APPENDIX 4

Summary of meeting minutes regarding GP support for proposal

Locality Commissioning Group Minutes – May 2018 – June 2019

Thursday 17th May 2018

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice
- Carlie Karakusevic – Channel View

3. Teignmouth Engagement

RC presented a summary on the work-plan of the Teignmouth engagement and advised of where the team is at with the process. It was said that feedback will be shared widely and will use various media outlets to ensure the information is hared widely. Patients that were involved in the feedback from the previous consultation have been contacted and there were over 150 respondents and the Teignmouth area has fairly positive reviews.

The League of Friends for Teignmouth has requested to meet directly with the CCG to limit any animosity and share their concerns directly. The group is already in attendance at the CCG's Engagement Group where Town Council representatives are also involved. However RC advised that meetings are being held with councilors individually also.

MF advised that he had recently been with Councilor Anne Marie Morris and provided feedback on the meeting. Furthermore it was advised that the Councilor will have another meeting with the Accountable Officer and Chair of the CCG at the end of May. It was said that there is good evidence that Intermediate Care is working well and there is a confidence in that area. This led to a discussion on what data is available and what is appropriate to be shared at engagement level before consultation. MJ queried the timescale between Engagement and Consultation and RC advised that it is dependent on the feedback provided in the engagement period. The CCG also has to take into account of the NHS England gateway process and a proposal will need to be developed before the changes progress to consultation. But there is an estimated rough date for Autumn if the process runs as planned. MF asked whether a timeline can be advertised with the Engagement and he was advised that if that information is shared it will seem as though the decisions have been made which is incorrect.

It was said that they are reopening the plan of looking at alternative sites for the building, however most people currently seem more favorable to the hospital. Complaints have been made to the council regarding the car park site and there are currently discussions to be had with them regarding this. RC advises he wants to be as clear as possible with the sites being looked at and advises he is aware of the main issues raised by the population on Parking and Transport. The meeting gave an opportunity to air their thoughts on the proposal.

MF gave a suggestion to keep part of the hospital and have another section off site, however RC advised that he was not that option is not possible. It was said that the strategic partners will be announced in August and TA, JS and CK will need to be sighted on the strategic board. The meeting raised a concern on whether Primary Care will be a lesser priority with the new collaboration, however MF and RC reassured the meeting that the Trust are supportive and are signed up to ensure Primary Care are equally involved.

Lastly RC asked the meeting for their support in promoting and sharing the Engagement where possible. It was said that everyone involved will look at the feedback and share with the trust and practices at the end of the process.

Thursday 5th July 2018

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice
- Carlie Karakusevic – Channel View

5. Teignmouth Engagement

The meeting was updated on the current stage of the engagement process for Teignmouth which is that the team is working through the survey responses at present. The report will be split up into different sections and the Coastal Engagement Group is working alongside the CCG to ensure the report is a true reflection of the results. Each CCG member working on the report has a buddy from the local community and will be shared in due course along with the proposed timeline provided at the last meeting. RH shared common themes that are being repeated throughout the feedback and it was said that it is clear the new model of care is not being well communicated. Teignmouth League of Friends are working closely with the CCG on this work also and are included in the wider meeting specifically tailored for this piece of work. The most recent meeting outlined the next steps and a timeline of the whole process and the proposals needed to be reviewed by NHS England prior to Consultation period which is planned for October. It was key to highlight that MF and CK are involved in the process and highlighting the priority of Primary Care within the work and to not lose sight on the urgency needed. Further updates will be provided to the meeting as things progress.

Thursday 13th September 2018

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice
- Carlie Karakusevic – Channel View

4. Locality Plans

JT discussed with GPs the outcome of the public engagement regarding the future of health services in Teignmouth. They discussed the vision of a health and wellbeing centre, developing proposals for consultation and the implications for Teignmouth Hospital. Discussed the need to have all partners signed up to the vision, proposals and implications for Teignmouth hospital. GPs confirmed that all practices supported the proposals and implications and would take part int eh consultation. Noted that GPs had been active during the puboic engagement and agreed that they would confim support in writing and develop and joint vision with the Trust. Agreed that primary care would need to consult with their registered patients on any changes to the delivery of primary care. The CCG will need to consult on any changes to services provided from the hospital site. The GP practices need to develop a business case urgently.

Action 6: The GPs agreed to write to Simon Tapley outlining their support for the vision for Teignmouth including the development of the health and wellbeing centre, co-locating of GP practices and the implications for Teignmouth Hospital.

Thursday 22nd November 2018

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice
- Carlie Karakusevic – Channel View

Teignmouth reconfiguration

MF updated the meeting on the status of the Teignmouth reconfiguration sharing that JT and CK are absent from today's meeting as they are attending Devon scrutiny. MF explained that the proposal have been via the senior leadership team and will therefore be in included in the papers for Governing Body on 29.11.18. If the papers are approved at GB there will be an extraordinary public meeting.

The meeting discussed the associated papers checking if everyone had seen the most recent copy. The meeting confirmed they had seen the papers via a link from Devon scrutiny.

Thursday 14th February 2019

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice

Teignmouth Reconfiguration

JT shared that in January Teignbridge Council offered a slightly different site which excluded the two freehold properties. JT shared that Lesley Darke is working on a business case and the CCG is in conversations with GPs regarding the notional rent.

JT shared that the Clinical Senate have reviewed the care model and agreed that a full review panel is not required. A stakeholder briefing was circulated on 05.02.19 and the ETTF money is now available to support the project and will be transferred by the end of the financial year.

Thursday 11th April 2019

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice
- Carlie Karakusevic – Channel View

Teignmouth Reconfiguration

CK has a meeting with Liz and Julian today (11.04.19) to discuss how the three practices will work together in the new building, and to update the schedule of accommodation for how they currently use their buildings.

CK reported that there is £250,000 from NHSE waiting to use for project development.

CK shared that Teignbridge District Council are still in discussions regarding the value of the land at Brunswick St. The ICO will hopefully have more information by the end of the week and then further financial modelling can be done.

Thursday 13th June 2019 (draft minutes)

Clinical attendance from

- Matthew Fox – Barton Surgery
- Julian Squires – Teign Estuary
- Trish Allen – Teignmouth Medical Practice

Teignmouth Reconfiguration

JT reported that the Trust have developed a business model and have a finalised the schedule of accommodation (SOA). Three options have been created for the business model offering TDC three different payment models for the land with different increases in notional rent.

Simon Tapley and Liz Davenport met with Phil Shears on 10th June, after which a bid was submitted and will be discussed by the Teignbridge District Council Executive on 2nd July and by full council at end of July.

CCG-led Teignmouth Steering Group minutes – August 2018 – August 2019

Membership from Dr Carlie Karakusevic

3 August

3. Project Updates

Estates: Simon and Lesley

Simon updated that there have been two or three meetings now with Teignbridge District Council to discuss the Brunswick opportunity. The local authority is very supportive of the idea of having a healthcare facility.

There was a discussion around the need for detail of the cost of the build to share with the NHS E and also the public; the final costing will be influenced by the primary care proposals for the build that Emma is developing and also how the land is obtained. It was thought to be sensible to use the estimate of £5m as a sum that all are familiar with.

Simon asked Carlie as to whether the practices in Teignmouth would be supportive and welcoming of the Brunswick development? Carlie stated that the site needs to be large enough and meet the needs of the health and wellbeing team. It would not be a problem for practices to move from one town centre site to another.

Primary care: Carlie, Emma and Mat

Carlie highlighted the risk of sustainability of primary care in Teignmouth and talked about the need to be able to act quickly in providing premises which will be fit for general practice for now and also the future. Carlie expressed concern about the timeliness of the engagement and consultation work; doing something bigger and better, can't be at any cost to primary care.

14 September

NHS England gateway requirements and feedback from Service re-configuration

Proposals: Jenny noted that although it suggests that primary care and CCG run different parts of the consultation it does need to be seen by the public as an interlinked project and dependent on each other. It would be helpful to have the financial interdependencies described. The group agreed that they were happy with the draft proposals. JT noted importance of having evidence of GP support for whole vision including the movement of outpatients and theatres and closure of Teignmouth Hospital. If we cannot go ahead with all of the project, the rest will stall.

Action: CK to provide written confirmation

27 September

Support from GP commissioners

- To be provided in writing

AW and CK discussed yesterday and suggested a shared statement of what we are all trying to achieve so that all organisations to sign. Jenny explained that a 'must do' for the Gateway is to have GP support.

ACTION: Ann and Carlie will write a statement for Teignmouth GPs to meet and discuss, co-create and sign.

Meeting between Teignmouth GP leads and TSDFT to discuss vision

11.10.18

Present:

Strategic Estates Partner: Hugh, Darrel and Peter

CCG: Vanessa Dunn

Practices: Carlie Karakusevic, Liz Brown, Julian Squires

ICO: Lesley Darke; Ann Wagner; Liz Davenport

3. Discussion

[iexcerpt…]

- Context re primary care and equity
- All have shared interest and need strong primary care - sustainability

- Investment part of messaging
- Have to release the hospital site to fund this
- 2 consultations - GPs to consult patient list re moving premises - haven't started that yet - need feedback from joint primary care committee; And the formal public consultation re rehab beds, moving services, therefore we no longer have need for the hospital
- Script re care model, coming together with joint model to deliver - join up sustainability of primary care with integrated care
- Where's everything else going? Need to tell them what's staying and what's moving ; theatres moving but numbers really small from this population
- Delay Creates uncertainty
- Harnessing LOF and SoH - how to help to shift thinking - build on
- NHS E need a statement from primary care that they agree with the vision **ACTION AW to draft based on Dartmouth/brixham - start with community - shared commitment**
- Clinical case for change - different ways of working - integration - working hard in separate spins at moment - need to update And build in the technology
- Care pathways - local conversations - health community - what does the model look like on ground
- What does excellent look like
- Mutuality of benefit
- Regenerate - foot fall, business, investment, bringing services into the heart
- Community resilience

<u>Steering group 12 October 2018</u>

Present: Dr Carlie Karakusevic

3. Support from GP commissioners

CK & VD fed back that following a meeting with Teignmouth GPs last night, Ann is drafting a shared vision statement from providers. This is being based on the Brixham & Dartmouth vision.

ACTION: To agree shared vision statement

4. Briefing feedback

ACTION: Carlie to use briefing to aid discussion with staff

Engagement to influence proposals

- *Primary Care Committee* agrees consultation is more information-providing but they do want a quality impact assessment completed. Vanessa is aware.

<u>Steering group 26 October 2018</u>

Present: Dr Carlie Karakusevic

Pre-consultation business case

JT opened the item by thanking everyone who has worked so hard in collating the required data for the business case, particularly Lesley's team.

JT explained that at the executive meeting it was decided to delay the gateway meeting from the beginning of November until the end of November. In reaction to this all comments on the pre-consultation business case must be emailed to JT by 1pm on Monday 29th October so final amendments can be made.

The executive meeting also reinforced its requirement for two proposal options which is also preferred by NHSE. It was discussed that the preferred option is one that meets the vision and option two is to do nothing. With this in mind it was decided that the business case needs to clearly reflect that retaining Teignmouth hospital does not meet the vision and shared community ambition, and will result in actively disinvesting in primary care. It was also noted that if the community come back suggesting a third option of having both the hospital and a H&WC, an explanation is required around financial inter-relationships.

ACTION: CK to send consequences on primary care if option 2 is supported and LD on the impact for Teignmouth Hospital

CK suggested that GP practices could produce a video relating to challenges of GP practices. This was agreed by the meeting as a good idea. It was also expressed that the Coastal Engagement group would like to see a detailed plan and physical model alongside an explanation to why we want to re-locate.

Steering group 21 December 2018

Present: Dr Carlie Karakusevic

Feedback from meeting with GPs

Carlie shared with the meeting that she met with Ann Wagner and Helen Elkington on 18.12.18 and discussed the conversations with Teignbridge Council and the gateway meeting.

Carlie expressed that the ICO needs to understand primary care space requirements as the size of the building has fluctuated 20-25%. She also noted that costs need to be based on fact rather than predictions.

Carlie shared the figures from previous documents which vary between 1165 m^2 and 1471m^2.

NHSE state primary care require 500m^2 per 6,000 population, therefore, Carlie expressed the requirement for a figure between 14,81 - 1706 m^2 and noted this information had been given to Helen Elkington.

Carlie shared the meetings disappointment of being stalled on the project two years after its initial starting, detailing that on 26.01.2017 primary care had asked the ICO about funding streams, the financial model, an outline business case and affordability.

Jenny acknowledged the disappointment and frustrations however, stated that a lot of the work was not possible due to fact there was no available site.

Carlie expressed she still hasn't seen a financial model and that information sharing needs to be improved between the CCG, ICO and primary care.

The meeting discussed the notional rent, affordability and the gap in capital. Lesley shared that to build on the hospital site would cost 6.4million and Brunswick street nearer 8million.

Lesley noted that she had seen an email from NHS E, via Anne Wagner that detailed there was an addition £750,000 ETTF money on top of the £250,000.

ACTION: Lesley to forward email from NHSE to Jenny and Vanessa re: additional ETTF funding

ACTION: Lesley to share capital outlining spreadsheet that was presented to the council with Carlie

<u>Steering group 18 January 2019</u>

Present: Dr Carlie Karakusevic

Jenny explained that to progress to stage 2 with NHSE several actions required clarification:

- The clinical senate requested to review the clinical case for change. Jenny shared that they have received all necessary information and will complete a desktop exercise by the end of January

- NHSE wanted clarification on the site and to see a clear financial model

<u>Steering group 15 March 2019</u>

Present: Dr Carlie Karakusevic

Update on primary care business case and site

Carlie explained that she has been looking at a schedule of accommodation (SOA) which is dated 07.02.19 however was under the impression Lindsey was going away and coming back with an updated SOA but has had no reply.

Carlie expressed the need to see an updated SOA before the meeting with Mark Proctor on 27th March.

ACTION: Lesley to chase Lindsey on an updated SOA

AOB

Carlie shared that Julian Squires has been struggling to get a response from Teignmouth Medical Group to set up a meeting after a visit from Darryl Coltrini.

ACTION: Lesley will check if there is still a delay in communication between Darryl and TMG

<u>Steering group 26 April 2019</u>

Present: Dr Carlie Karakusevic

2. Minutes and actions from the last meeting (15.02.2019)

Act 1: GPs submitted a revised space requirement and usage and have further ideas they can discuss. Still waiting for an updated Schedule of Accommodation (SOA). GPs meeting with Lesley again 14/05/19.

3. Update on health and wellbeing centre business case development and project board

Helen shared that Lyndsey will circulate a final draft of the SOA by 03.05.2019 which can be discussed at the GPs meeting on 14.05.2019.

<u>Steering group 17 May 2019</u>

Present: Dr Carlie Karakusevic

3. Schedule of Accommodation

Carlie reported that the SOA was not provided to her until the morning of the 7th May for a meeting with the GPs that evening.

The meeting discussed how primary care and the ICO can collaboratively plan their use of shared space.

Carlie noted a number of amendments to be made on the SOA as shared facilities such as waiting rooms, corridors and toilets being assigned solely to the primary care footprint and therefore coming out of their 1,400-1,500sqm allowance.

ACTION: Louise and Liz to attend the next meeting with Carlie and Darryl to discuss the SOA and shared space (22.05.19 - 6.30pm in Chudleigh)

Carlie shared that the three practices are starting a foot fall survey after the bank holiday to help plan how space should be used.

4. Financial modeling

Carlie noted that the current and forecast challenges faced by primary care were a major factor behind the need for a new health and wellbeing centre and these should be key part of all communications and engagement messaging.

ACTION: Alex and Carlie to discuss current vulnerabilities and risks in Primary Care to developing clear key messaging

<u>Steering group 7 June 2019</u>

Present: Dr Carlie Karakusevic (by telephone)

3. **Schedule of Accommodation**

Liz reported that she met with Carlie and Darryl on 22.05.19 to discuss the SOA and agreed to cut down on the MDT meeting space and adapt some rooms to accommodate additional flexible working areas.

Carlie reported that the foot fall survey has shown what was expected and that she will share the results this afternoon, so it could be used in the meeting between Simon, Liz and Phil on Monday.

ACTION: Liz to share a detailed foot fall model by the end of the day

Lesley reported that the SOA has been finalised and equates to 1447sqm for GPs, 1012sqm for the Trust and Voluntary sector, equaling 2460sqm.

Carlie reported a discrepancy in the figures. Lesley shared that she will check the spreadsheet and circulate to confirm.

ACTION: Lesley to confirm spreadsheet figures against report as they are different

4. Financial Modeling

The group discussed the briefing paper which was circulated prior to the meeting with Lesley explaining the land presents an issue with affordability.

Lesley reported that at a zero land cost the GP notional rent is exceeded by £73,000 per annum. However, if the cost of land was £200,000, the gap would be £81,000.

From a Trust perspective Lesley confirmed that it is affordable however noted there are a couple obstacles which need to be confirmed to progress:

- Devon CCG to approve additional GP rent (negative equity)
- GPs to confirm that they are going to move

Carlie reported that when the GP buildings were last valued in September 2018, there was an estimated negative equity amount of £20,000-£30,000.

In an email from Jo Turl, Carlie shared that Jo confirmed that the Strategic Estates Partner have no interest in purchasing the GP buildings, but will put the GPs in touch with a company to consider a potential development. Carlie explained that Liz Brown has already put GPs in contact with a developer.

The meeting discussed the possible support the GPs may need to be assured that they have the support to move and can sell their buildings. Lesley suggested using the set partner for some project management support.

Carlie reported that the ETTF money is hoping to be with GPs by the end of June however, a project manager is now required to move forward at pace.

ACTION: Lesley, Carlie and Jenny to discuss project management support for GPs

<u>Steering group 14 June 2019</u>

Present: Dr Carlie Karakusevic

2. Premises update

HE noted that Trust had submitted a proposal to Tom Butcher at TDC for £200k for the land. The new proposal includes retail pharmacy and income received (£30k) would go to council as incentive.

This means that need to find 120 square metres for pharmacy from within existing schedule of accommodation. For presentation purposes to council, Lesley has taken 60sqm off both primary care and Trust. But needs to be properly thought through and planned. Carlie concerned about losing space. **HE to arrange meeting with CK to discuss schedule of accommodation.**

For how long would we contribute £30k income? This wasn't decided at the meeting. Is it to cover the £200k gap or longer? Simon Tapley suggested after the meeting longer. Helen suggests 10 years.

Which pharmacy: Lloyds previously said they wouldn't be interested, Boots are in bigger premises, Darryl making contact with the third one – Wells.

Report will be presented to Council Executive on 1 July. Full council on 29 July which is after GB. HE to check dates with TDC.

5. Next steps

NHSE Gateway: could not present to NHSE until H&WB centre business case resolved. Want to get a date set for that. Need modelling for how much need to spend, income etc from HE. Needs to set out that it is affordable. HE and CK haven't had formal notification of how the gap in notional rent is going to be bridged. Assumptions about pharmacy and implications on overall cost of build needs to be set out. Doesn't increase construction cost but the third party is not paying for it, so who is? Need to understand this. £30k income is not contributing to collective 'our' cost. If square meterage is less, the rent needs to be more? **JT to pick up with Jo Turl. JT and HE to meet w/c 17 June**

Steering group 14 June 2019

Present: Dr Carlie Karakusevic

3. Premises update

ACTION: LP to arrange a meeting involving Louise, Carlie, Helen and the architect to discuss the schedule of accommodation and design

Teignbridge District Council meeting dates have been confirmed as:

Monday 1st July – TDC for discussion to 'agree in principle'

Monday 29th July – TDC full council meeting for final approval

JT shared that Mark Proctor is waiting for one pharmacy to come back to him on whether they would like to be included in the new health and wellbeing centre.

CK reported that she has a brief conversation with a private developer (Mark Donald) and that Julian is chasing this week to organize for the developer to visit the GP buildings and discuss the primary care exit strategy further.

ACTION: CK to liaise with Julian in arranging meeting with developer and keep JT informed of progress

JT reported that the CCG has a paper going to execs on 24.06.19 to discuss ways in which they can support the primary care exit strategy

ACTION: JT to inform CK of outcome after 24.06.19 execs meeting

Steering group 5 July 2019

Apologies from Dr Carlie Karakusevic

Action updates from meeting 21.06.19

1. **LP to arrange a meeting involving Louise, Carlie, Helen and the architect to discuss the schedule of accommodation and design** 88sqm has been identified. Lesley believes the circulation space can be used to reach 120sqm. Waiting for confirmation. Jenny noted that this would result in GP notes being stored at Dawlish Community Hospital.
2. **CK to liaise with Julian in arranging meeting with developer and keep JT informed of progress** Carlie has met with the developer and is waiting for outcomes and next steps. Developer is arranging to meet with Julian.
3. **JT to inform CK of outcome after 24.06.19 execs meeting**
   The Primary Care Exit Strategy was discussed at the Execs to Execs meeting on 24/06/19. It was noted there is some more work to be done before going back to Execs on 22/07/19.

Steering group 2 August 2019

Present: Dr Carlie Karakusevic

Minutes and actions from the last meeting (05.07.2019)

2. **Alex to clarify pharmacy arrangements with Mark Proctor**

Wells have said they may be interested. Jo Turl has informed Carlie that the CCG is willing to take the risk on the £30k per year whether or not they find a pharmacy or other solution.

3. **Jo to follow up with Jo Turl after Exec to Exec meeting re: exit strategy**

– to update within meeting

9. **Jenny to chase up status of GP project management support**

Siobhan Cambridge has reported that Chris Stoppard has been instructed to complete some inter-practice work. Jenny shared that the CCG are aware of the project support required on the primary care exit strategy and is seeing if Chris can also support this.

10. **Alex to draft a joint briefing for circulation after 28th July re: bid update**

The meeting discussed that Teignbridge District Council have accepted the bid on Brunswick St, that the CCG have decided to go at risk with the £30k rent per year and that hopefully soon the GPs will be in a position to progress, once some finer details are confirmed. This means comms can start to draft a joint briefing with TDC to provide this update. Alex is meeting with TDC comms today (02.08.19).

ACTION: Alex to produce a draft briefing joint with TDC

3. Premises Update

<u>Schedule of accommodation</u>

Carlie and Liz P have been discussing the SOA and confirmed that have saved a total of 92sqm, however without sight of a floor plan they are struggling to find anymore. Jenny reported that Lesley had identified some further circulation space.

Carlie reported that she has received an email from Jo Turl which confirms that the CCG has agreed to the uplift in notional rent and to cover negative equity through a loan.

Carlie shared that she has asked Jo Turl for finer detail regarding the loan to practices and that she requires some timeline clarification re: H&WC rent / going ahead at risk.

She has also raised an issue regarding the developer suggesting a contract around 'loss of potential profit' if the project doesn't go ahead. Also that all three GP practices need to have a change of use request for their premises submitted as part of the process to apply for planning permission on Brunswick St.

ACTION: Simon to speak to Lesley re: change of use for GP buildings