore a solution for the ongoing provision of sustainable services for Solva and the North Pembrokeshire Peninsula in line with the Health Board's strategic direction; to report back to the Board by December 2023.
- **AGREE** that, in the event that there are repeated instances of the clinical rota failing to provide safe and adequate levels of cover, the Board will be asked to review its decision; as with any other Health Board Managed Practice, but particularly pertinent when considering a smaller Practice that may only have a single GP rota.
- **AGREE** that the patients who have been identified as living outside the current Practice boundary are advised in writing that they will be removed from the Practice list, with an allocation to a Practice that is geographically closer to their home address. In doing so, an appeals process will be established to consider any exceptional cases.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	1451 Risk of increasing unsustainability of GMS Practices 1109 – No doctor days in MP due to challenges in securing GP cover 933 – Non compliance with national premises guidance in Managed Practices
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	5O_21 Fragile Services 2K Organisational listening, learning and cultural humility
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	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

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Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Engagement HQ software Patient and stakeholder feedback received
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Vacant Practice Panel, 9 January 2023 Vacant Practice Panel, 13 February 2023

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Financial impact of two feasible options identified at Vacant Practice Panel 9 January 2023.
Ansawdd / Gofal Claf: Quality / Patient Care:	Services are being delivered as normal by the Practice through its notice period to 31 March 2023. Impact on registered patients of the two feasible options identified at Vacant Practice Panel 9 January 2023.
Gweithlu: Workforce:	Unknown at this point, the impact on the Practice staff as employees of the Independent Contractor is not known until a solution is identified. TUPE may apply.
Risg: Risk:	Patient safety risk associated with the transition of services to be assessed and a plan to be developed.
Cyfreithiol: Legal:	Requirement within process to ensure the Health Board's statutory duties in this respect are adhered to.
Enw Da: Reputational:	Reputational impact on the Health Board of change to how services are delivered to patients
Gyfrinachedd: Privacy:	Not applicable.
Cydraddoldeb: Equality:	Equality Impact Assessment completed.