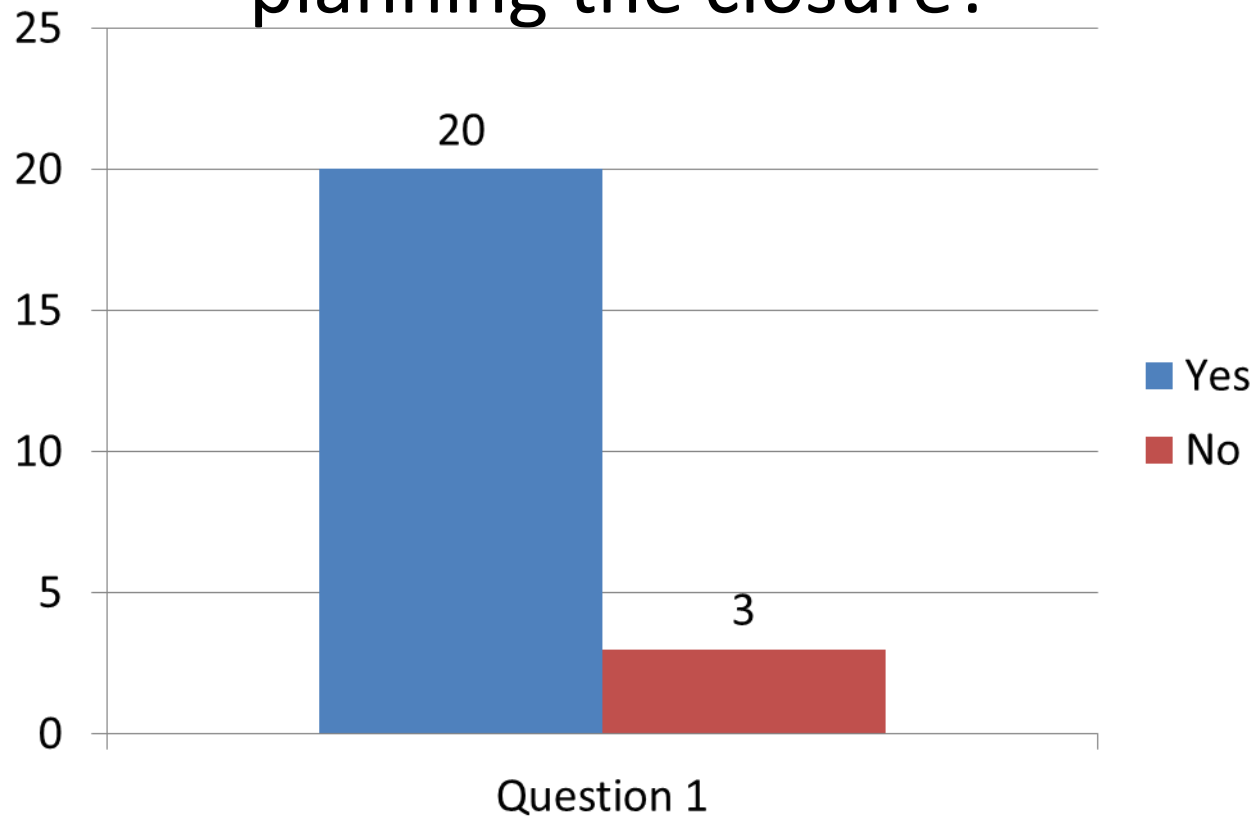


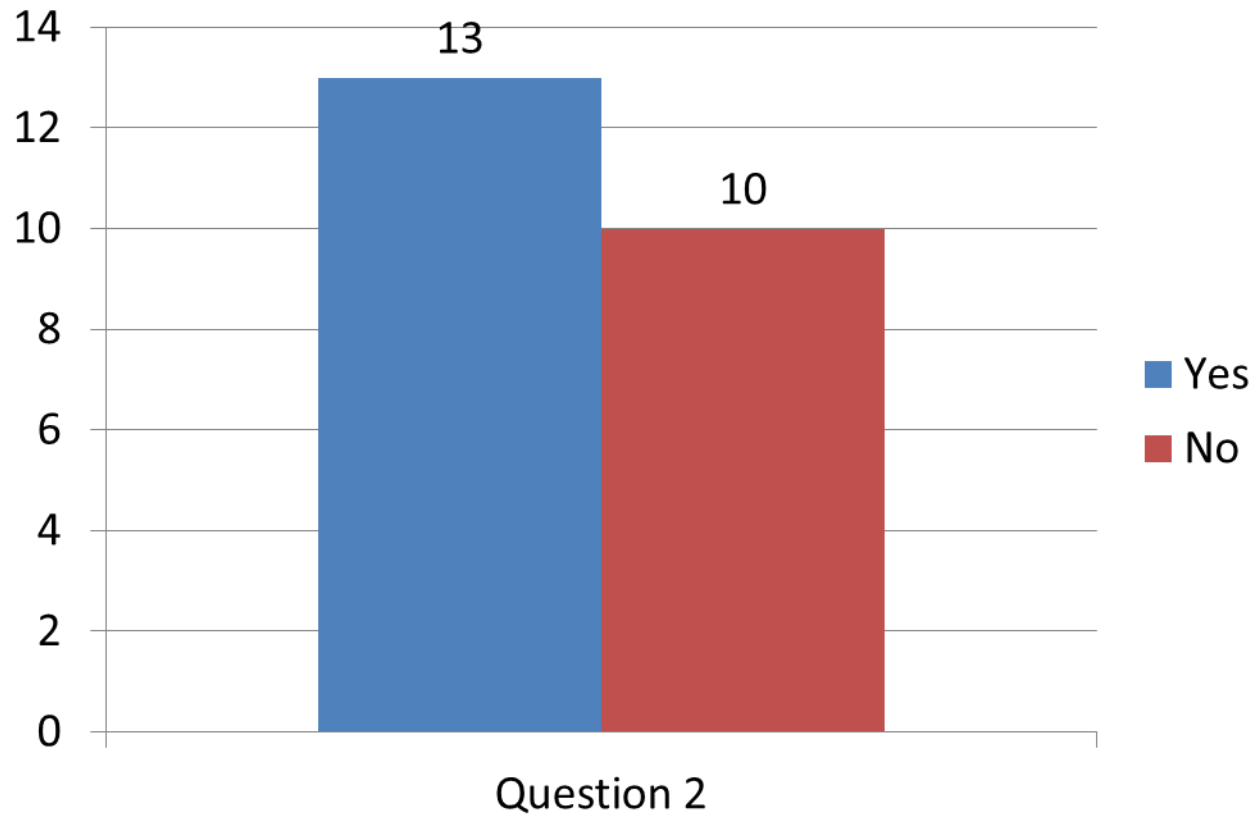
Closure of Walk In Clinic at Weston Church

- 98 letters were sent out to the patients who had visited the Weston Church Walk In Service between 1st July 2014 and 30th November 2015
 - From these 98 patients we received 23 completed questionnaires which equates to 23.4%
 - The results and comments follow.

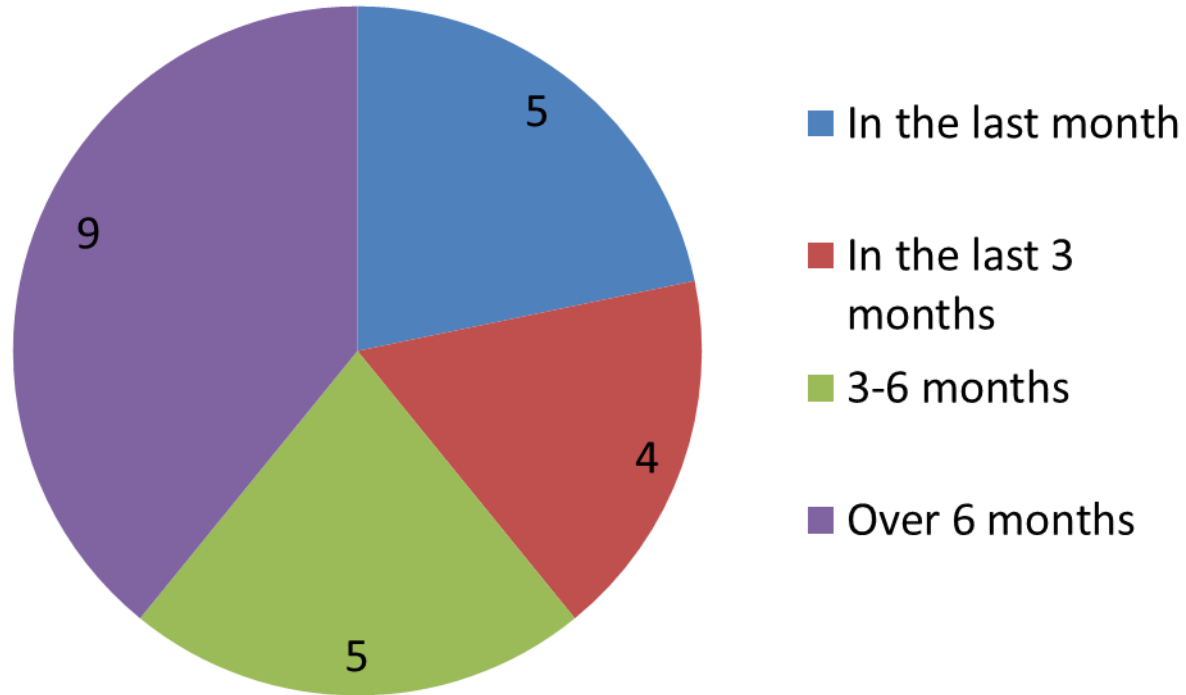
Do you understand the Practice's reasons for planning the closure?



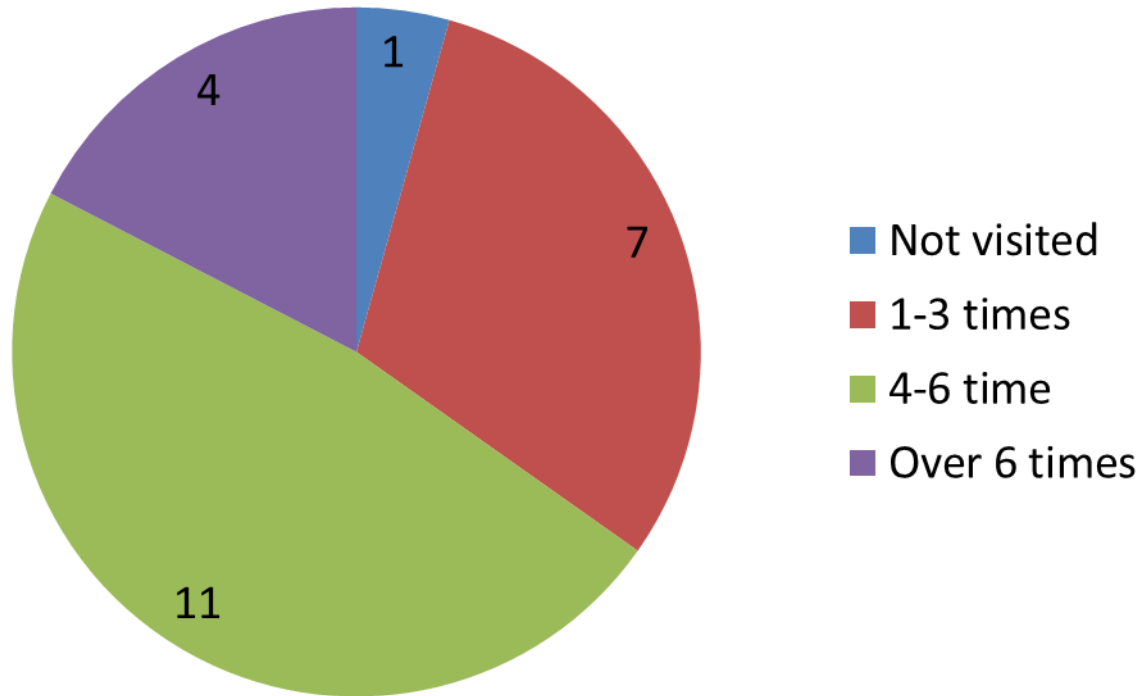
Having read the information in this letter do you support the Practice's plan in principle to close the walk in service?



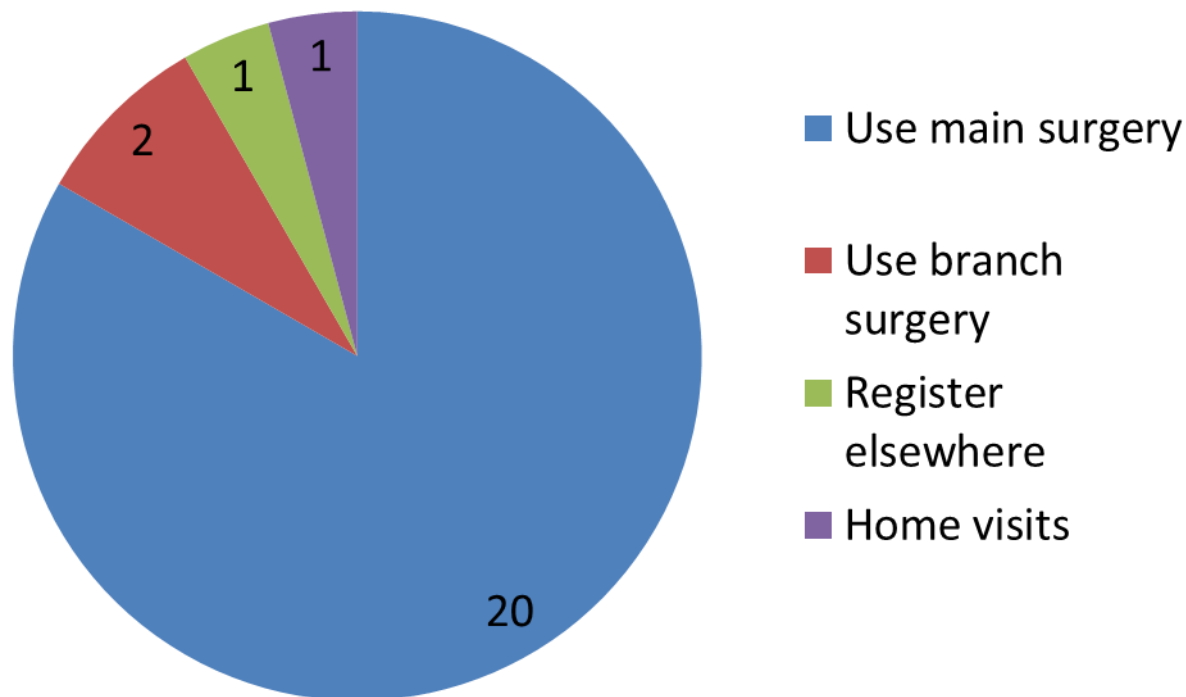
When did you last use the walk in clinic service?



Thinking about the last 12 months how often have you visited the main surgery or the branch surgery?

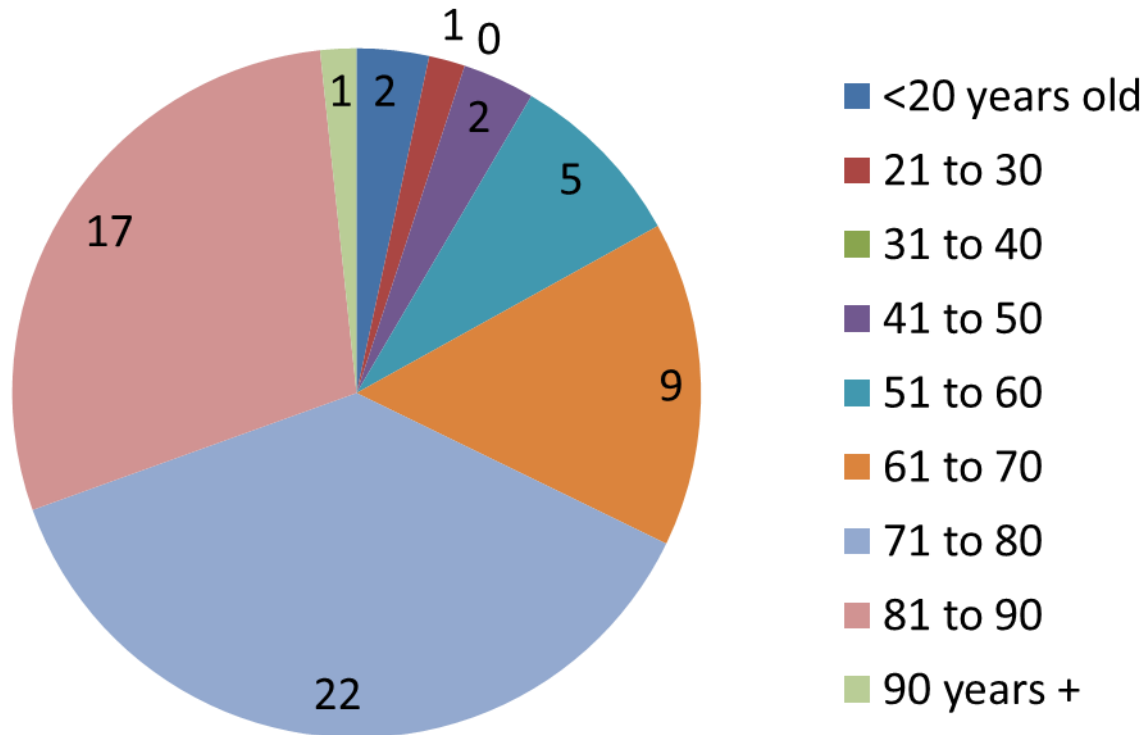


In the event of the walk in service closing, how do you think you would access GP services?



One patient answered main and branch surgery so 24 responses instead of 23

Age groups of patients who used this service from 1.12.14 to 30.11.15



Majority of patients seen are over 70 years old and eligible for Community Transport services

Weston v Surgery Visits From 1.12.14 to 30.11.15

Patient	Visits to Weston	Visits to Surgery
1	0	7
2	3	4
3	5	8
4	6	2
5	0	5
6	0	8
7	0	10
8	3	8
9	0	7
10	0	16
11	2	8

This table clearly demonstrates that of the patients who put their name against the returned questionnaire, all but one use the main surgery more than the Weston Walk In Clinic. Over half of these patients have not used the walk in clinic at Weston in the year 1.12.14 to 30.11.15

Comments

- Thank you so much for the services you provide – Junction Road is so handy for patients who live this side of the city (Has used main surgery 5 times and Weston Walk In Clinic zero times in 12 month period)
- I completely understand why you have to do this procedure, however I am a bit worried about people over in Weston. I am a care assistant and I have a lot of vulnerable service users that use this service who live very close by and cannot physically get anywhere else. What about them?
- **Response: If a patient physically cannot get to the main surgery or Junction Road then a home visit would have to be considered.**
- I find Ms Halters reasoning incomprehensible and cannot believe it to be the combined opinion of medical staff at the Practice. We (mainly frail and elderly) at Weston were sad to lose our dedicated and compassionate Dr Spelman, who knew each of us personally and our ailments and who came not monthly as stated but mainly fortnightly and also gave advice on the phone when required. Bureaucracy of late, difficult, your main surgery is inaccessible for any but fit patients with their own transport, as was I until the death of my husband followed by ill health. My neighbour (recently widowed) attempted to walk for an appointment arriving late and exhausted. If you must leave Weston could not transport be reinstated? I understand a visit to an old aged peoples home is combined with the Walk In Clinic. Will they also suffer? (has used Weston Walk In Clinic 6 times and main surgery twice in 12 month period)
- **Response: Transport would not be reinstated. For info, we use to have a mini bus for patient transport however, this was stopped 15 years ago. Nursing Homes (we cover two) will not be affected by this change**

Comments continued

- I understand the reasons for the proposed closure of Weston surgery however for those who live in Weston it is more convenient to access than St James's, especially for the elderly and those without transport. St James's is on a steep hill and has limited parking spaces, some are occupied by non patients, mothers who drop their children off at the school nearby and go shopping locally before returning to their car and nearby streets are parking for residents only whereas its easier to park at Weston and you don't have to wait for an appointment. Having had a moan about the proposed closure what is good at St James's is that I've always found the receptionists very helpful and you have a nice cheerful group of nurses and Doctors (Has used main surgery 8 times and Weston walk in clinic 5 times in 12 months)
- **Response: We use to have an issue with school users parking in our patient car park but have since erected a sign and closely monitor the spaces.**

Comments continued

- I have read your letter concerning the closure of the Friday walk in clinic in Weston Church and I understand the reason you wish to close it, but since the beginning of this year I haven't been able to go to the walk in clinic or your main surgery in Northampton Buildings due to loss of balance, neuropathy in my legs and feet and arthritis in my back, all of which makes it difficult to walk, so I have registered to have home visits.
- **Response: Already noted as home visits**
- Personally I would attend the main surgery for something very personal, but for advice, repeat prescriptions, vaccinations etc, it is so helpful to see a Dr in the village. It is only 1.5 hours fortnightly. I cannot see any risk to staff, especially as there is a café being held in the hall at the same time. (Has used main surgery 4 times in 12 months and Weston walk in clinic 3 times)
- **Response: Already visits the main surgery without a problem. We offer telephone consultations for advice and repeat prescriptions if required.**

Comments continued

- When Philip Jones headed the practice he personally ensured that the 90 minute sessions were dependably regular. Hence the walk in was invariably well-used. Dr Spelman for some time maintained a good service but then either because of staff shortages, poor to bad management or by design, the service 'fell apart'. The Doctors appearances became unpredictable and no-one ever filled in during his absences. One was constantly phoning to know when his next visit might be, my last early in September when I was given a date in October. Patient attendances dwindled simply because people gave up in frustration and despair. To simply make my points of disagreement to question 1

Comments continued

- A) intimate examinations should always be referred to the main surgery where, presumably you have enough staff for chaperoning duties. Incidentally what happens with home visits? If you go ahead with this closure plan, there will be inevitable increase in these, given the aging population.
- B) Much over-stated risk to staff during a 90 minute session in a building crowded because of café facilities on a Friday
- C) 90 minutes (8.30am to 10am) represents 9 ten minute slots at the surgery. When the walk in was efficiently run, mostly more patients than that were seen
- D and E) Upgrading both would not represent astronomical cost
- (Has used the main surgery 8 times in 12 month period and Weston Walk In Clinic zero times)

Comments continued

- Response: If chaperone required for a home visit then home visit would be rescheduled so two members of staff could attend.
- Risk is high for lone worker as even if there was a café operating outside in the hall, it does not mean that anyone would help. Panic buttons are not fitted in the consultation room.
- We have not seen 9 patients in a walk in session in many years. Dr Jones referred to at the beginning of the comments retired 15 years ago
- Unable to comment regarding points D and E as unsure what this refers to.
- Regret proposed closure of walk in surgery at Weston but fully understand the reasons for doing so. The clinic with no appointment needed is very convenient for the elderly and those who don't drive and who live locally. Although St James's is on a main bus route it is situated on a fairly steep incline and has limited parking spaces for those who do drive. The 24 hour walk in clinic at the RUH may get greater use. A mini bus might improve access for disabled.

Comments continued

- Response:
- Transportation can be to the main surgery for the elderly and disabled by using Dial a Ride or Bath Community Transport (Ph 01225 832317).
- Whilst patient parking at the main surgery is limited to 5 spaces, there is one hour on street parking for approx 6 vehicles
- Although I understand the reason for the closure it was very useful for me as you didn't need an appointment and therefore could see the Doctor without a long wait.
- Response
- Patients could access a same day urgent appointment either face to face or telephone consultation. If a patient arrives at the surgery without an appointment but clearly needs one, we always fit them in
- The surgery in the church is handy but it is easy to access the main surgery and now I do repeat prescriptions on line. Your service is very valuable and I will be staying with you (Has used main surgery 10 times and Weston Walk In Clinic zero times in 12 month period)

Comments continued

- This service was run by male doctors over several years without a chaperone. There is no difference between intimately examining a patient at the drop in or their own home. There are no service facilities available in peoples homes. There are hand gels and scrubs available
- Doctors /Nurses are more at risk in patients homes than a church hall staffed by volunteers and full of mainly young mothers and their children
- The reason numbers are down is because the drop in facilities have become sporadic and unreliable since Dr Jones left
- Oldfield Park is inconvenient and lacks adequate parking facilities and public transport access and isn't a viable option for Weston residents. Also the Oldfield Park area already has two large surgeries, pharmacy and dental services.
- In conclusion I would like to add that instead of closing the Weston facility (which has excellent level access for elderly and disabled) close Oldfield Park and develop a fully equipped surgery.

Comments continued

- I'm sure plenty of residents who attend Newbridge would come back to Weston. It would not be difficult to install computer access and proper hand washing facilities. A couple of hours visit to Weston is not going to have any dramatic impact on the main surgery if the Oldfield facilities were closed and moved to Weston. I assume you own the property in Oldfield Park?
- I did have a very productive talk with Dr Rees. She did indicate that there appears to be movement to merge practices into larger ones. I think the Frenchay/Southmead debacle and the closure of smaller community hospitals proves that larger is not in the patients interest. Sadly in my own personal experience of working in Health and Social Services is that when closures/costcutting proposals are put out for consultation a decision has already been taken. What has happened to the ethos of patients first?
- Far from removing services from the vulnerable, elderly and socially isolated, as committed health professionals you should seriously be looking for alternatives and fighting on our behalf to not only retain the walk in service but improving it
- (Has not used main surgery or Weston Walk In Clinic in 12 month period)

Comments continued

- Response:
- Transport issues can be solved with dial a ride or Bath Community Transport.
- Comments confirm risk of lone working as young mothers and children in a church hall do not necessarily mean the staff are save or that the public would assist if needed.
- Comments confirm that hand washing facilities are not up to standard
- We do own Oldfield Park and this operates 5 days per week and is full, unlike the walk in clinic which struggles to attract 9 patients a fortnight.
- Unable to comment on Newbridge patients or how easy it would be to put in an N3 connection in a church hall – not sure that the patient realises the processes and procedures behind a GP surgery with data protection, information governance and CQC

Comments continued

- As a resident of Southlands and attending the walk in service at the church and a long term patient of St James's Surgery at the age of 87, after cancer, hip etc surgery, the closure of the church surgery will deprive me and many others of a needy and human service. Social services will arrange for us non fit patients with transport to the main surgery if need be. Or maybe St James's could help in that direction to show good will and care? So many of us patients have paid tax umpteen years and a little consideration for our well being – instead of the surgery being cost effective, would increase our quality of life. I would beg Dr Playfair (sorry my long term Dr Spelman has retired) and others to keep Weston Church surgery on going! And still have quality attention:-
- **Response**
- **Patients will not be deprived of a quality service. Quite the opposite as at the other locations we are better equipped for the patients. Transport issues – response as before, or in the patients case, we would consider home visits.**

Comments continued

- Receptionists can be unhelpful and abrupt verging on rude and intrusive. Parking a real issue – I have also seen staff parking outside in visitors bays. It will be difficult for some locals to get to main practice. The Free Church Surgery Weston is very good as you know you will be seen and you can park. It is also usually the same Doctor. Can you count this form as two as I didn't get one (Has used main surgery 7 times and Weston Walk In Clinic zero times in 12 month period)
- Response
- Disappointing that it takes a survey to receive feedback about the reception team. I will contact the patient and ask her to contact me to discuss further.
- Parking – as before
- Only counted form as one as whilst one family member has visited the walk in clinic once, the other has never used the service.

Comments continued

- This surgery is a lifeline to patients in Weston Village being the only chance to see a Doctor urgently sometimes having to wait approx 2/3 weeks for an appointment at the main surgery. Also the taxi fare being around £8 each way to St James's
- Response
- If patients need to see a Doctor urgently they should not be waiting for a fortnightly walk in clinic. Urgent appointments are available daily at both St James's and Junction Road. Routine appointments with a particular Doctor can sometimes take up to 2/3 weeks.
- Transport issues – as before
- Care attendance and patience
- Fine as service is
- Response
- Not sure what patient is trying to express here apart from not wanting the service to close

Comments continued

- I feel this is a service that's needed in the Weston area. There are many elderly and young mums. If they have no transport this is very important to them. I myself have used it on 3-4 occasions when I could not have a surgery appointment. I also can see that the walk in service is very much needed. It was well attended the times I went there. (Has used main surgery 16 times and Weston Walk In Clinic zero times in 12 month period)
- **Response**
- **Transport issue as before**
- Very happy with all the services provided at the main surgery and branch surgery. I have been extremely well looked after at St James's surgery. Keep up the good work (has used main surgery 7 times in 12 months and Weston walk in clinic nil)
- One questionnaire returned with no comments however has used main surgery 8 times and Weston Walk In Clinic twice in 12 month period

Conclusions

- The main issue for the patients who responded was transport. For the frail and elderly there is Dial a Ride or Bath Community Transport. From the research conducted the elderly patients are attending the main surgery more than Weston Walk In with the exception of 1 patient.
- Other issues around chaperones and staff safety for lone working are taken on board however I do not believe that the patients recognise the governance and health and safety issues here