



Wadebridge and Camel Estuary Practice

Frequently asked questions following practice engagement and patient responses

1. Who owns Rock branch property and how a transfer of property is often undertaken.
 - The property, as with any private business, is owned by private individuals. Often, new partners of a practice buy previous property owners out at their own expense if they decide to do so. This has not been the case for Rock branch surgery.
2. The current utilisation of Rock branch property compared to the utilisation of Wadebridge.
 - This is difficult to quantify as the practice systems are both different and space varies. It is also important to note due to the varying services on offer, it is not possible to undertake a like for like comparison of the two premises.
3. Where the money would go if there is a sale of the property.
 - As with any privately owned property, the sale would go to the private owners of the property.
4. How many additional appointments can be achieved from the closure from reduced clinical time spent travelling.
 - The same amount of hours of clinical time will be available from the practice closure, however there are many benefits from staff being at the same site for clinical discussions, decision making and cross covering in the event of an urgent patient requirement.
5. How many appointments per patient are available in Rock per GP and per patient verses Wadebridge and the equity share?
 - This is difficult to quantify as the practice offers both face to face and telephone appointments. As patients may have come to Wadebridge instead of Rock depending on the day and nature of their condition, it is not possible to undertake a like for like comparison of availability at the two premises.
6. Why it is more costly to only open twice a week versus full closure.
 - Regardless of the number of times the practice is open, the practice must pay rates. Closing the practice allows some savings which will be used to improve the facilities at Wadebridge.
7. What are the plans for the dispensary or prescription pick up services.
 - The practice is in conversation with the John Betjeman Centre and neighbouring practice with a view to a possible delivery service
8. How will the summer population will be managed?
 - It is very rare for holidaymakers not to have transport. We manage temporary residents mainly at the surgery in Wadebridge with drop-in clinics during the school holidays which will continue.
9. How will parking be addressed/managed.
 - Unfortunately there is no parking available at Wadebridge. There is free parking at Lidl for their customers, or a council car park with refundable fee from the co-operative customers. The practice will explore other options with the council and highways.
10. How/if will the flu jabs / blood tests / warfarin / diabetes monitoring be managed differently.
 - We have started discussions to identify how we can deliver nursing services to Rock in the future.
11. How will after hours (8-8) appointments change.
 - There will currently be no change to the out of hours services. We are investigating options with our neighbouring practices to see if we can collectively improve access to General Practice in the near future.



12. Will there be support for the elderly who are not on the internet or have android phones.
 - We will discuss this with our PPG to identify how we can collectively support patients to either use digital support (android devices) or continue to access services as already able to.
13. How will patients with no access to transport be supported?
 - We are in the early stages of discussions with the John Betjeman Centre regarding the possibility of arranging voluntary transport services
14. Is there going to be an extension of the Wadebridge property?
 - There will not be an extension. We are planning to internally re-configure the existing space
15. How can patients support the delivery of some services to Rock?
 - There is no formal process in place. The practice is exploring how they can integrate with the local population to deliver services differently in future, including partnership projects with the John Benjamin Centre and the practice Patient Participation Group (PPG).
16. Why is it important to make the practice financially sustainable?
 - The NHS is in an extremely difficult position, which is nationally recognised as a problem in primary care and general practice. There are often 30% staff vacancies being unfilled, many of which are GPs. Locum costs are increasing due to the limited supply of doctors which often cannot be afforded by the practices trying to deliver services. This has been recognised nationally and new roles to support general practice are soon to be deployed and funded by NHS England. For more information please see the NHS England publication of Investment and Evolution.
 - <https://www.england.nhs.uk/wp-content/uploads/2019/01/gp-contract-2019.pdf>
17. How will you support patients to not need to go to A&E?
 - Continue with the great quality care we already offer, which will be enhanced when the clinical team work from a single site.
18. How will you promote the new services to Rock patients?
 - Information will be posted on our website. We will ask that the parish magazine publishes the services and also display posters in the local shops (if permitted). The PPG will be kept informed of current services and information will be available from the waiting room or reception at the Wadebridge surgery
19. How will you support nursing home patients?
 - We will continue with the services we currently provide and are looking to enhance our visits with ward rounds by the home visiting service and introducing care plans for each patient.
20. Is there level access for disabled patients at Wadebridge?
 - Unfortunately, there is not, due to the location of the practice, which was built at the top of a sloping hill. However, there is a ramp to enable easy access into the surgery building if required.
21. How will you support patients with limited vision and who are unable to drive or use public transport?
 - We will continue to provide the high quality support for patients with sensory limitations. Often these patients are able to access other places by means of their own preference. If a particular patient requires support – please contact reception.
22. How will you support patients with poor hearing and struggle to make appointments over the phone?
 - We will continue to provide the high quality support for patients with sensory limitations. Often these patients are able to access other places by means of their own preference. If a particular patient requires support – please contact reception.



23. How will you support patients who are frail and are unable to travel long distances or stand for periods of time (such as bone cancer survivors and MS patients).
- We will continue to provide the high quality support for patients with chronic disease and long term illness. Often these patients are able to access other places by means of their own preference. If a particular patient requires support – please contact reception.