

Appendix 5 - Emails from patients

5.1 Received 23/01/2026: Dear Prof. Kloer and Mr Henwood, I am contacting you today regarding the proposed closure of Meddygfa'r Sarn /Pontyates surgery. The surgery is an integral part of the village and surrounding area, serving the community very well with an approachable and dedicated team who go out of their way to do what they can with available resources. Closing the facility would be a great loss to the local people. The proposal to distribute the current list amongst 3 other practices seems unworkable for the following reasons:-Two of the three practices – Kidwelly and Ashgrove – are already working beyond capacity, with patients endlessly complaining of difficulties getting appointments, test results, phone contact, continuity of care etc. it seems the situation can only get worse if more patients are suddenly added to their list. Regarding the Pontyberem facility, I know very little about the surgery other than I understand it is looking to expand its list. Were this to happen, are they in a position to adequately manage all the extra patients or will they end up in the same overload situation as Kidwelly and Ashgrove? Also, how likely is it that Pontyberem may find itself in a similar situation as Pontyates, back in the hand of the local health board with no resident GPs in the future. The logistics of getting to the new surgeries will be a problem for the elderly and most vulnerable in our community – these are people who are most likely to need face to face primary care. Buses here, Ffos Las, go every two hours, to get to Pontyberem or Kidwelly you also need to change buses enroute, making it a very arduous journey at the very least. For some the only option is to use a taxi. A taxi from here to Pontyates is around £10 return, to Kidwelly and Pontyberem it's around £30 return. That would be a huge, often unaffordable increase for people who have no choice. There is a small surgery in Trimarsen but access to services there is very limited. Will there be any help available for these patients to transport them to their new surgery or more availability of home visits? GP retention and recruitment has been a major problem in Hywl Dda for many years, and yet no progress has been made in improving the situation, I might suggest it is actually getting worse. Maybe a more radical approach is needed? I am a great advocate of primary care, I believe if communities have good quality primary care they are healthier, most problems are addressed and resolved long before they become critical. This takes the pressure off hospital and social care settings allowing them to cease fire fighting and proceed with measured care. This in turn not only saves money but also saves suffering and ultimately lives. I ask that you and the other board members consider the above points before making a decision regarding Pontyates surgery. Yours respectfully,

5.2 Received 10/02/2026: Dear Members of the Health Board, I am writing to formally object to the proposed closure of my local GP practice, in Pontyates. This practice is a vital service for the local community, particularly for older residents, people with disabilities, and those managing long-term health conditions. Many patients rely on its close proximity due to mobility issues, chronic illness, or limited access to transport.

Requiring patients to travel further will create a significant barrier to accessing timely and appropriate primary care. The loss of continuity of care is also a serious concern. Patients at this practice benefit from longstanding relationships with the practice who understand their medical histories, complex needs, and social circumstances. Disrupting this continuity risks poorer health outcomes, mental health issues and increased pressure on already overstretched urgent and emergency services and local practices. This practice plays a crucial preventative role, helping to manage conditions early and reduce hospital admissions. Closing this surgery is likely to increase demand elsewhere in the system, rather than reduce costs or improve efficiency. I respectfully urge the Health Board to reconsider this decision, fully assess the impact on patient access, equality, and health outcomes, and meaningfully engage with patients and the local community before proceeding further. I urge you to continue efforts to engage permanent GPs by offering incentives. I propose a redistribution of non local patients be undertaken immediately to reduce costs and pressure before any other action is considered. All avenues have NOT yet been explored. Thank you for taking the time to consider this objection.

5.3 Received 10/02/2026: Good morning, I am trying to complete the “have your say” survey for the Meddygfa'r Sarn surgery discussion. The website is not working correctly and the surgery is not available, it's going around in a loop. I am not the only person this is happening to. How can we give our views when the mechanism to do so is not available? Will the Health board take into consideration the failings of their own systems when considering how many people manage to complete their survey? Please send me the survey.

5.4 Received 10/02/2026: The health boards decision to close Pontyets surgery is a bad move. It's worked effectively for years so why now. Moving patients from A to B is only putting more pressure on other surgeries. Our NHS is in trouble, accessing services is dire.

5.5 Received 10/02/2024: Hello. I am writing to say that as a patient of the above surgery, I am not happy with the plans to potentially close the surgery and disperse the patients out to other surgeries. This surgery is close to where I live in Carway and there is also a chemist close by. I worry how I will get to other surgeries as I am able to walk to this one. The surgery has been brilliant and I would feel very anxious if it closed. Other surgeries are already massively stretched so I also worry about the impact on appointments, treatment, and care and the negativity of this.

5.6 Received 07/04/2026 via the Save Sarn Surgery Working Group: Sustainable Healthcare Planning in Carmarthenshire: A Community Perspective

The Welsh Government would like to see more primary healthcare concentrated in local communities. Carmarthenshire County Council, in its statutory role of providing new

homes has identified in its Local Development Plan Service Centres where new development should be concentrated in order to sustain local communities. These are Kidwelly, Trimsaran, Pontyates and Pontyberem. Over the plan period 2018 to 2033 some 550 new homes have either been constructed already or are awaiting approval. In Pontyates some 93 new houses could be built. At the same time there has been no increase in the provision of primary health care. The proposal to close the established doctor's surgery in Pontyates and require patients to travel to either Kidwelly or Pontyberem, both of which are already heavily over subscribed with long waiting lists is totally unrealistic. At a time when all government advice is to reduce the need to travel by car and use public transport, not only is this contrary to the policies of other public sector bodies it is impossible in a rural area with inadequate public transport. It will in effect deny many people access to primary health care and force them to use emergency services at Glangwili or the minor injuries unit at Prince Philip in Llanelli. The surgery in Pontyates has a large footprint and is capable of being extended and upgraded to meet modern clinical needs. The freeholders control land in the surrounding area which would allow other integrated health provision. The surgery was built to modern standards in 1988. To even consider abandoning such a facility is unsustainable when one considers the public investment already made. In order to fully understand the true costs of closing the surgery and dispersing patients to the other surgeries requires assessing whether they can accommodate the growth within their existing footprint, if so the costs of certain adaptations must be taken into account. If not the costs and timescale of expansion including the need for planning permission could be significant. Both sites look restricted compared to Pontyates. There will be numerous other costs such as updating computer systems, travel time for staff and patients, redundancy, and importantly the securing of an empty building or its demolition and clearance. The concept of embedded energy is important in this context it describes the total energy already used to build and maintain over the years and in the future. As this is also a loss but is measured in mega joules not monetary terms. In a period of accusations of waste by public authorities, this is an example which the incoming Welsh government might want to address. There is also the human costs associated with the proposed dispersal. The welfare of the patients has not been considered when it should have been paramount. Many will simply not be able to access primary care either because they have no access to a car, public transport has been shown to be nigh impossible, the move to digital technology in healthcare is beyond the many in the community. In summary the Health Board- are proposing take a form of action which is contrary to not only its own responsibilities but those of all other public bodies including the former Welsh Government.