

POPULATION GROWTH PUTS SURGERIES UNDER PRESSURE

Although the population of Fleet has increased by 9,000 in the last 10 years, no new General Practice (GP) surgeries have been built to accommodate this significant increase in population. Fleet has 3 major GP surgeries which are: Fleet Medical Centre, Branksomewood Surgery and Richmond Surgery.

When Fleet Medical Centre moved to its current location, it brought with it some 10,000 patients from its previous location. It acquired 2,000 new patients from the new catchment area and has since accepted an additional 3,000 patients, the bulk of the Elvetham Heath 4,653 population from 1,947 homes, taking it to 15,000 patients – and still growing.

The funding for Fleet Medical Centre is only for 11,500 patients, because the practice is deemed to serve mainly professional patients, who live in 'educated' postcodes and who will self-medicate or pay extra for treatment themselves. The working premise behind the funding calculation is that only 50% of patients will attend the surgery and only once per year. It transpires, however, that over 90% of registered patients attended this surgery 4 times in the last year.

This large and oversubscribed surgery is strongly discouraged from closing its doors to new patients, even though it is already 4,000 patients above its funding level, because to do so would bring a radical reduction in the existing funding. Contrastingly, in Southwood, with a different assessment of postcode, the surgery is funded for 10,000 patients but only has about 8,000 on its books.

Branksomewood Surgery has nearly used up its current floor space and is also under pressure. It would look to expand and to build two further consulting rooms - one for a GP and one for a nurse. Employing a new GP could support growth of some 2,000 patients. Building space for this is available and funding has been sought from Hart District Council. The surgery has received a verbal response from a Hart spokesman to say that, "There are no funds available for expansion". Sadly,





Branksomewood has the space but, without funding, would not be prepared to proceed with any expansion/employment of additional personnel.

According to a Branksomewood spokesperson, 'There is a national formula for working out required health practices in a given area and there is insufficient need for a new practice in Fleet. Hart is "healthy and wealthy". However, using the formula does not take into account the high amount of elderly population in Fleet'.

The Branksomewood spokesman also made reference to the fact that it was not simply a case of hiring additional staff, because infrastructure issues, such as car parking and waiting room space, would need to be addressed.

A spokesperson from the local FACE-IT group said that the problems with parking at Fleet Medical Centre and Branksomewood were well known by its members, as were the difficulties of obtaining an appointment with their doctors of choice, within a reasonable period. The greatest problems were faced by patients trying to make telephone calls early in the morning to seek urgent medical appointments. The numbers were often engaged or appointments were not available for many days. Just turning up at the surgery could be an anxious and wasted journey.

Richmond Surgery is planning to serve the new QEB development of 2,000 homes and is anticipating some 3,000 new patients. It plans to build 5 more consultation rooms for £450,000, with a £100,000 grant sought from the QEB developer, Taylor Wimpey. There is a funding shortfall of £350,000 and the development has yet to be given final approval. It is interesting that Taylor Wimpey has also been asked for a grant of £110,000 for art works, demonstrating that Hart values art more than healthcare.

The FACE-IT spokesperson said that they were receiving many anecdotal reports from Fleet and the surrounding communities of waiting periods as long as 2 weeks at Fleet Medical Centre and Branksomewood Surgery





and typically a 1 week at Richmond Surgery. It was hard not to envisage that Richmond's patients will see a similar decline in service as residents begin to move into the QEB development. FACE-IT members were also challenged by difficulties in parking at Fleet Heath Centre and Branksomewood Surgery and many were stressfully allowing as much as 20 minutes to be sure of finding a space and not to be late for their long-awaited appointments.

The Primary Care Trust (PCT) structure did seem to have responsibility for buildings and facilities but much will change in April 2013. It seems the Clinical Commissioning Group, which will take on the commissioning of clinical services next year, will not be responsible the associated facilities and that this responsibility may stay with what will remain of the PCT. This change could make it even more difficult to ensure services are fully integrated with and adequately support local development and population expansion plans. 'It was also very worrying for many residents that local health services did not seem to be given sufficient priority in the Fleet area, which appeared to have an increasingly ageing population.', said the FACE-IT spokesperson.

Ends

For further information contact publicity@faceit-group.org

Press Release