

# **Report for the Cheshire Clinical Commissioning Group Primary Care Commissioning Committee**

## **Case for the Retention of Sandiway Surgery**

**Prepared on behalf of the Patients of Sandiway Surgery**

**By the Save Our Surgery Residents Action Group and Cuddington  
Parish Council**

**September 2020**

### **Part Two: Supporting Reference Information**

**Appendix A: Residents Action Group Mandate**

**Appendix B: Freedom of Information Requests and Responses**

**Appendix C: Public Feedback at the Parish Council EGM January 2020**

**Appendix D: Correspondence**

**Appendix E: Patient Letter and FAQ**

**Appendix F: Briefing Notes Prepared by DMP for Medical Staff for Public Meeting 26th  
February 2020**

**It is important to note that the proposal and consultation process being  
discussed in this report took place before the COVID 19 pandemic  
lockdown began in the UK.**



## Appendix B

### Freedom of Information Requests, Enquiries and Responses.

#### Responses to FOIs are in blue

#### **Freedom of Information request (FOI #1) – Business Case and Practice Plan**

Q1.1. In the FAQ sheet attached to your letter to households, you refer to patient responses being added to “the Business Case”. Please provide a copy of this Business Case, redacted with any personal information if applicable.

*The business case is not currently available, it will be available when it is made available to the CCG for the primary care committee, and I will forward a copy when the business case is submitted.*

Q1.2. Please provide a copy of your Practice Plan detailing your proposal to close Sandiway Surgery and explaining how you will re-allocate your resources, manpower, services and appointment availability across the 2 site

*Practices are not required under the GMS contract to develop a practice plan.*

Q1.3. Please provide a copy of any Service Level Agreements or Key Performance Indicators attached to your GP Contract, including current levels of performance for each surgery.

*As the contract we hold is with NHS England and Vale Royal CCG is based on the national standard GMS contract which is freely available from NHS England website <https://www.england.nhs.uk/nhs-standard-contract/19-20/> . With regards to detailing any SLAs I believe the content of these are commercially sensitive and therefore outside the remit of an FOI enquiry. The practice performance is publically available via the NHS digital website <https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/general-practice-data-hub> we are unable to report at surgery level.*

#### **Freedom of Information request (FOI #2) – Decision Making Process**

In the letter to households FAQ # 15, you refer to a report being produced for Vale Royal CCG.

2.1 What is the decision-making process following your request to close Sandiway Surgery?

*The guidance on the process for closing a branch surgery is contained within the following document*

*Primary Medical Care Policy and Guidance Manual (PGM) V2 contract pages 249 -256 which is freely available via the NHS England website via the link*

*<https://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/>*

2.2. Are any other decision-making bodies involved?

*The CCG as part of the process are required to take a paper to overview and scrutiny committee to share the consultation process that we have undergone, for this committee of the council to either approve that the consultation has been sufficient or to request the*

*practice to extend its consultation period.*

2.3. What criteria are considered by each decision-making body at each stage of the process?

*You should address this question to the CCG and the council.*

2.4. On the Vale Royal CCG website, it states that Dr McGregor-Smith is a member of the Vale Royal CCG Governing Body. Will she recuse herself from the decision-making process, given that she is also Executive Partner at Danebridge Medical Practice?

*Whilst Dr McGregor –Smith will sit on the Primary Care committee going forward, Dr McGregor – Smith would be required to state a conflict of interest for this item on the agenda and therefore would not be present or vote on this item.*

2.5. What is the expected timescale for each stage of the decision-making process?

*As we are in a period of Purdah, the next meeting of the Overview & Scrutiny committee has been cancelled and dates have not yet been confirmed. The Primary Care Committee meeting dates have not yet been confirmed.*

2.6. What is the appeals process in case of any decision made?

*I am unaware of the appeals process, again you may wish to ask the CCG.*

*I am happy to discuss questions 1 to 6 with you when we meet, as I do not believe these questions fall within the remit of FOI questions, as the questions, I would suggest, are more about clarification of the consultation process.*

### **Freedom of Information request (FOI # 3) “Investment needed”**

In FAQ no. 1, you state “it would require a very large investment to bring the premises up to standard, which is simply not available”.

3.1. On what basis is this statement made? Please list each improvement required as a result of the Care Quality Commission Inspection report dated June 2019, including for each item:

a. specifications e.g. building dimensions, product requirements, plans and drawings.  
b. quotations or estimates received

3.2. Please list the funding sources you have explored, and why each one is not available?

3.3. Please confirm what steps you have taken to investigate selling the Sandiway Surgery estate to a third party and then leasing it back. This would free up capital enabling improvements to be made to the building structure and facilities.

3.4. Please confirm what priorities and timings for each improvement have been given by the CQC in their report

*Response*

*I am not aware of any applications for improvement of these premises. I have sought a quote for the building of a new premise to serve 3,500 patients (number of patients on the practice list who reside in the Sandiway & Cuddington area). The cost to build a new facility has been quoted as £1.16 million pounds, and this cost is excluding the purchase of any land. The advice from NHS property services is that they do not build practices of this size as they are not financially viable.*

3.5. Please confirm whether any of the investment need is in relation to any current statutory regulations that are not being met

*All statutory obligations are met. That said they may not meet current codes of practice or specification requirements.*

## Internal Review Request 1

The following FOI "Investment Needed" was not answered because you had not in fact carried out any investigation 'to bring the premises up to standard'. The quote is from your letter to residents.

At subsequent consultation meetings Partners have confirmed that this work has now started.

Please provide the information requested in the FOI as described below.

### Freedom of Information request (FOI #3) – "Investment needed"

In FAQ no. 1, you state "it would require a very large investment to bring the premises up to standard, which is simply not available".

1. On what basis is this statement made? Please list each improvement required as a result of the Care Quality Commission Inspection report dated June 2019, including for each item:

*This was based on an estimate of all the work to be undertaken (such as: internal reconfiguration and updating of consulting rooms, installation of modern fire safety systems) to bring the surgery to a standard that the Partners and our regulators would be happy with.*

- a. specifications e.g. building dimensions, product requirements, plans and drawings.

*Please refer to FOI 5 for our response*

- b. quotations or estimates received

*Please refer to internal review Request 1 FOI 6 for our response*

2. Please list the funding sources you have explored, and why each one is not available?

*The practice has not applied at this time for any capital grants.*

3. Please confirm what steps you have taken to investigate selling the Sandiway Surgery estate to a third party and then leasing it back. This would free up capital enabling improvements to be made to the building structure and facilities.

*Thank you for bringing this option to our attention and we will look into the viability of this option as part of our business case.*

4. Please confirm what priorities and timings for each improvement have been given by the CQC in their report

*Please refer to FOI 5 for our response*

5. Please confirm whether any of the investment need is in relation to any current statutory regulations that are not being met

*Not applicable as all statutory requirements are being met*

*We have contacted two regional builders for quotes, unfortunately these requests coincided with the onset of the COVID19 Pandemic, and no responses have been received.*

## **Freedom of Information request (FOI # 4) “Various (or alternative) solutions”**

In your letter to households, you state that in the past 12 months you “have tried various solutions to keep the surgery open.”

1. List each solution considered, give details of any actions taken to explore each potential solution and reasons why you decided not to pursue each solution
2. Are there any other solutions that you have not pursued that would enable the surgery to remain open, and if so, why not? Please include as a minimum:
  - a. An approach to Weaverham Medical Practice to ask whether they would take over Sandiway branch surgery
  - b. An approach to Winsford Medical Practice to ask whether they would take over Sandiway branch surgery
  - c. An approach to General Practitioners wishing to set up their own Partnership to see if they would take over Sandiway surgery

### *Response*

*Thank you for your ideas that the practice will investigate your suggestions. These questions do not fall into a category of freely available information and therefore would take longer than 18 hours to gather this information; therefore the practice is not required to share this information with you, under the principles of freedom of information act.*

## **Internal Review Request 2**

The following FOI “Various (or alternative) solutions” was not answered because you were unable to demonstrate that you had “tried various solutions to keep the surgery open.” The is quote is from your letter to residents.

At subsequent consultation meetings Partners have confirmed that this work has now started. Please provide the information requested in the FOI as described below.

## **Freedom of Information request (FOI #4) – “Various (or alternative) solutions”**

In your letter to households, you state that in the past 12 months you “have tried various solutions to keep the surgery open.”

1. List each solution considered, give details of any actions taken to explore each potential solution and reasons why you decided not to pursue each solution
2. Are there any other solutions that you have not pursued that would enable the surgery to remain open, and if you have done so, why would they not be suitable?

*We have reviewed our recruitment processes for GPs and Allied Healthcare Professionals (AHPs), however as with the national shortage of personnel wishing to be salaried GPs we have found it extremely difficult to attract appropriate talent. We have also explored utilising locums to a far greater extent however this was not a financially viable option. With regard to AHPs we have looked at providing an emergency care service/ paramedic, unfortunately this group of healthcare professionals did not have the appropriate skill set at the time of the recruitment process.*

*We have redeployed or recruited administrative personnel specifically for the Sandiway service.*

## **Freedom of Information request (FOI # 5) Household Survey**

### **A. Survey Distribution**

1. Was a survey posted to all households registered with Danebridge Medical Practice, or to a subsegment of the households on the Danebridge Medical Practice patient list?

2. If surveys were sent to a subsegment, what criteria did you use to select those who would be sent a postal survey? We are aware of households within Cuddington & Sandiway that use Danebridge Medical Practice yet did not receive a survey.
3. How many surveys were posted, and on what date(s)?
4. Did all Care Home residents receive a letter, or was one letter sent per Care Home?

## **B. Survey Responses**

1. As each household only received one survey, will you multiply the responses at all? Yes or No?
  - a. If no, why have you made this decision?
  - b. If yes, on what basis, is it:
    - i. The number of registered patients living in that household, or
    - ii. The number of people entered in Q2 of the survey, or
    - iii. Another method – please describe?
  - c. If yes, how can you ensure the survey is accurate when the answers to subsequent Questions 3 through to 6 could vary considerably between different household members?
2. How will the survey responses be weighted? Will responses from households within Cuddington & Sandiway be given a greater weighting than respondents within the wider Danebridge Practice Area? How will that weighting be attributed.
3. If no weighting is to be applied, what is your reason for this decision, given that the greatest impact of the proposal to request closure of Sandiway surgery will be upon those households living within walking distance of that surgery.

## **C – Survey Analysis**

Please provide an electronic anonymised copy of the survey response that you will use in your business case in either Word or Excel format.

### *RESPONSE*

*Section A Distribution Q1. The survey was posted to the households of all patients registered at Danebridge Medical Practice Q2. Not applicable see response to Q1 above Q3. 10,225 surveys were posted on the 18 &19th December 2019 Q4. All registered addresses were issued with a copy of the questionnaire via Royal Mail.*

### *Section B Responses*

*Q1 No Q1 a) The questionnaire was issued to every household based on cost. The survey is based on a household response rather than individual patients. Q1b&c) Not applicable see response to Q1 above Q2. The surveys are not being weighted Q3. We are extracting from the responses received those that are from the CW8 2 postcode.*

### *Section C:*

*I am presently unable to provide a copy of the survey results as these will be published at our planned public meeting and therefore will be in the public domain thereafter. I would be more than happy to forward you a copy of this thereafter.*

## **Internal Review Request 3**

### **Freedom of Information request (FOI # 5) Household Survey**

Your answer to Part C of the FOI “Household Survey” stated:

“I am presently unable to provide a copy of the survey results as these will be published at our planned public meeting and therefore will be in the public domain thereafter. I would be more than happy to forward you a copy thereafter.

The survey results have not been published.

We received a copy of a PowerPoint presentation that contained a number of inaccuracies, different data to the survey and missing information.

A list of the discrepancies was sent to Mandy Skelding-Jones on 27/2/2020. So far there has been no response.

Please provide complete survey data.

*Please find enclosed find below an updated power point presentation, which has been uploaded to our website. I note that your email was submitted at 21:10 hours on the 27th February 2020, Mandy had left work for the day and was in fact on leave the following week so you would have received an out of office reply advising of this fact. On Mandy's return to work her work priorities have been focussed on COVID19.*



Patient Consultation  
2020 Updated March

### **Freedom of Information request (FOI # 6) Profile of Patients on the Danebridge Medical Practice list**

#### *Sandiway and Cuddington Population*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>716</i>	<i>255</i>	<i>1062</i>	<i>989</i>	<i>725</i>	<i>3747</i>

#### *Kingsmead Population*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>615</i>	<i>342</i>	<i>913</i>	<i>893</i>	<i>268</i>	<i>3031</i>

#### *Danebridge Population*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>3065</i>	<i>1427</i>	<i>5580</i>	<i>4972</i>	<i>3102</i>	<i>18146</i>

#### *OVERALL TOTAL Population*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>4396</i>	<i>2024</i>	<i>7555</i>	<i>6854</i>	<i>4095</i>	<i>24924</i>

#### *Sandiway and Cuddington patients needing meds monitoring*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>0</i>	<i>0</i>	<i>10</i>	<i>19</i>	<i>18</i>	<i>47</i>



*Kingsmead patients needing meds monitoring*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>1</i>	<i>1</i>	<i>7</i>	<i>10</i>	<i>3</i>	<i>10</i>

*Danebridge patients needing meds monitoring*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>2</i>	<i>4</i>	<i>59</i>	<i>117</i>	<i>77</i>	<i>259</i>

*OVERALL TOTAL Population needing meds monitoring*

<i>Under 16</i>	<i>16-24</i>	<i>25-49</i>	<i>50-69</i>	<i>70 and over</i>	<i>Total</i>
<i>2</i>	<i>4</i>	<i>69</i>	<i>136</i>	<i>95</i>	<i>306</i>

**Freedom of Information request (FOI # 7) People who cannot drive**

The existing public transport services to/from Cuddington & Sandiway are infrequent and the public bus and train facilities at all locations are not within reasonable walking distance of either Danebridge or Kingsmead surgeries for those with mobility issues and/or ill health. Do you know how the total number of patients within Cuddington & Sandiway that would rely on public transport to access GP services at either Kingsmead or Danebridge? What solutions will you put in place for people needing to use public transport to access the alternative surgery locations?

*We are commissioned to deliver medical services to our practice population, under the contract we are obliged to deliver services to all patients on our list. It is not the responsibility of general medical practice to provide transport from a patient's home to the surgery, this is the responsibility of the patient.*

**Subject: Freedom of Information request (FOI #9) – availability of GP appointments at Sandiway Surgery**

Please provide the average number of hours of GP Appointments available (per week) at Sandiway surgery over the past 5 years

*2015 110*  
*2016 122*  
*2017 135*  
*2018 130*  
*2019 105*

Please provide the average number of hours of Nurse Appointments available (per week) at Sandiway surgery over the past 5 years

*2015 24*  
*2016 13*  
*2017 12*  
*2018 13*  
*2019 10*

**Subject: Freedom of Information / Internal Review Request**

**Freedom of Information request (FOI #11) – Reallocation of Resources**

Please explain how you will re-allocate your resources, manpower, services and appointment availability across your Danebridge and Kingsmead sites, redacted with any personal information if applicable.

*The Practice's appointments are scheduled, planned and reviewed on a weekly basis for the forthcoming four weeks.*

*At this time we resource Doctors and Nurses across three locations. If Sandiway Surgery closes this will then change to two locations. No personnel are employed specifically for one particular Surgery.*

**Freedom of Information request (FOI #12) – Opening Hours**

In your December letter to Households (undated) you give contradictory statements in your Q&A.

In Q2 you state 'Kingsmead surgery will be able to remain open from 8:30am – 6pm Monday to Friday. Current opening hours are 8:00am – 6:30pm according to your website.

In Q10 you state 'There will be increased opening hours at the Kingsmead Surgery' Please explain this contradiction. Please confirm whether or not there will be increased opening hours at Kingsmead surgery. Please confirm what hours Kingsmead Surgery will be open.

*Thank you for highlighting this error, please accept our apologies. I can confirm the opening hours for Kingsmead Surgery are 8.00am – 1.00pm and 2.00pm – 6.30pm Monday – Friday.*

*Our proposal is that if Sandiway Surgery closes our opening times at Kingsmead Surgery will be changed to 8.00am – 6.30pm Monday – Friday.*

**Freedom of Information request (FOI #13) – Alternative Solutions**

During the public consultation meeting a suggestion was made that there be one Doctor and one Nurse on site at Sandiway Surgery during opening hours. The personnel could rotate to support different clinics being held at Sandiway Surgery.

Please confirm whether you have considered this solution to lone working. If this solution is not viable, please give reasons why.

*This proposal will be considered as part of our business case, where all of the individual suggestions will be reviewed. We are unable to confirm if the solution is viable or not as the business case is still in development.*

**Freedom of Information request (FOI #14) – Discussion with Pharmacies**

I attended your consultation meeting on 26th February at Sandiway School, I spoke to Dr. Gilchrist. I asked her about solutions to repeat prescriptions for Meds monitoring patients. She stated "we have been talking to the local pharmacy about this". I was surprised to hear this, given that I had spoke to the Manager at Rowlands Pharmacy in Sandiway prior to the evening, and she had stated that she had had absolutely no contact with Danebridge about the proposed closure, she had not been informed, nor consulted with. After the meeting I asked her again, had subsequently Danebridge been in contact with them? She categorically confirmed to me that as at

28th February, when I discussed this with her, she had had NO communication with Danebridge about the closure or to solutions to the problems the closure would bring.

FOI question:

1. To which, "local pharmacy" did Dr. Gilchrist believe that Danebridge was speaking to about solutions?
2. If such solutions are being discussed, why are they not being discussed with the relevant local pharmacy?
3. Since 28th February, have you been in contact with Rowlands Sandiway?

*Local Pharmacies have been informed of our proposal to close Sandiway Surgery.*

*I have spoken to Dr Gilchrist who has advised that she indicated at the meeting that we are planning to talk to local pharmacies.*

*I can confirm that attempts have been made after the event to contact the local pharmacies to discuss this issue, and an email has been sent subsequently to initiate the discussion between our clinical pharmacist and the local pharmacy. We had not received a response from the pharmacy at the time of writing this FOI response, we are sure this is due to the demand on the pharmacy at this time.*

*As part of the NHS Long Term Plan there is greater involvement of community pharmacies, who may deliver some services which traditionally may have been provided by Primary Care. This is something which is being developed across the country. That said, as the Practice is in a consultation phase and decisions have not been made, we have not formally entered into discussions, as this would be the responsibility of the Commissioning organisation, namely the CCG.*

*Thank you for your email of the 18th of May 2020, where you requested an internal review of response 4*

*I am unable to provide any further information regarding what Dr Gilchrist said or did not say at the consultation event, I am however able to provide the briefing note circulated to all Partners and Managers prior to the event as requested.*

Thank you for your response to my FOI which I received 1st May which is referenced as no.4 relating to discussion with pharmacies. I wish to request an internal review of your response, an internal review is the required process to follow prior to raising a complaint with the ICO.

Your response states "Dr. Gilchrist...indicated at the meeting that we are planning to talk to local pharmacies." She clearly said to me "we have been talking to the local pharmacy about this". I was next to her and did not mishear her. *Please see response above.*

Can you confirm if there was a briefing note prepared for all DMP representatives prior to the public meeting, so that all responses from staff were consistent? If there was, it would be useful to receive a copy. **Yes copy attached. ( See Appendix F)**

In receiving your response, with reference to Coronavirus, I would like to remind you that we are talking about events that occurred at the end of February 2020, prior to the outbreak.

*With regards to my reference to coronavirus, this is due to the fact that the original FOI request was received on 27th February when Mandy was actually on annual leave for a week and on her return to work the practice response to the coronavirus needed to be actioned as a priority, to ensure the safety of all patients at this time.*

Since you state that "attempts have been made after the event to contact the local pharmacies", I want to know:

1. Which pharmacies you have contacted (or attempted to contact), by which method, and on what dates. *Rowlands Pharmacy, Sandiway, have been contacted by phone and email I cannot recall the date of the phone calls to the pharmacy, as this was prior to the consultation event, following*

*the event our clinical pharmacist attempted to contact Cath at Sandiway Pharmacy twice by phone on 30 April and then by email the same day and has subsequently spoken to Cath and has asked Cath for a meeting to take place to discuss possible solutions, that can be included in our business case, we are hopefully that this meeting will take place within the next two months.*

2. You state "an email has been sent subsequently..." Please provide a redacted copy of these emails sent to each pharmacy which should show the date sent. *Yes. Copy of THE email attached.*

Also, you refer to the "Practice being in a consultation phase and decisions have not been made, we have not formally entered into discussions, as this would be the responsibility of the Commissioning organisation, namely the CCG."

Please clarify Danebridge's response here, because:

1. You stated you had closed your Consultation on 26th February "the meeting concludes the consultation" was the phrase used, is this true or do you consider you are still "consulting" ? *The public consultation process closed in January, with the feedback event being held on 26th Jan.*

2. You state "decisions have not been made", *I can only assume that you are referring to the last sentence of paragraph four of the response to FOI 4* I am not sure whether you are referring specifically to the Pharmacy issue or more generally about the closure proposal", Can you please clarify specifically as to what decisions you are referring to, that have not been taken by DMP? *As the practice has to complete a consultation process as part of the business case to submit to the CCG and OSC. The practice has made the decision that it wants to move forward with the proposal to close and seek approval to close from the CCG.* In our meeting in February, and subsequently when the Residents Group liased you when CoronaVirus started, you confirmed that you were progressing with the Partner's decision to pursue the request the close Sandiway Surgery. *Yes this is correct we are progressing the request to close the surgery with the CCG, however I have no confirmed dates for when the business case will be reviewed by OSC and the CCGs primary care committee*

3. I assume when you talk about "this would be the responsibility of the...CCG", you are referring to this aspect of Pharmacy discussion ? As this seems at odds then with discussions with the pharmacies taking place, either DMP will do it, or the CCG are responsible, which is it ? *Again I can only assume that you are referring to the last sentence of paragraph four of the response to FOI 4, as the paragraph refers to the NHS long term plan and NHS pharmacy services contract are held by the CCG/NHS England it would be part of the CCG/NHSE the remit of the CCG/NHS England to commission a wider range of services from the pharmacy provider. The practice would like to work with the pharmacy to identify workable solutions to the concerns you have raised.*

### **Freedom of Information request (FOI #15) – CQC Evidence Table**

I refer to our meeting on 12th February when you and Ken promised to review your willingness to provide us a copy of the 48 page annexe to the CQC report that you stated highlighted safety concerns at Sandiway. Just to remind you, we are happy to receive a redacted copy if necessary, and are only requesting the extracts relevant to Sandiway safety concerns. Given that no one present at the meeting has had a response to this request, then I felt I had to raise a FOI request to Danebridge Medical Practice for it.

*Regrettably, the CQC Evidence Inspection Evidence Table is not a public document.*

*The CQC Inspection Report is the only public document available for communication.*

## **Enquiries to the Care Quality Commission**

**Sent:** 30 December 2019 12:30

### **Details of the enquiry**

Danebridge Medical Practice report. Inspection date 19.02.2019. Date of publication 22.05.19 As part of the unpublished section of this report did CQC recommend closure of the Sandiway surgery branch practice?

Date: 30/12/2019 14:33 (GMT+00:00)

**Subject: RE: Contact us form completed ENQ1-8118611141**

*Good afternoon*

*Thank you for contacting Care Quality Commission(CQC), your reference number is ENQ1-8118611141*

*In relation to the query below, having investigated Danebridge Medical Practice's report on our CQC Website, it received a rating of requires improvement, this will be closely monitored in the coming 12 – 18 months.*

*At this present moment in time there is no special measures in place.*

*If you have further questions please don't hesitate to contact us on 03000 61 61 61 or email at [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)*

*We welcome feedback and your thoughts, comments and suggestions are very valuable to us. Please share your experience with us by [clicking here](#).*

*Kind regards*

*James Maxwell*

*NCSC Customer Contact Advisor*

*Enquiries Team*

**Ref ENQ1-8118611141**

Mr Maxwell

Many thanks for the prompt response. The query arises from a GP Practice letter informing patients of the Practice's intention to close the Sandiway surgery branch practice. Simplifying, the reason given for this requirement is the adverse findings in the CQC report.

Reading the truncated report available from the GP Practice website, it would not appear to justify this action. I therefore wondered whether a more specific recommendation about closure had been included in the part of the report to which the public does not have access.

From your response, can I take it that nothing in the complete CQC report explicitly requires the closure of the Sandiway surgery.

Thanking you for your time and help

From: Enquiries <[Enquiries@cqc.org.uk](mailto:Enquiries@cqc.org.uk)>

Date: 31/12/2019 10:27 (GMT+00:00)

**Subject: CQC ENQ1-8119941339 RE: Contact us form completed ENQ1-8118611141**

*Good morning*

*Your further enquiry number is ENQ1-8119941339.*

*Inspection reports are published in full on our website. We also publicly advise where any enforcement action is being taken. You can read the full report for Danebridge Medical Practice [here](#).*

*I can confirm that CQC have not taken any steps to close this surgery.*

*I trust the above information is helpful, should you need anything else please get back in touch.*

*We welcome feedback and your thoughts, comments and suggestions are very valuable to us. Please share your experience with us by [clicking here](#).*

*Kind Regards*

*Rebekah Piercy*

*NCSC Customer Contact Advisor*

From: **Information Access** <[information.access@cqc.org.uk](mailto:information.access@cqc.org.uk)>

Date: Fri, 3 Apr 2020 at 12:43

**Subject: 20200403 Response to request CQC IAT 1920 1155**

**Our Ref: CQC IAT 1920 1155**

I write in response to your request for information, which is as follows:

***“Can the CQC confirm that the report for Danebridge Medical Practice published in May 2019, highlighted safety concerns specifically at the Sandiway surgery location, as per the Minister’s response? The report published in May 2019”***

*The last inspection of Danebridge Medical Practice was 19 February 2019.*

*The service was rated Requires Improvement overall. Shortfalls were identified in the Safe and Well-led domains. The findings in the report that led to this rating relate to Danebridge Medical Practice and the two branch surgeries, Kingsmead and Sandiway.*

*The only issue relating to the premises at the Sandiway branch practice was that the carpets did not appear to be clean and a cleaning schedule was not in place. A recommendation was made in the main report which was – the service should introduce a system for the regular cleaning of carpeted areas at Sandiway.*

*Reference is made in the report to a fire drill not having taken place in the last 12 months and inappropriate storage arrangements for patients records at Sandiway Surgery. Both were addressed following the inspection.*

**2. If the CQC did highlight safety concerns, what were they?**

**2a) The report in the public domain refers only to the need to ensure carpets were cleaned. Can I request a redacted copy of any supplementary information which references these concerns.**

*When I checked the CQC public website last week the evidence table had not been published. I believe this is what is being referred to as the supplementary information. I have taken steps to ensure the evidence table is now on our website. This provides details of our findings on the day of the inspection. I did not visit Sandiway and there are no additional notes to indicate any further issues. The inspector who went to Sandiway left CQC in May 2019.*

**3. If you did highlight safety concerns, the Sandiway surgery location currently remains open, can the CQC confirm that any concerns do not impact the surgery fulfilling its statutory requirements”**

*As already indicated, Danebridge Medical Practice was rated Requires Improvement at the last inspection and the issues identified relate to Danebridge Medical Practice and the two branch locations Sandiway and Kingsmead. A follow up inspection to ensure that Danebridge Medical Practice and the branch practices have met the requirement notices arising from the last inspection has not as yet taken place. The practice must meet these requirements in order to operate safely.*

*I hope that you find this information useful.*

*Yours sincerely*

*Laura Watson  
Information Access Officer*

*Information Access Team*



## FOIs– Cheshire Clinical Commissioning Group

### Freedom of Information request (FOI # 1) PCC Minutes

***In looking at your website I can see there are minutes published of the August 2019 Primary Care Commissioning Meeting, and the schedule indicates that there were furthermore 2 planned meetings in Oct and Dec 19, I would be grateful if you could publish and / or send me by email a copy of those minutes.***

*Re: Freedom of Information Act 2000 Minutes of Primary Care Commissioning Meetings*

*Thank you for your information request indicated in bold below, which has now been considered under the Freedom of Information Act 2000 by NHS Vale Royal Clinical Commissioning Group (CCG). I am able to provide you with the following information and responses.*

#### **You asked:**

***In looking at your website I can see there are minutes published of the August 2019 Primary Care Commissioning Meeting, and the schedule indicates that there were furthermore 2 planned meetings in Oct and Dec 19, I would be grateful if you could publish and / or send me by email a copy of those minutes.***

#### *Our response:*

*Please be advised that there was no public meeting held of the Primary Care Commissioning Committee in October 2019. Please find enclosed a copy of the minutes of the Primary Care Committee meeting held on 5th December 2019, which are also publicly available via the following link: <http://www.valeroyalccg.nhs.uk/events/14037-primary-care-commissioning-committee-meeting>*

*If you have any queries or concerns, wish to request a review of our response or are unhappy with the service you have received in relation to this Freedom of Information request, please do not hesitate to contact the Freedom of Information Requests team; details provided at the top of this letter.*

*If you request a review of our response and are not content with the subsequent outcome, you may apply directly to the Information Commissioner for a decision. Generally, the Information Commissioner cannot make a decision unless you have exhausted the Freedom of Information complaints procedure provided by NHS Vale Royal Clinical Commissioning Group.*

*The Information Commissioner can be contacted at:*

*The Information Commissioner's Office Wycliffe House Water Lane Wilmslow*

*Cheshire SK9 5AF*

*Yours sincerely*

*Gary Shenton Governance & Compliance Manager NHS Vale Royal Clinical Commissioning Group*

*Enc: pccc-agenda-5-december-2019-combined*



## Freedom of Information request (FOI # 8) Discussions with PCC or CCG 28<sup>th</sup>

### January

With regards to the proposed closure of Sandiway Surgery, I searched NHS England's policy on this (link below)

<https://www.england.nhs.uk/wp-content/uploads/2014/07/med-branch-closure-pms-july14.pdf>

[Branch closures for primary - NHS England](#)  
PCC on behalf of David Geddes, Head of Primary Care Commissioning, 4W56, Quarry House, LEEDS . E-mail: [england.primarycareops@nhs.net](mailto:england.primarycareops@nhs.net) . Document Status [www.england.nhs.uk](http://www.england.nhs.uk)

In relation to Point 3 on page 10 I want the answers to 2 questions:

1. **"What discussions have Danebridge Medical Practice had with the Primary Care Committee or the Clinical Commissioning Group Governing Body about their proposal to close the branch surgery?"**
2. **"What was the "appropriate and proportionate consultation requirement" that was agreed upon.**



**Dated 15<sup>th</sup> May 2020**

*Re: Freedom of Information Act 2000 Closure of Sandiway Surgery (Danebridge Medical Practice)*

*Thank you for your email of 12th March 2020, received on 13th March 2020, in which you request an internal review of NHS Vale Royal CCG's response to your Freedom of Information request (FOI/00178/CCVR).*

*Please be advised that on 1st April 2020, NHS Vale Royal CCG merged with NHS Eastern Cheshire CCG, NHS South Cheshire CCG and NHS West Cheshire CCG to become NHS Cheshire CCG.*

*We have undertaken an internal review of NHS Vale Royal CCG's response to you of 25th February 2020 and taken into account your further comments. We can now provide you with the following responses.*

*You previously asked:*

***With regards to the proposed closure of Sandiway Surgery, a branch of Danebridge Medical Practice. I searched NHS England's policy on this (link below)***

<https://www.england.nhs.uk/wp-content/uploads/2014/07/med-branch- closure-pms-july14.pdf>

**In relation to Point 3 on page 10 I want the answers to 2 questions:**

**1) "What discussions have Danebridge Medical Practice had with the Primary Care Committee or the Clinical Commissioning Group Governing Body about their proposal to close the branch surgery?"**

---

*We previously responded:*

*1) Danebridge Medical Practice has not had any discussions with the Primary Care Commissioning Committee or the Clinical Commissioning Group Governing Body about their proposal to close the branch surgery. Please be advised that any items for discussion at the Primary Care Commissioning Committee or Governing Body would be published in the minutes of these meetings. Please find below links to the published source of the minutes relating to NHS Vale Royal CCG's Primary Care Commissioning Committee and Governing Body:*

*NHS Vale Royal CCG Primary Care Committee Agendas/Minutes: -  
<http://www.valeroyalccg.nhs.uk/events>*

*NHS Vale Royal CCG Governing Body Agendas/Minutes:*

*<http://www.valeroyalccg.nhs.uk/governing-body/governing-body/governing-body-meetings>*

**Internal review request:**

**1) You state that there were no "discussions", to which I cannot comprehend. I would interpret "discussions" as being any form of communication. At the Cheshire Chat event in Winsford on 14th February, the CCG representatives were clearly aware of the proposal. In the Meeting papers for the meeting of the CCG on 26th February, the proposal for closure is referred to, these were clearly prepared prior to the meeting, yet your response to me was made the night before 25th February 17:23. I include the link below**

**[http://platform-ccg-live-eu-2.s3-eu-west-1.amazonaws.com/attachments/8622/original/Agenda\\_\\_Papers\\_Primary\\_Care\\_Commissioning\\_Committee\\_Part\\_A\\_26.02.20.pdf?AWSAccessKeyId=AKIAJ3TZGA3TUZPPHIWQ&Expires=1584041405&Signature=UwoWTO8942HJbIloU%2FE039hK0ac%3D](http://platform-ccg-live-eu-2.s3-eu-west-1.amazonaws.com/attachments/8622/original/Agenda__Papers_Primary_Care_Commissioning_Committee_Part_A_26.02.20.pdf?AWSAccessKeyId=AKIAJ3TZGA3TUZPPHIWQ&Expires=1584041405&Signature=UwoWTO8942HJbIloU%2FE039hK0ac%3D)**

**Agenda Item A2.1 where it states, amongst other things, this comment: "Staff from the CCG's Primary Care Contracting and Communications & Engagement Teams have been and will continue to provide advice and support to Danebridge Medical Practice throughout the consultation process. "**

**So what has been their involvement / communications / discussions?**

*Internal review response:*

*1) Upon review of the previous response, your request was specifically for any discussions between Danebridge Medical Practice and NHS Vale Royal CCG's Primary Care Committee and Governing Body about their proposal to close the branch surgery. At the time of our response Danebridge Medical Practice's proposal to close a branch surgery had not been discussed at either NHS Vale Royal CCG's Primary Care Commissioning Committee or Governing Body.*

*NHS Vale Royal CCG's Primary Care Commissioning Committee and Governing Body were both formal meetings with all papers relating to the items discussed during these meetings being made publicly available. In the original response we therefore provided you with a link to the published source of where any discussions by the Primary Care Commissioning Committee and Governing*

Body relating to Danebridge Medical Practice's proposal to close a branch surgery would be provided.

We would like to apologise that whilst we provided you with a link to the published source of where the information you had requested would be contained on 25th February 2020, we did not advise you that this information was intended to be published in the papers for the next Primary Care Commissioning Committee meeting on 26th February 2020.

In response to your further question of what has been the involvement/communications/discussions between the CCG's Primary Care Contracting and Communications & Engagement Teams and Danebridge Medical Practice, please find enclosed 'Local Government Association (LGA) Gunning Principle Rules'. This document details the meetings and actions undertaken in respect of Danebridge Medical Practice's proposal to close the Sandiway Surgery branch.

**You previously asked:**

**2) "What was the "appropriate and proportionate consultation requirement" that was agreed upon.**

We previously responded:

2) NHS Vale Royal CCG have provided the below information to Danebridge Medical Practice regarding their proposal to close the branch surgery:

- NHS England Primary Medical Care Policy and Guidance Manual (Page 231)

[www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/](http://www.england.nhs.uk/publication/primary-medical-care-policy-and-guidance-manual-pgm/)

NHS Vale Royal CCG has also provided advice and guidance in the form of the NHS England guidance on patient and public participation and also the Gunning Principles, links to which are listed below:

- Patient and public participation in commissioning health and care: Statutory guidance for clinical commissioning groups and NHS England [www.england.nhs.uk/wp-content/uploads/2017/05/patient-and-public-participation-guidance.pdf](http://www.england.nhs.uk/wp-content/uploads/2017/05/patient-and-public-participation-guidance.pdf).

- The Gunning Principles

[www.local.gov.uk/sites/default/files/documents/The%20Gunning%20Principles.pdf](http://www.local.gov.uk/sites/default/files/documents/The%20Gunning%20Principles.pdf)

**Internal review request:**

**2) You provided generic information but you did not answer the question as to "...what was agreed upon?", according to the Branch Closure policy referred to, you need to agree on the "appropriate and proportionate consultation requirement ". So did you agree on this, or not? If you did agree, what was the agreement on the consultation process to be followed?**

Internal review response:

2) In response to Question 2 of your original request we provided you with the documentation given by NHS Vale Royal CCG to Danebridge Medical Practice regarding their proposal to close the branch surgery: Upon review, whilst these documents detailed the process to be followed we are sorry that this did not fully answer your question regarding what appropriate and proportionate consultation requirement was agreed upon.

In response to your further question, I can confirm the CCG agreed the parameters of the patient consultation exercise in terms of timescales and actions with Danebridge Medical Practice, as detailed in the enclosed 'LGA Gunning Principle Rules'.

<b>Gunning Principle</b>	<b>Activity</b>
1 The Integrity of Consultation	Practice met with the CCG October 2019 to make them aware of their intentions to submit an application to close Sandiway Surgery. Practice met with PPG November 2019 to make them aware of their intentions to submit an application to close Sandiway Surgery Practice liaised with PPG regarding letter to each household, FAQs and the survey
2 The Visibility of Consultation	Practice wrote to each affected household to make them aware of their intentions with the survey being attached (December 2019) CCG wrote to the Local Authority and OSC to make the intentions of the practice known (December 2019) CCG wrote to MPs and Healthwatch to make the intentions of the practice known (December 2019) Practice contacted local Councillors to make their intentions known Information was on the practice websites and displayed on posters in the practice (December 2019)
3 The accessibility of Consultation	The survey around the consultation was sent to each affected household which could be returned to the Danebridge practices – also instruction on how to access the survey online The survey was available through a Survey Monkey link Paper copies and large font copies were available from all Danebridge practices
4 The Transparency of Consultation	All survey results were displayed at the Public Meeting (February 2020) – except the one question around ‘do you agree with the closure’ All survey results will be displayed on the Practice website (February 2020) Those who indicated they would like a copy of the results on the survey will receive this by email or hardcopy
5 The Disclosure of Obligations in Consultation	Through the FAQs (December 2019), the Drop-in session (January 2020) and the Public Meeting (February 2020) the practice have shared their reasoning around their intentions which include: CQC report The need of building repair to make it fit for modern day practice GP shortages to cover the clinics
6 The Fair Interpretation of Consultation	Information and feedback was gathered through the survey and ‘Surgery drop-in’ and has been collated and objectively assessed. Results from the survey were displayed at the public meeting held by the practice and thereafter displayed on the practice website.
7 The Publication of Consultation	The results from the survey were displayed at the public meeting held by the practice and thereafter displayed on the practice website  The practice has answered individual queries, emails and fois regarding the proposals, survey and potential outcome

*If you have any queries or concerns, regarding our response to your request for an internal review, or are unhappy with the service you have received in relation to this, please do not hesitate to contact the Freedom of Information Requests team; details provided at the top of this letter.*

*As we have concluded our internal review of NHS Vale Royal CCG’s response to your Freedom of Information request if you are not content with the subsequent outcome, you may apply directly to the Information Commissioner. The Information Commissioner can be contacted at:*

The Information Commissioner's Office Wycliffe House Water Lane Wilmslow

Cheshire SK9 5AF

Yours sincerely

Matthew Cunningham

Director of Governance and Corporate Development NHS

Cheshire Clinical Commissioning Group



**Dated 25<sup>th</sup> June 2020**

*Re: Freedom of Information Act 2000 Closure of Sandiway Surgery (Danebridge Medical Practice)*

*Thank you for your information request indicated in bold below, which has now been considered under the Freedom of Information Act 2000 by NHS Cheshire Clinical Commissioning Group (CCG). I am able to provide you with the following information and responses.*

*Please note from 1st April 2020, NHS Eastern Cheshire CCG, NHS South Cheshire CCG, NHS Vale Royal CCG and NHS West Cheshire CCG merged to form NHS Cheshire CCG.*

*You asked:*

***Thank you for your Internal review response, but I continue to remain unhappy that this point is very clear.***

***“Internal review request:***

***2) You provided generic information but you did not answer the question as to "...what was agreed upon?", according to the Branch Closure policy referred to, you need to agree on the "appropriate and proportionate consultation requirement ". So did you agree on this, or not? If you did agree, what was the agreement on the consultation process to be followed?***

*Internal review response:*

*2) In response to Question 2 of your original request we provided you with the documentation given by NHS Vale Royal CCG to Danebridge Medical Practice regarding their proposal to close the branch surgery: Upon review, whilst these documents detailed the process to be followed we are sorry that this did not fully answer your question regarding what appropriate and proportionate consultation requirement was agreed upon.*

*Dr Andrew Wilson FRCGP Clinical Chair Clare Watson Accountable Officer*

*In response to your further question, I can confirm the CCG agreed the parameters of the patient*

*consultation exercise in terms of timescales and actions with Danebridge Medical Practice, as detailed in the enclosed 'LGA Gunning Principle Rules'."*

***The document that you provided on "LGA Gunning Principles" includes details of events and meetings which were not planned prior to the Consultation beginning and what I am trying to understand is just that, what was "the appropriate and proportionate consultation that was agreed upon?" at the outset of the process, because a number of those meetings and events would not have taken place, had there not been input from the Action Group.***

*Our response:*

*We are sorry that the internal review of our original response did not provide you with the information you were specifically seeking. Please find enclosed 'Danebridge Medical Centre Timeline' which outlined the consultation process agreed upon in November 2019 with Danebridge Medical Centre regarding their intention to apply to close the Sandiway branch surgery.*

*If you have any queries or concerns, wish to request a review of our response or are unhappy with the service you have received in relation to this Freedom of Information request, please do not hesitate to contact the Freedom of Information Requests team; details provided at the top of this letter.*

*If you request a review of our response and are not content with the subsequent outcome, you may apply directly to the Information Commissioner for a decision. Generally, the Information Commissioner cannot make a decision unless you have exhausted the Freedom of Information review procedure provided by NHS Cheshire Clinical Commissioning Group.*

*The Information Commissioner can be contacted at:*

*The Information Commissioner's Office Wycliffe House Water Lane Wilmslow*

*Cheshire SK9 5AF*

*Yours sincerely*

*Matthew Cunningham*

*Director of Governance and Corporate Development NHS Cheshire Clinical Commissioning Group*

**Danebridge Medical Centre Draft Timeline for discussion/agreement Draft Outline process for involvement with patients, using the relevant Guidance and requirements of the appropriate policy area, to determine appropriate and proportionate patient involvement. Further work required following discussion with the PPG/Patients/CCG to refine these timelines further**

<b>Date</b>	<b>Actions</b>	<b>Responsibility</b>
<b>November/ December 2019</b>	External information/press release regarding the intention of the Practice to apply to close their branch surgery	<b>Practice</b>
	PPG Meeting to be arranged to discuss the Practice's intentions	<b>Practice</b>
	Draft FAQs for PPG meeting to discuss the above	<b>Practice with support from CCG</b>
	Draft Patient Letter	<b>Practice</b>
	Draft Survey for PPG meeting	<b>Practice</b>
<b>November/ December 2019</b>	Hold PPG meeting Agree: <ul style="list-style-type: none"> <li>· FAQs</li> <li>· Survey Questions</li> <li>· Plan of engagement for the PPG</li> </ul>	<b>Practice/NC</b>
<b>w/c 13th December TBC</b> – NB Period needs to be of adequate length to meet Guidance requirements	Launch online survey/hard copies	<b>Practice</b>
	Patient Panel presence at all practices to conduct paper copy surveys (ongoing) using alternative/accessible formats consider all ways Patients can feedback	<b>PPG</b>
	Update website with information	<b>Practice</b>
	Letter to all patients	<b>Practice</b>
<b>w/c 24th January 2020</b>	Close online survey (date TBC)	<b>Practice</b>
	Collate responses (Date TBC)	<b>Practice</b>
<b>February 2020</b>	Publish Outcome	<b>Practice</b>
<b>February 2020</b>	Hold Public Patient Information Sessions to inform of results of Consultation	<b>Practice / PPG</b>
<b>7th February 2020</b>	Present proposal to the Cheshire West and Chester Council Overview and Scrutiny Committee	<b>CCG</b>
<b>April 2020 tbc</b>	Application to Primary Care Committee a week before the meeting	<b>Practice</b>



## Appendix C

### Public Feedback from the Parish Council EGM

Cuddington Parish Council Extraordinary Meeting Monday 20<sup>th</sup> January

#### Notes from the Public Forum

Houses are being built but facilities are being closed down

Instead of planning to close the surgery they need to be planning to open all day

Have we considered crowd funding for legal action

Have Danebridge contacted other practices regarding taking over the surgery

Letter referred to a GP shortage but the FAQ says all staff will be retained

One reason given is that the premises are unfit but no detail as to why not

Numerous houses have been built in recent years now having to go to other surgeries by car and there is no parking there already

How will the elderly get to the surgeries

Why not close Kingsmead as it is so close to Danebridge

Extend hours further

Village amenity and this will force more home visits on the practice

25000 surveys going out but only 5000 to 7000 people impacted

Challenge the quality of the Survey questions - very leading questions

Query over the legal process for a closure- there must be one

Campaign needs people and money

How much is required to make it fit for purpose- we could fundraise

Potential conflict of interest with one of the GPs being on the escalation group (CCG)

Demographics are skewed in the village to old and young end – those groups in greater need of a surgery

If you cant drive it will be impossible

The numbers don't add up for the health service: more ambulance journeys and home visits

We don't need to be insular about this being our problem patients at Kingsmead and Danebridge are upset as they will now have to fit in Sandiway patients

When you book an appointment and they are fully booked it will affect patients in the other surgeries (Danebridge and Kingsmead)

The WI are very concerned - their members are often elderly; this will cost the NHS more as patients will delay appointments and their conditions will get worse, so costlier when eventually treated

Has the practice considered the increased car journeys from an environmental perspective

Kelsall and Tarpoley combined have the same population as Cuddington but much more GP service

This GP provision has been here for over 75 years

Need to escalate

Taxi to Northwich is £10 so a visit to the doctor there will cost £20- the health service is meant to be free at point of access

Does Matt Hancock have the ability to say we will battle this

What are they offering in addition to taking the service away- Transport?

Questionnaire is asking people to support their business case to CCG so they must have worked out the impact

New local residents choose Danebridge, Firdale or Weaverham - now most will choose the latter two so increased pressure on other practices

From a private business lens this may make sense but not from a Healthcare perspective

Will the Parish Council be able to support this financially

Could it be sold as a surgery for another to run

We are customers - do they want us to leave?

Kingsmead and Danebridge patients are equally frustrated - we could stand outside there and ask them how they feel

Consolidating calls to go to any of the three surgeries was phase one - this was planned long ago

Meeting on the 21<sup>st</sup> January (Drop In) was not promoted only by notices on the surgery doors. You would only know if you had been to the doctor



Consultation over Christmas and the New year when people are busy and forms get lost etc  
Not patient led  
No one in the room notified of the Drop In on the 21<sup>st</sup> January  
Is Government funding dependent on patient numbers? They will lose if we go  
Rang surgery to enquire about Drop in- initially confusion amongst the staff then told no GPs will  
be present only maybe some management  
GPs get paid more if patients are above a certain age  
Will impact the village pharmacy  
If on repeat prescriptions have to take into the surgery and so further car journeys  
If repeat prescriptions change Sandiway pharmacy will no longer be able to collect from the  
practice as they do now  
Now taking 5 days rather than 3 days for online prescriptions  
National issue due to cutbacks  
Will increase the pressure on all surrounding surgeries not just Danebridge and Kingsmead  
Sandiway should be open longer not closed for good

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## Appendix D

### Correspondence

#### Correspondence between Edward Timpson's office and the CQC

Hello,

Please see below the response from the CQC. The full report is in the website. I have spoken to them and they reiterate that there was a cleanliness issue but that was all.

Bets wishes,

Roz

**Edward Timpson CBE**  
Member of Parliament for Eddisbury  
House of Commons, London SW1A 0AA  
58A High Street, Tarporley CW6 0AG  
01829 733 243 | [web](#) | [fb](#) | [twitter](#)

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**From:** Hughes, Matthew <[Matthew.Hughes@cqc.org.uk](mailto:Matthew.Hughes@cqc.org.uk)>  
**Sent:** 20 March 2020 15:34  
**To:** TIMPSON, Edward <[edward.timpson.mp@parliament.uk](mailto:edward.timpson.mp@parliament.uk)>  
**Subject:** RE: Edward Timpson CBE MP - Closure of Sandiway Surgery

Good afternoon Roz,

Thank you for your email to my colleague Chris Hares.

I'd like some clarity with regards to the reference of an 'audit report' and the reference to a 48 page annex. We do have an inspection evidence table that accompanies the report, which is [available on the website](#). That does set out some of the areas that needed improvement at Sandiway Surgery.

I would appreciate a quick call on Monday to discuss.

If you could call me on my mobile that would be much appreciated.

Many thanks

Mat

#### **Matthew Hughes**

Senior Parliamentary and Stakeholder Engagement Adviser  
Strategy and Intelligence - Engagement

#### **Care Quality Commission**

0207 448 1640

07384 525677

Email: [matthew.hughes@cqc.org.uk](mailto:matthew.hughes@cqc.org.uk)

## Letter from Edward Timpson to DMP -9<sup>th</sup> January



HOUSE OF COMMONS  
LONDON SW1A 0AA

To: Fiona McGregor-Smith, Executive Partner Cc: Amanda Skelding-Jones, Business Manager

Danebridge Medical Practice 29 London Road Northwich CW9 5HR

Our Ref: ET0017 Dear Dr McGregor-Smith,

### **Re: Proposed Closure of Sandiway Surgery**

9 January 2020

I have been contacted by a significant number of Sandiway and Cuddington residents, who, for a variety of valid reasons, are extremely concerned about your proposal to close Sandiway Surgery.

Accordingly, local residents have formed a Resident's Action Group to ensure that there is an opportunity for meaningful consultation and that all options to maintain a branch surgery within the village are thoroughly investigated. Both myself and their local councillors are working closely with Group.

The information that has been communicated to residents leaves many questions unanswered and given the impact your request to close the surgery would have, the Group request that you extend the timetable to consult with affected households.

The Resident's Action Group will be submitting a number of Freedom of Information (FOI) requests to you. The intention of these FOI requests is to increase understanding of why you are planning to close Sandiway Surgery and also to gain information on matters that will directly impact on Cuddington & Sandiway residents.

With the above in mind it is requested that you revise your timetable as follows:

- 27 January 2020 – closing date for survey responses (no change)

Early Feb 2020 – It is asked that you provide an anonymised copy of the survey responses to the Residents Action Group before you proceed with your request to Vale Royal CCG.

- Mid-February 2020 – expected responses from you to the FOI requests submitted by the Residents Action Group

- Early March 2020 – meeting between Danebridge Medical Practice representatives and the Residents Action Group to consult on options for Sandiway Surgery

Please confirm that you agree with this timetable and also suggest dates when the Partners would be available for a meeting with the Residents Action Group and elected representatives.

Thank you for your assistance in this matter. Yours sincerely

**Edward Timpson CBE MP**

Councillor Paul Williams Councillor Gillian Edwards Councillor Charles Fifield

## Letter from DMP to Edward Timpson -5<sup>th</sup> February

05 February 2020

Dear Mr Timpson, RE: Proposed Closure of Sandiway Surgery

I am writing further to your letter of the 9th January 2020, and my subsequent email response of 13<sup>th</sup> January 2020. When I confirmed that as part of the consultation process the practice were holding a drop in session on the 21<sup>st</sup> January 2020. Having held the drop in session I am now in a position to respond to the points you raise in your letter

I have taken advice on what is best practice regarding the consultation for closure of a branch surgery, and have been advised that a 6 week consultation period is considered a proportionate period of time when considering the impact of the consultation. This is in line with the Gunning Principles, which I have outlined below for reference. We have endeavoured to follow the Gunning Principles when undertaking this consultation.

Proposals are still at a formative stage

A final decision has not yet been made, or predetermined, by the decision makers

There is sufficient information to give 'intelligent consideration'

The information provided must relate to the consultation and must be available, accessible, and easily interpretable for consultees to provide an informed response

There is adequate time for consideration and response

There must be sufficient opportunity for consultees to participate in the consultation. There is no set timeframe for consultation, despite the widely accepted twelve-week consultation period, as the length of time given for consultee to respond can vary depending on the subject and extent of impact of the consultation

'Conscientious consideration' must be given to the consultation responses before a decision is made Decision-makers should be able to provide evidence that they took consultation responses into account.

By following the four rules, outlined above I believe our consultation to be a fair and a worthwhile exercise:

I am in agreement with the no change to the timeframe for completion of the paper consultation. Please see below my response to the other three suggestions you put forward in your letter.

Early Feb 2020, I am presently unable to provide a copy of the survey results as these will be published at our planned public meeting and therefore will be in the public domain thereafter. I would be more than happy to forward you a copy of this thereafter.

· Mid February 2020 the FOI response will be forwarded to the Residents action Group and a meeting with representatives of the action group is currently trying to be arranged, the practice has offered a date, which the action group has declined. Please note a public consultation event will be held in late February 2020.

· The residents action group have not requested a meeting in early March at this stage, and as I have advised, we are trying to facilitate this meeting taking place in February, so that we are able to demonstrate to the Overview and Scrutiny Committee that we have taken reasonable and proportionate steps to engage with all stakeholders. We have already provided the residents action groups with possible dates to meet with representatives of the practice in February and I await a response from the group on whether our latest proposal is acceptable to them. If you have any further questions or queries regarding the content of this letter, do not hesitate to contact me at the above address or by email on [a.skelding-jones@nhs.net](mailto:a.skelding-jones@nhs.net) or by phone on 01606 544577.

---

Yours sincerely

Amanda Skelding-Jones

Business Manager Danebridge Medical Practice

## **EMAIL TO THE CLERK TO THE PARISH COUNCIL FROM DANEBRIDGE**

**From:** SKELDING-JONES, Amanda (DANEBRIDGE MEDICAL CENTRE) **Sent:** 10 January 2020 14:24 **To:** 'clerktoipc@hotmail.com' **Subject:** patient consultation Sandiway Surgery

Dear Cuddington Parish Council

We recently wrote to our patients to notify them of the intent of the GP Partners of Danebridge Medical Practice to submit an application to NHS Vale Royal Clinical Commissioning Group (CCG) requesting the CCGs consideration and approval of a business case to close the Sandiway Surgery, a branch practice of Danebridge. To inform the Business case, the Practice is undertaking a 6 week consultation with our registered patients to gather our patient's feedback through a survey, which can be completed online as well as via paper copies. To further support the patients to make informed decisions when providing their feedback we are organising a drop-in session

We would like to extend an invitation to you to attend this drop in session, which will be held on: [Tuesday 21st January 2020 at 3-5pm](#) within the Sandiway Surgery [1A Weaverham Rd, Sandiway, Northwich CW8 2NJ](#)

*Kind Regards*

*Mandy*

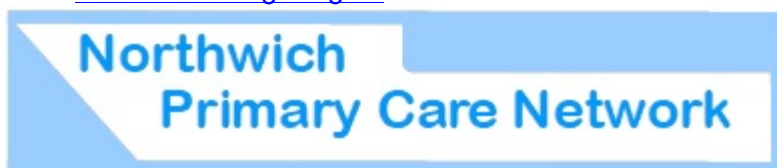
**Amanda Skelding-Jones**  
**Business Manager**

Danebridge Medical Practice, London Road, Northwich, Cheshire, CW9 5HR

Tel: 01606 544544

Email: [a.skelding-jones@nhs.net](mailto:a.skelding-jones@nhs.net)

Web: [www.danebridge.org.uk](http://www.danebridge.org.uk)



## **CUDDINGTON PARISH COUNCIL**

***Clerk to the Council ~ Mrs. Julie Chrimes***

Sunnyside Withens Lane Weaverham Cheshire CW8 3HX  
Telephone: 01606 852444 e-mail: [clerktoipc@hotmail.co.uk](mailto:clerktoipc@hotmail.co.uk)

19<sup>th</sup> March 2020

Dear Dr McGregor-Smith

Cuddington Parish encompasses the villages of Cuddington, Sandiway and Delamere Park and is a rural community situated approximately 5.5 miles from Northwich and 4.7 miles from Winsford.

Cheshire West and Chester Council (CWaC) produced a “Local Plan” for the Borough between 2015 and 2018 in which Cuddington was designated a Key Service Centre (KSC) for this rural area. The basis for this decision, which has underpinned the building of an additional 300 houses within the community, was the presence of social services and amenities capable of supporting surrounding settlements. One key facility identified was the presence of a GP surgery in Sandiway, which has been here since 1928. As part of the National Planning Policy Framework (NPPF) the Cuddington Neighbourhood Plan was developed, by Parish Councillors and a group of residents. This plan, which includes a number of policies relating to the KSC, was subjected to a Referendum and was “Made” in January 2019 with overwhelming support of the local population.

On the 21st December 2019 you wrote to your registered patients advising them of a proposal to close the Sandiway branch surgery. This has caused great alarm among these patients and among the other residents of the Parish. At the instigation of some members of the Patient Participation Group and the Neighbourhood Plan Development team a Residents Action Group was formed on 23<sup>rd</sup> December 2019. The Group has support from the three Cheshire West and Chester Ward Councillors and is being run under the auspices of the Parish Council, with Parish Councillor membership.

The Parish Council organised a public meeting on January 20th attended by 128 residents, to discuss and record the views and ideas of the patients regarding this proposal. To date the Action Group has gained over 800 signatures supporting their attempts to ‘Save our Surgery’.

The Care Quality Commission report, which was referred to in your letter to patients, did not state either that Sandiway Surgery was unfit for purpose, or that it needed to close. The Residents Action Group has engaged with your practice to try to establish the reasons for proposed closure. So far, the Practice Management has been reluctant to share information and so the Action Group has had to submit numerous Freedom of Information requests.

The management, by your practice, of this whole consultation process has been very unsatisfactory in a number of respects.

- The consultation with patients began on 21<sup>st</sup> December 2019 and ran until 27<sup>th</sup> January 2020, merely a five-week period over the longest and most disruptive holiday in the calendar. Many of your patients have commented to us that the questions in the survey were badly drafted leaving them unable to state their preferences in questions 4,5 and 6 in particular. Danebridge held a drop-in session at Sandiway surgery that was advertised, only a few days ahead, by notices pinned to the three surgery doors. You then held a public meeting to “conclude” in your words, the consultation on 26<sup>th</sup> February 2020. This event was not well managed, the survey feedback gave incomplete, inaccurate information and many patients’ questions on the evening have been left unanswered. The Partners present

at the event promised responses to the new questions raised; so far this information has not been provided.

- This Council has not been advised of the business case to support closure of the surgery, or of any reasoned case for the proposed closure. In fact, at a meeting requested by the Action Group and held on 12 February 2020, the Practice business managers made it clear that the decision to close the surgery had already been made and that the Partners are merely seeking formal permission to carry out their plan. This, along with the fact that patients have not been given sufficient information for “intelligent consideration”, or “adequate time for consideration and response” is clearly not in line with the Gunning Principles; even though your business manager wrote to our MP, Mr Edward Timpson on 5<sup>th</sup> February 2020, to assure him that these principles were being followed.
- Great weight is being given by your Practice to the CQC report of 2019, in seeking to justify your proposal. However, we have been told by the Practice Management that it is unable to give any details of those aspects of the CQC report which have led to a decision to seek closure, nor has the practice sought to specify or get quotations for remedial works to bring Sandiway Surgery up to the standard you feel is adequate to keep it open. We believe this is vital information to enable a more sensible consultation about options for continued provision of Primary Care in Cuddington.
- Our parishioners are entitled to local access to primary care, and given our very poor transport connectivity, access will be effectively non-existent for some young families, schoolchildren and the elderly and infirm in what is a growing community, completely contrary to the NHS England strategy.

This failure to conduct an open and robust consultation, has led to great distress among your patients. They are expressing strong opposition to the proposal and have attended meetings in large numbers citing numerous concerns regarding accessing GP care.

Cuddington Parish Council is completely and categorically opposed to your proposal and would like to hear from you specifically on the following:

1. What are the detailed reasons for the proposal to close Sandiway Surgery as specified in the CQC report?
2. What remedial work would be required to keep Sandiway Surgery open?

What other options have been considered, to maintain a primary care facility in Sandiway, including discussions with other practices in the area?

Yours sincerely,

Julie Chrimes  
Clerk to the Council



**Letter from CWaC to Edward Timpson- 23rd March**

Cheshire West & Chester Council

Edward Timpson MP House of Commons London SW1A 0AA	<b>Executive's Office</b>  Cheshire West and Chester Council 4 Civic Way, Ellesmere Port, CH65 0BE  <b>Tel:</b> 0300 1238 123 <b>Our reference:</b> CR185260293  <b>Email:</b> <a href="mailto:enquiries@cheshirewestandchester.gov.uk">enquiries@cheshirewestandchester.gov.uk</a> <b>Web:</b> <a href="http://www.cheshirewestandchester.gov.uk">www.cheshirewestandchester.gov.uk</a>  <b>Date:</b> 23 March 2020
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Dear Edward

**Closure of Sandiway Surgery**

The future of the Sandiways Practice is a matter for the Cheshire Clinical Commissioning Group to determine upon receiving a formal application from the managing Practice.

However, we have been in touch with the CCG and emphasised that should an application be submitted, the Council's Health Overview and Scrutiny Committee will want the opportunity to comment. The CCG has subsequently given an assurance that the views of the Overview and Scrutiny Committee will be conveyed to the CCG Primary Care Committee when it considers the application.

As part of its consideration of the matter, the Committee will be interested to receive statements from the Parish Council and residents groups. These would be presented to the Committee during that part of the meeting where the public may put forward questions or views.

The Health Overview and Scrutiny has no powers over the decision on the future of Sandiways but will be concerned that its views, including the impact on local residents, are properly considered before any decision is made by the CCG.

Unfortunately, due to the impact of the coronavirus, our overview and scrutiny committees are currently unable to meet.

We will however liaise with the CCG over an appropriate date for the future consideration of this matter.

Yours sincerely

**Andrew Lewis Chief Executive**

## Correspondence between Gillian Williams (Action Group) and DMP

### Consultation

#### Gunning Principles

1. **proposals are still at a formative stage**

A final decision has not yet been made, or predetermined, by the decision makers

2. **there is sufficient information to give 'intelligent consideration'**

The information provided must relate to the consultation and must be available, accessible, and easily interpretable for consultees to provide an informed response

3. **there is adequate time for consideration and response**

There must be sufficient opportunity for consultees to participate in the consultation. There is no set timeframe for consultation,<sup>1</sup> despite the widely accepted twelve-week consultation period, as the length of time given for consultee to respond can vary depending on the subject and extent of impact of the consultation

4. **'conscientious consideration' must be given to the consultation responses before a decision is made**

Decision-makers should be able to provide evidence that they took consultation responses into account

Date	Event
	Letter received from Danebridge Medical Practice (DMP) to inform of proposed closure of Sandiway Surgery
27/12/2019	Call DMP ask to speak to Mandy Skelding-Jones (MSJ) Advised she is on leave, will be in on 30/12/2019
30/12/2019	Call DMP ask to speak to MSJ. Advised she is not in office, will return on 31/12/2019. Surgery will not give me MSJ email address or direct line. Advised I must continue to call appointments line if I wish to speak with MSJ.
31/12/2019	Call DMP ask to speak to MSJ. Advised she is not in office, will return on 6/1/2020. Spoke to Gilly Davis, Patient Services manager. Advised to send my questions to <a href="mailto:damebridge.surgery@NHS.net">damebridge.surgery@NHS.net</a> . I did this.
6/1/2020	Call Sandiway Surgery and speak with MSJ. Requested a meeting and was advised Mondays and Tuesdays would be difficult for Partners to attend. We provisionally discussed 29/1/2020 at 7pm as a date after the final date for return of surveys by patients. During the call MSJ said that there was other information in addition to the CQC report that the Partners were considering, namely the fire alarm and the carpet/ non-carpeted areas in the GP surgeries at Sandiway Surgery. I agreed to contact the Residents Action Group (RAG) and obtain proposed meeting dates
9/1/2020	I email MSJ Confirm that I have spoken with the RAG and the outcome was to submit FOI requests to DMP to gain more information about the proposal to close Sandiway Surgery.
9/1/2020	MSJ emails me to ask if I have identified a venue for the consultation meeting and then recalls the email
9/1/2020	I open the email before the recall and say that our elected representatives will contact her
9/1/2020	MSJ acknowledges the FOI requests and says that she will respond in due course
9/1/2020	I confirm I have not shared MSJ's direct email address as per her request
9/1/2020	MSJ replies to say thank you
13/1/2020	MSJ emails me to say she has not received any further communication
13/1/2020	I reply to confirm the letter will be sent by Edward Timpson MP

Date	Event
13/1/2020	MSJ replies 'thanks for the update'
19/1/2020	I email MSJ to suggest 12/2/2020 as a date for consultation meeting, noting this is a Wednesday which MSJ has said is most convenient for the Partners and also after the due date for the survey completion and FOI responses.
?	Drop-in session held by DMP at Sandiway Surgery. Advertised on surgery door.
22/1/2020	MSJ replies and says 'I have discussed this with the partners and following yesterday's drop in session both the partners and I believe it is important that the practice organise the public consultation event in February, The date is likely to be week commencing the 17 <sup>th</sup> or 24 <sup>th</sup> February.'
28/1/2020	I reply, explaining I have been away since her email. I say 'There may have been a misunderstanding. The proposed meeting is not intended to be an open public meeting, this meeting is between members of the Residents Action Group (RAG), the Partners and you to clarify questions we have regarding the proposal to close Sandiway Surgery. This is the meeting I was requesting when I spoke with you at the beginning of January and when you originally suggested a date of 29 January. We are available on Wednesday evenings (when you have suggested the Partners could be available) and hope that you will be able to arrange a suitable time to meet with representatives of the RAG. As a group we have obtained over 600 signatures from residents within the village who have asked us to talk to you on their behalf.'
28/1/2020	MSJ – OK we will meet 5 Feb at 7pm
29/1/2020	GW – prefer 12 Feb for reasons given above
?	Letter response to Edward Timpson – RAG have refused a meeting
29/1/2020	MSJ – I will check Partner availability
3/2/2020	MSJ – Partners not available – KP and MSJ will meet with RAG on 12/2/2020
3/2/2020	GW – acknowledged email – will check if OK with RAG
3/2/2020	MSJ OK, please assure RAG we will hold public consultation either w/c 17 <sup>th</sup> or 24 <sup>th</sup> Feb
5/2/2020	GW – confirmed 12/2/2020, asked again for a Partner to attend
6/2/2020	MSJ – unlikely a Partner will attend
7/2/2020	GW – confirmed attendees and agenda, disappointed no Partners there
10/2/2020	MSJ – FOI responses
12/2/2020	Meeting RAG and DMP
13/2/2020	MSJ – will check with Partners and CQC if happy to share full CQC report
14/2/2020	KP provides salaried and Partner headcount data
16/2/2020	GW asks MSJ to ensure emails sent to people to confirm public consultation meeting
17/2/2020	MSJ – I will contact them today
19/2/2020	GW receives copy of email (see below) no-one else gets a copy as far as we are aware
20/2/2020	GW asks MSJ when email will be sent to residents
21/2/2020	<b>MSJ Hi Gillian, this is the email I blind copied to all the email addresses provided as part of the consultation feedback Mandy</b>
21/2/2020	<b>GW Hi Mandy I'm not aware of anyone else getting this email. I'll check again with a few people and if it's not arrived, I'll ask if they will let me send you their email address  It may have happened if your email system sends out large numbers of</b>

Date	Event
	<p><b>emails in batches. Or they may be a limit to the number of emails you can send out in one go.</b></p> <p><b>I've checked with 5 people that I know completed the survey on line. They all say that they added their email address at the end and have not had any communication from Danebridge about the public consultation next week.</b></p> <p><b>They have all checked their spam folders and there is nothing there.</b></p>
25/2/2020	GW – can we have a microphone at public consultation? Resident request
25/2/2020	MSJ – no, table discussions rather than traditional style public consultation meeting
?	Public consultation at Sandiway School
27/2/2020	Copy of presentation sent by MSJ
27/2/2020	Response to MSJ identifying inaccuracies and missing information. Asks for date when info will be provided
27/2/2020	Out of office from MSJ – returning 10/2/2020
2/3/2020	Forwarded email to KP
2/3/2020	KP – MSJ will reply on her return

# Appendix E

## Patient Letter and FAQ

### DANEBRIDGE MEDICAL PRACTICE

www.danebridge.org.uk email: danebridge.surgery@nhs.net

**Kingsmead Surgery**  
2 Kingsmead Square,  
Regency Way, Northwich  
Cheshire. CW9 8UW

**Danebridge Medical Centre**  
London Road  
Northwich  
Cheshire  
CW9 5HR  
01606 544544

**Sandiway Surgery**  
1A Weaverham Road  
Sandiway, Northwich  
Cheshire, CW8 2NJ  
Tel: 01606 544600

Our Ref: MSJ/Sandiway-letter

Date as Post Marked

Dear Household

**Re: Sandiway Surgery**

We are writing to you as a patient of Danebridge Medical Practice to inform you of the proposed closure of Sandiway Surgery. As I am sure you are aware, Sandiway Surgery is part of Danebridge Medical Practice which also includes Kingsmead Surgery and Danebridge Medical Centre. Earlier this year, we were inspected by our Regulator, the Care Quality Commission, which resulted in an overall grading for the Practice of 'Requires Improvement.'

Further to the Inspection, Dr McGregor-Smith as the Executive Partner, fellow Partners and colleagues, have worked tirelessly to ensure that we correct the processes which required improvement.



For the Partners of Danebridge Medical Practice the decision to request closure of our branch surgery has not been taken lightly. Over the past 12 months, we have tried various solutions to keep the Surgery open. However the national shortage of Salaried GPs has led to difficulties recruiting permanent doctors. In addition, provision of modern primary healthcare is becoming increasingly difficult and delivery across multiple sites is no longer sustainable.

As GPs we are primarily concerned with the well-being of our patients. We believe that centralising services across two remaining locations will enable us to offer a more flexible, efficient GP services with better access for our patients. We welcome your view so if you can complete the short survey by following the link below or you can access the survey:

Via our Facebook page, paper copies will be available from any of our surgeries

Or by completing the enclosed survey and returning to:

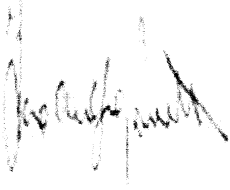
Mrs Amanda Skelding-Jones, Business Manager, Danebridge Medical Practice, 29 London Road, Northwich, CW9 5HR

<https://www.surveymonkey.co.uk/r/LSHYD7Y>

Dr F A McGregor-Smith Dr D A Perry Dr M S Mullin Dr B A Hanson

Dr S E Jeeva Dr F C Durnian Dr B Gilchrist Dr R Whitwell

Yours faithfully

A handwritten signature in black ink, appearing to read 'Fiona McGregor-Smith', written in a cursive style.

Dr Fiona McGregor-Smith  
On Behalf of the GP Partners,  
Danebridge Medical Practice

Dr F A McGregor-Smith Dr D A Perry Dr M S Mullin Dr B A Hanson

Dr S E Jeeva Dr F C Durnian Dr B Gilchrist Dr R Whitwell

## Proposed Closure of Sandiway Branch Surgery

### Patient Frequently Asked Questions (FAQs)

The Partners at Danebridge Medical Practice have sought approval from NHS Vale Royal CCG to close Sandiway Branch Surgery. As part of the application we need to hear what our patients think to add this to the Business Case

Listed below are a number of FAQs that are provided to answer any potential queries patients may have. Any further queries should be directed to Surgery staff.

<b>1</b>	<b>Why have you proposed to close Sandiway Surgery?</b>
	The Care Quality Commission's (CQC) report and discussions at the inspection in May 2019 highlighted safety issues that required improvement at Sandiway Surgery and it would require a very large investment to bring the premises up to standard, which is simply not available.
<b>2</b>	<b>Will the Danebridge Medical Centre and Kingsmead opening times remain the same as they are currently?</b>
	Danebridge will remain the same Kingsmead surgery will be able to remain open from 8:30 – 6 pm Monday to Friday, we believe this will be more convenient.
<b>3</b>	<b>Will I still be able to see my usual doctor or nurse?</b>
	Yes you will. All staff and partners (whether clinical or not) will be based at either Danebridge or Kingsmead Surgeries. We will continue to provide a full GP service from Danebridge Medical Centre and Kingsmead Surgery providing daily appointments to see Doctors, Nurses and Health Care Assistants.
<b>4</b>	<b>Will the same number of appointments be available?</b>
	Yes we will be increasing the number of appointments across Danebridge Medical Centre and Kingsmead Surgery to cover those that were previously provided at Sandiway branch surgery. Although this will mean that Sandiway patients will need to travel to either Danebridge/ Kingsmead Surgeries, in the past year over 64% (1956 appointments) of those who needed an appointment have attended either Kingsmead surgery or Danebridge Medical Centre. 12% (1797 appointments) of Danebridge Medical Practice have travelled to Sandiway and will no longer need to do so. All patients already attend Kingsmead Surgery or Danebridge Medical Centre for Minor Surgery, antenatal care, child development clinics, Sit and Wait Surgery, extended hours appointments, counselling service Musculoskeletal Service.
<b>5</b>	<b>Will there be changes to the way I book appointments?</b>
	No you will continue to be able to book appointments as you do now, either online or by the telephone. We will continue to recall those patients that require scheduled vaccinations, chronic disease reviews or for participation in routine screening programmes (smears, diabetic eye checks etc.) We do however; hope that we will be able to improve our appointment booking and administrative systems, with a larger pool of administrative and patient service colleagues available across the two sites.
<b>6</b>	<b>What will happen to vulnerable patients?</b>
	All our patients currently registered with the practice will have the option of being able to stay on our practice list, whilst living at their existing address. The doctors will continue to provide home visits, as now, to our vulnerable, housebound patients.
<b>7</b>	<b>Will I need to register at a new GP practice?</b>
	No, we are not proposing to change our practice boundary; we will continue to register and provide services for patients that fall into the catchment area.
<b>8</b>	<b>Will the services currently offered at Sandiway Surgery be offered at either Kingsmead surgery or Danebridge Medical centre?</b>
	Yes – All services that we currently offer under the GP contract will be transferred to either Kingsmead Surgery or Danebridge Medical Centre.



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<b>9</b>	<b>Will any new services be introduced?</b>
	We certainly hope so. One of the reasons for the proposed closure is for us to be able to grow and expand the services that we are able to provide locally from within the practice. Since Danebridge Medical Centre opened, we have gradually introduced new services, such as long term conditions clinics. We are committed to working with local commissioners to provide access to additional services as they become available.
<b>10</b>	<b>How would the closure benefit the patients of the practice?</b>
	Kingsmead Surgery has a local car park with disabled access. Both surgeries have ground floor consulting rooms and spacious waiting areas. There will be increased opening hours at the Kingsmead Surgery and there will be no reduction in the opening hours at Danebridge Medical Centre.
<b>11</b>	<b>How would the closure benefit the staff at the practice?</b>
	All staff will be retained. Clinical staff would be able to work more closely together and improve communication with community services. Annual and sick leave would be better covered leading to lower stress levels of the remaining staff. Partners would be able to share the ever increasing administrative work load required of them by government and regulations. All staff would have increased access to the management team.
<b>12</b>	<b>Will there be any changes to how I access the GP out of hour' service?</b>
	No, in order to access a GP when the practice is closed you will still need to telephone the NHS 111 service and they will either signpost you to the most appropriate service or arrange for you to access a GP. Between 8am and 8:30am phone the surgery as normal and an answer – phone message will direct you to a clinician if you require urgent help before reception is open.
<b>13</b>	<b>Will I need to re-register to remain on the practice list? Will my health records be transferred?</b>
	No, all patients remain registered with Danebridge Medical Practice and your paper health records are in the process of being scanned and paper copies will be stored centrally. The only way your registration will change, will be if you choose to register yourself at a different practice or if you move from your current address to an address outside the practice catchment area.
<b>14</b>	<b>Will this affect any treatment I am currently receiving either at the GP practice or any Hospital?</b>
	No – Any patient's current treatments, medications or any investigations that they are receiving from any hospital or other provider will be unaffected by the closure.
<b>15</b>	<b>What are the timescales for the decision of whether to close Sandiway Surgery?</b>
	Following the consultation period which will end midnight on 27 <sup>th</sup> January 2020, the feedback will be analysed and included in a report, for NHS Vale Royal CCG to make an informed decision on TBC.



## Your Views are important to us about our GP services

Please take a few minutes to fill out this survey. We welcome your feedback and your answers will be kept confidential. Alternatively you can complete the survey online via the practice website [www.danebridge.org.uk](http://www.danebridge.org.uk) or Facebook page or by going to this web address

<https://www.surveymonkey.co.uk/r/LSHYD7Y>

- The survey will close at midnight on Monday 27<sup>th</sup> January 2020

1	What is your postcode?		Please complete ↓
2	Please indicate number of people in your household that are?	Under 16	
		16 – 24	
		25 – 49	
		50 - 69	
		70 and over	
3	How do you or members of your household usually travel to your surgery?	Own transport	
		Relatives transport	
		Public transport	
		Walk	
		Other	
4	How often do you/ member of your household attend Sandiway Surgery?	Once a week or more	
		Between once a week and once a month	
		Between once a month and twice a year	
		Once or twice a year	
		Less than once a year	
5	Which location do you/ members of your household currently attend when you need to access GP services?	Danebridge Medical Centre	
		Kingsmead Surgery	
		Sandiway Surgery	
		Any of the above Surgeries	
6	Why do you/ members of your household choose the location for our GP services?	Close to home	
		Site offers a particular treatment/Service	
		The time of the appointments offered	
		Practice Nursing services offered	
	Sit and Wait service offered		
7	Does your household support the practice's plan in principle?	Yes	
		No	
8	Do you have any further comment?		
9	If you would like to be informed about the outcome of the engagement process , please include your contact details below: Name: Email: Address: Thank you for taking the time to complete this survey. Please return to the reception desk at any of our surgeries.		



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## **APPENDIX F:**

### **Briefing Notes Prepared by DMP for Medical Staff for the Public Meeting 26th February**

Provided as a Response to Freedom of Information request (FOI #4) and Request for an Internal Review

#### **Briefing Note 1 for Danebridge Medical Staff for the Public Meeting 26th February**

### **Safety**

#### **Lone clinicians**

unsafe for patients eg CPR , Nebs, ecg can compromise clinical decisions Cannot leave unwell patients on their own whilst waiting for an ambulance, patients in surgeries are not given priority no matter how sick they are

#### **Staff left without clinicians for periods of time**

Doesnt happen in on sites  
Incidents have happened, locked in threatening self harm,

#### **Examination of patients compromised**

Gynae examinations  
Elderly patients need an up and down couch, they wont fit in the rooms  
Current couches are attached to the wall

#### **Groups of clinicians working together in an emergency**

In an emergency at any other site a group of clinicians respond allowing for a safer more consistent approach to emergency medicine

#### **Junior clinical staff**

Dont like working alone  
We have recruited a number of junior colleagues who need support in the same building whilst they develop.  
We need a collabertive clinical approach, often asking opinions of each other but more so more junior staff  
It worries them and causes stress  
We need to retain staff and this doesnt help

#### **Health and Safety**

No modern fire alarm  
Steep stairs for staff

#### **Survey results**

30 % walk  
58 % own transport

Weaverham surgery 1.8 mikes away open to new patients

Patients visiting once per week or more 1%  
Once per month to twice per year 44 %

Hartford 8000 residents larger number than SW but no surgery  
Cost NHS Properties £1.16 Million, for 3500 patients, no other quotes as yet inc from other practices in Northwich, have e mailed no answers as yet

Rx on line, use a proxy, post, DMARDS unsure of the solution

65 % of patients accessing services at DMC and KM over the last one month

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## **Briefing Note 2 for Danebridge Medical Staff for the Public Meeting 26th February**

Please bear in mind the CW8 2 postcode we have used to identify 'Sandiway patients' is 18 square miles in size. So not all those 'sandiway' patients are living next door to the surgery.

Distance/transport:

See Tarporley GP website advertising the Cheshire community driver scheme: organised by the Cheshire community development trust (in Northwich!!)

<https://tarporleydoctors.gpsurgery.net/wp-content/uploads/sites/370/2017/09/Cheshire-Voluntary-Car-Scheme.pdf>

Prescription Requests:

Meds management: order online – all meds management are flagged separately as Query: so GP will check book/results then sign electronically with note to pharmacist – “results from Xdate checked, no concerns, ok to prescribe. “ (we can set up quick text to make it easy)

Urine samples..... I don't know what to suggest about this... ? collection place in sandiway.

My thoughts on clinical reasons:

Consulting in Sandiway is far from ideal.

- Consults can be heard easily in waiting room due to layout, compromises confidentiality.
- Examination couches aren't fit for purpose, can't do vaginal exams/rectal exams due to couches being too short/narrow and lights aren't at proper angle, couches don't elevate/lower so impractical for patients and doctors.
- Plus attached to wall and so not removable to switch for new couches, even if we could fit a larger couch in (which we can't)
- Rooms impractical for people with wheelchairs or prams. Too small.

Doctors feel vulnerable as due to staff restrictions often consulting alone. If a patient were to collapse no other medical staff on site to assist.

No nursing provision on regular basis due to staffing restrictions (need to think how to word this carefully as the counterargument is to put nurses at Sandiway again) so no facility to ECG/bloods impeding doctor's diagnosis and increasing risk to patient.

If patients need bloods/ECG etc they need to attend Northwich thereby delaying their care, putting them further in danger.

With no nurses we can't do dressings if clinically indicated by the consultation.

Due to more doctors feeling insecure and isolated, they don't like consulting there, thereby making GP retention more difficult.

Reception staff vulnerable, had to remove patient from list last month as threatening staff member at Sandiway, left the staff member traumatised unable to continue with her shift as felt vulnerable with no management on site to immediately deal with the situation.

So, I think rather than wording it negatively about Sandiway we can try to explain why Danebridge and Kingsmead are superior....

- Disabled access – to site, toilets and rooms (?)
- Due to layout improved confidentiality
- Larger consult rooms,
- Appropriate for wheelchair, prams
- multiple people consults (if I get 2 people plus me in a sandiway room it's too crowded)
- room for modern examination couch that is fit for purpose
- Support of full team around the clinician improving safety and patient care.
- Phlebotomist
- Nurses – for ECG, dressings, diabetic, copd, asthma rev, imms etc
- Pharmacy team to guide improved prescribing
- MSK specialist
- Support of reception staff to ensure safety.
- Provision of service 8.00-18.30pm