

Proposed merger of Manor and Clinton Road surgeries, Redruth

Frequently Asked Questions (FAQ's)

What specific changes are proposed and who will make the decision:

- We are proposing to merge the Manor Surgery and Clinton Road GP practices
- We wish to change the current Clinton Road practice boundary
- We have asked for permission to close the Clinton Road site and dispose of the building
- We are in discussions about leasing the Redruth Health Clinic site
- How will these changes impact on you and if they go ahead what would help address any concerns you have?
- We also want to hear peoples views about future priorities for improving the service

NHS Kernow Clinical Commissioning Group will consider our applications and the views of local people before making decisions – the feedback from the consultation process including the virtual public meeting held on 20 April 2021 feeds into that process

What is the background to the proposed changes:

General practice nationally and locally is under pressure and in April 2020 the two practices started working together on the Manor Surgery site to maintain a safe service for our patients. This was driven by a long standing consideration of the potential to merge but exacerbated by the Covid-19 pandemic coupled with long term absences of senior GP's due to ill health. This has generally worked well, although we know there is more to do and has confirmed the view that merger is our preferred option Together we are more resilient and can provide better primary care services to people in Redruth. This is also in keeping with both local and national NHS priorities to strengthen primary care and develop integrated services locally.

Our present buildings need to change as well. The Clinton Road site is a lovely building but not suited to modern general practice. It is on a steep site and access particularly for those with physical disabilities is poor both externally and internally. There is no designated car parking provision and it can be difficult to find spaces in what is a busy residential area.

When would the changes happen:

If approved by NHS Kernow CCG the merger and associated changes would take effect from 1 July 2021

It can be difficult to get through on the telephone and make appointments - what are the practices planning to do to improve this?

We are sorry to hear that some patients find it difficult to get through on the telephone or to get the help they need. We have also had a few comments about the helpfulness/attitude of some reception staff at Manor Surgery. Other patients have told us they have found it more difficult to make appointments. Please accept our apologies for this and be assured that these matters will be addressed.

Clearly everyone has faced additional pressures during the past year which have added to already busy workloads. The Partners recognise that whilst the clinical team has been working together well insufficient attention has been paid to ensuring that the same applied to administrative support. The practice has recruited an experienced operational manager who is introducing standardised procedures and ensuring all staff receive additional training. There are also changes being made to the telephone system and working arrangements to improve the service provided to our patients. We have also received feedback about the need to improve the choice of music used while patients are waiting on the phone and have asked our supplier to help us address this as soon as possible.

Will I still be able to see my preferred GP as I am worried continuity of care will be lost in a bigger practice?

The GPs are very keen to ensure there is continuity of care for their patients and want to retain the 'family doctor' feel of the practice. They plan to organise into two smaller teams within the practice to help ensure that patients can see a doctor of their choice or another member of that team when they are unavailable. Each team will have a mix of GP's from the two existing practices and patients will be assigned to the team of their usual GP. Where a patients usual GP is retiring they will be assigned to a GP from that surgery to provide as much continuity as possible.

Will I be able to still see my own doctor as he/she knows about my ongoing health issues?

We recognise that where a patient has ongoing health issues that continuity of care from the doctor, nurse or other clinician who is familiar with their care works best for both the patient and the clinician. Patients will be assigned to their usual GP so if you regularly see a particular doctor you will be able to make an appointment with them. The doctors also have a personal assistant providing them with administrative support and they will sometimes be asked by the doctor to contact you or make arrangements for any appointment. If you need to be seen more urgently an appointment with your own doctor may not be available but you would instead be seen by the duty doctor from that team.

What about where I am unhappy about seeing a particular doctor will my wishes be respected?

We recognise that sadly on occasions the relationship between an individual doctor (or other clinician) and patient does break down. It is important that a patient has confidence in the person treating them and their wish not to be treated by an individual will always be respected.

Could the call back triage service be improved as it is difficult when you are working and don't know when you will be telephoned?

This point is well made and as part of the planning to change the appointments system and get back to post-pandemic ways of working we will consider how we can provide patients with better information about when they will be telephoned back as we recognise this is particularly difficult for those who are working or have other commitments.

Will you be seeing patients in the near future? I much prefer to SEE my GP rather than video or phone call

During the pandemic we have treated more patients without the need for a face to face appointment and that option will continue to be part of the future way of working. Some patients prefer this unless the doctor needs to see them for clinical reasons and find it more convenient. However we know many people do prefer a face to face appointment and as the pandemic pressures are reducing we are already increasing the amount of patients we bring into the surgery.

You are proposing to expand services for adults, will there be further services provided for children? Physio? Cardiac services?

NHS England is very keen to reduce the use of large hospitals as much as possible for a variety of reasons. Not least because, more convenient for patients is to access healthcare near to their homes and often it's a far more effective way of providing that healthcare. We'd like to consider working with colleagues such as heart failure nurses, diabetic specialist nurses outreach specialist clinics from, for example rheumatology and orthopaedics and if we do manage to secure the services or the use of the space at Redruth Health Centre we're hoping that we can work with colleagues there to do that including considering improvements to services for children and young people.

I have been fortunate not to have seen a doctor for some time. My partner and I have only seen the cardio nurse who I believe has now retired from this position. What is happening about review appointments?

The practice has appointed a full-time cardiac nurse specialist to replace the person who retired so please be assured that all follow-up/review appointments will go ahead.

Would the surgery be opening up during the evenings or on a Saturday?

In line with Government advice the 'extended access' surgeries which were provided during evenings were suspended so that the pandemic response could be prioritised. As things get back to normal the practice will consider how to provide increased flexibility for patients by re-opening some extended access.

What are you doing about car parking?

There is a reasonable amount of patient car parking however there are times when getting a space is difficult and this has been particularly problematic while there are busy vaccination clinics being held in Redruth Health Clinic.

Car parking and particularly ensuring that the upper car park by the Manor Surgery building is protected for those who have mobility issues and is not used by those just 'popping in' to the pharmacy has been raised by a number of respondents. We will certainly look at what can be done – for example ensuring that disabled parking spaces are more clearly marked and that where those not entitled to use them are seen parking there this is challenged. We will also be talking to the Council about whether there are other local options to improve car parking provision.

Some people used to the Clinton Road site have told us they have found it much easier to park now that services are provided at the Manor Surgery. Equally some had chosen Clinton Road as they could walk there and that will not be possible if the proposal to close the site is agreed.

What are you doing about the queues at the on-site pharmacy?

Social distancing requirements mean that in such a small pharmacy customers are having to wait outside sometimes for quite lengthy periods. The space used by the on-site pharmacy is rented from the GP practice and any changes would primarily be a matter for the company (Boots the Chemist). The practice will share the feedback about both the often lengthy queues to get into the on-site pharmacy and added pressures their customers cause on car parking to see if they can suggest any improvements.

As GP practices are now able to use the electronic prescription transfer system to the pharmacy of a patient's choice for collection or delivery the practice do draw this option to the attention of patients and an increasing number use this option but the on-site pharmacy does still seem to have many loyal customers.

How will the proposed change to the boundary affect patients who live outside the new area?

If the boundary change is approved there will be no impact on any patient currently registered with either practice. People who live outside the boundary will in future still be able to register as a new patient but it would be explained to them that as an 'Out of Area' patient they would not be able to receive a home visit from the practice should this be required.

Some parts of the Redruth Health Clinic building need work done and what would happen to services that were previously provided there like child health clinics and district nurses?

The building is owned by NHS Estates and if given permission to do so the practices would negotiate a lease for future use. That lease would include arrangements for any required building work and maintenance. The practices are keen to provide integrated services so would if they are permitted to lease the building be keen to discuss with local NHS partner organisations which other services could be provided on the site on a sessional basis. The practice is particularly keen to have close links with community health services like the District Nurses and Child Health Clinics

If the Clinton Road Surgery is closed and the building is sold, will that money go into improving Manor Surgery.

GP Partners either own or lease their premises and where the Partners own the site they have to buy into a share and usually have a mortgage to do this. When a partner leaves a practice their share is repaid. Both the Clinton Road and Manor Surgery sites are 'owned'. If the Clinton Road site is sold there will be financial adjustments made to reflect changes in partnerships. Partners will need to invest in a number of improvements being made for example to the telephone system and furniture and equipment for the Clinic building.

What if you do not get the Redruth Health Clinic site? Will you look elsewhere or not combine surgeries?

The Redruth Health Clinic site is owned by the NHS and was not fully utilised prior to the pandemic. We are therefore hopeful that the request to use it will be considered sympathetically. We are looking at other options such as extending the Manor Surgery site but they would be more expensive and not be able to be put in place as quickly.

Wouldn't it be better to move all services into a new purpose built surgery on a flat site as Manor Surgery is at the top of quite a steep hill. Alternatively, could you knock down Redruth Health Clinic and make that a large car park and rebuild the Clinic on the top car park at Manor?

In an ideal world a new purpose designed site would be wonderful. However this would be likely to take several years to achieve so whilst we do not want to rule out either idea for the longer term it is not the preferred solution to meet our immediate needs. We need extra space as a matter of urgency as the Manor Surgery site has about 50% of the space required for the combined practices and we are not able to make full use of additional doctors and other staff without more clinical accommodation.

Have you considered using the previous Cardrew Walk-in Centre site?

Services from that site were relocated to develop the Urgent Care Centre at Camborne and Redruth Community Hospital and patients registered there have moved to another practice in the area. The building is not owned by the NHS but in any event one of the main reasons for the proposed changes is to bring services together onto a single site.

What happens if NHS Kernow says no to the proposed changes?

All feedback received about the proposed changes both positive and negative is being shared with NHS Kernow as they will wish to take account of patients views in considering the various applications. The practices are also listening to the feedback and will act on any points raised that they are able to address some of which are already covered in this FAQ. Once all feedback has been received the practice will be setting out details of the action it proposes to take.

In coming to its decisions NHS Kernow will also have to consider why the practices have been working closely together and whether a return to the two completely separate services would provide a sustainable solution. The practices view is that the challenges faced by small practices such as recruiting GP's and other clinical staff have not gone away and that merger is the best way of ensuring sustainable services for all of our patients. However it is for NHS Kernow to weigh the various arguments in coming to its decisions.

Will the practice name be changing at all? Thinking about whether there is a need to update personal details with outside companies etc.

At the moment the name has to remain as Manor Surgery for various legal reasons, but we do wish to rebrand, become a new entity, with a new name in the near future but even we are not sure when that's going to be at the moment so for the moment the partnership will remain as Manor Surgery and we will let everyone know, as soon as we can, when that changes.

Can we get a copy of the presentation slides? If so how?

We will publish the slides, tonight's questions and answers, and a recording of tonight's presentation on our websites.