



Health & Social Care Moray

**Report on the consultation for the proposed permanent closure of the Moray Coast Medical Practice branch surgeries in Burghead and Hopeman**

8 September – 16 December 2022

Date of report: 4 January 2023

# **Consultation report - Moray Coast Medical Practice branch surgeries**

## **1. Background**

Moray Coast Medical Practice is an independent contractor which provides services under the General Medical Services contract to a patient population of 10,195. Services are provided from the main building at Lossiemouth and two-roomed branch surgeries in Burghead and Hopeman which are 7.8 miles and 5.5 miles away.

The COVID-19 pandemic meant that Moray Coast Medical Practice - like all GP practices in the UK – had to rapidly change the way it delivered consultations. In March 2020, the UK and Scottish Government instructed GP practices to conduct consultations remotely unless there was urgent need for a face-to-face appointment. As a result, the practice stopped using face-to-face appointments as the first point of contact. Instead, most patients were offered telephone or video consultations.

The Lossiemouth surgery has continued to be used when in-person appointments are required. Both branch surgeries, which have operated on a part-time basis for the past 30 years, temporarily closed in March 2020 due to inadequate space to allow social distancing and an inability to meet other risk mitigation measures.

Patients on the housebound register and those who are too ill to attend Lossiemouth medical centre are visited at home.

The Lossiemouth premises was built on Ministry of Defence land with a 25 year lease which is due to expire in 2033. The Burghead branch surgery is rented from a private landlord and the lease is due to expire in December 2023. Hopeman branch surgery is a GP owned property.

## **2. Executive summary**

### **The case for change**

The future of the branch surgeries had been discussed by Moray Coast Medical Practice and Health & Social Care Moray for many years prior to the COVID-19 pandemic.

Consideration as to whether the premises at Burghead and Hopeman can be safely reopened have been based on the following key points:

- Inspections shows neither of the buildings in Burghead and Hopeman are fit for the purpose of running a modern medical branch surgery. They fail to meet legislation and standards for the delivery of modern, high quality healthcare, particularly for patients with a disability. This is due to their size, layout and condition (internal and structural).
- Even with significant investment, the failures cannot be resolved due to the limited space to extend and improve the buildings.
- Moray Coast Medical Practice does not support a return to working in the buildings. They have concerns for the safety and welfare of patients and staff.

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- The practice is not able to deliver services to patients at Burghead and Hopeman at the same standard as in the Lossiemouth medical centre.

Health & Social Care Moray has recommended the permanent closure of the Burghead and Hopeman branch surgeries for the following reasons:

- Lossiemouth is a modern, fit for purpose medical centre. It provides high quality facilities for patients and staff. It is fully wheelchair accessible. There are opportunities to expand and improve the clinical space.
- Patients attending at Lossiemouth have access to a wider range of services and different members of the practice team. They also have access to the full multi-disciplinary team of health and care professionals who are based together in the Lossiemouth building.
- Concentrating services at Lossiemouth will support Moray Coast Medical Practice to secure a sustainable, effective and equitable model of service provision for the broader Lossiemouth Locality.
- Recognising there is no direct Stagecoach bus service between Burghead, Hopeman and Lossiemouth, a bookable Dial M for Moray on demand bus service is currently in place Monday to Friday between 10.00am and 2.30pm to take people from the coastal villages and surrounding communities to Lossiemouth for health care appointments and any other journeys. This is bookable a day in advance.

### Consultation activity

A total of 653 consultation questionnaire response forms were received (both online and in hard copy). Seven emails/letters were received. Two public consultation meetings took place with around 140 attendees.

### Questionnaire responses

- The majority of respondents to the questionnaire (75%) **do not support** the proposed closures of the Burghead and Hopeman branch surgeries. 15% were unsure and 10% were supportive;
- The majority of respondents (84% for Burghead and 82% for Hopeman) felt the proposed closures would have a **negative impact**.

Reasons included:

- Fears that residents' health and wellbeing will be at risk if they experience barriers to accessing a GP service.
- The impact on community life of losing a key local service at a time of population growth due to new housing developments,
- Particular difficulty getting to Lossiemouth surgery for the elderly, disabled and parents with young children,

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- Transport concerns for all patients given the lack of a direct service bus connecting Burghead, Hopeman and surrounding communities with Lossiemouth.
- Concern over increased patient list at Lossiemouth surgery putting additional pressure on the practice, resulting in longer waiting times for appointments.

### Consultation events

Key themes from the public consultations meetings included:

- The impact on communities with a growing population of losing an important local service. Residents not receiving the local healthcare service they are entitled to.
- The time, cost and stress for patients in having to get a service bus from Burghead and Hopeman to Elgin and then to Lossiemouth for a short appointment, followed by the return journey. This can take as long as four hours.
- The limited time the dial-a-bus service is available and the need to book a day in advance.
- Concern that transport is a barrier to accessing health care for many, particularly more vulnerable residents including the elderly, those with health conditions and children, and the impact this will have on their health and wellbeing.
- Non-acceptance that the branch surgery buildings are not fit for purpose or could not be upgraded to meet requirements.
- Patients are not seeking an equivalent building or service as that offered in Lossiemouth but seeking to retain some form of health service.
- Consideration of the option of keeping one of the two branch surgeries open or of a new build funded through developer contributions.
- The offer made by the landlord of the Burghead building to fund improvements.
- Concern as to whether Moray Coast Medical Practice is prepared to return to working in the branch surgeries.
- The difficulties is getting through to Moray Coast by phone and in accessing an appointment for a face-to-face GP consultation.
- A decision having already been made on the future of the two branch surgeries and the consultation being a meaningless exercise as people's concerns were not being listened to.

### Email and letters in response to the consultation

A small number of emails and letters were received. Key themes from these echoed those from the consultation questionnaire and public meetings.

One submission was received from Hopeman Community Minibus Committee. This highlighted the continued efforts of volunteers to support patients to attend health appointments at Lossiemouth and elsewhere, and requested consideration of

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funding towards the sustainability of community transport scheme which is available at the times when the council's dial-a-bus is not.

### Key points for consideration

Local concern and anxiety expressed should the proposed closure of the branch surgeries go ahead is apparent in the following:

- The response to the consultation questionnaire where **the majority of respondents (75%) do not support** the closure of the branch surgeries in Burghead and Hopeman;
- The attendance at the two public consultation meetings where residents expressed **strong concerns** for the proposed closure
- **Consistency of concern** expressed across all channels of feedback into the consultation and **consistency of themes**.

### 3. The consultation process

The aims and objectives of the consultation were:

- To ensure the patient population was aware of the proposal.
- To ensure the patient population had the opportunity to have their say on the proposal.
- To provide sufficient evidence and information for the Moray Integration Joint Board to make a decision on the proposal;
- If appropriate, to ensure that any issues and themes raised are taken into account and any potential mitigating actions are considered.

The consultation process was overseen by Health & Social Care Moray's Lossiemouth Locality Engagement and Consultation Steering Group.

To inform patients of the consultation on the proposed permanent closure of the branch surgeries at Burghead and Hopeman and to let them know how to feedback their views, a letter, frequently asked questions sheet and consultation response form was sent to all patients of Moray Coast Medical Practice aged 16 and over (8,390).

The letter provided details on the two public consultation meetings and additional ways for people to respond, including using an online consultation form, by email and telephone. Copies of the response form were also made available at the meetings.

The consultation opened on 8 September 2022 and closed after 12 weeks on 16 December 2022.

It was promoted on Health & Social Care Moray's social media platforms and through the issue of a press release which secured media coverage. All information,

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including previous Board papers, were available on the Health & Social Care Moray website: <https://hscmoray.co.uk/branch-surgeries-consultation.html>

### 4. Response to the consultation

This section details the response received to the consultation.

#### Consultation form

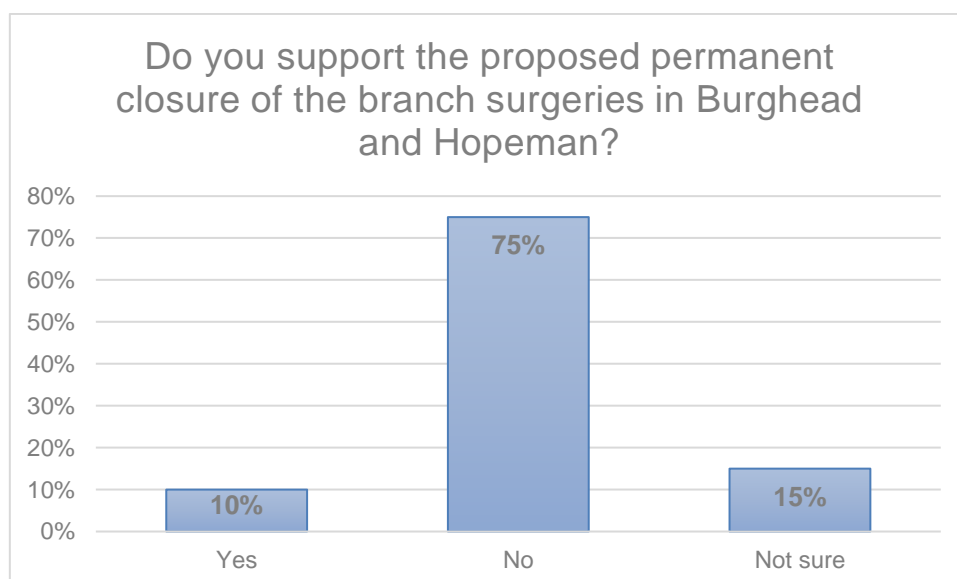
**251** online response + **402** hard copy responses = total of **653** responses.

- More women than men responded
- The highest number of responses came from people aged 45-64
- Over a third identified as being a person with a disability or long-term health condition

#### **Do you support the proposed permanent closure of the branch surgeries in Burghead and Hopeman?**

The majority of respondents (75%) did not support the proposal. This question was answered by 651 respondents.

Answer choices	Responses	
Yes	10.29%	67
No	75.12%	489
Not sure	14.58%	96
	<b>Answered</b>	<b>651</b>
	<b>Skipped</b>	<b>4</b>



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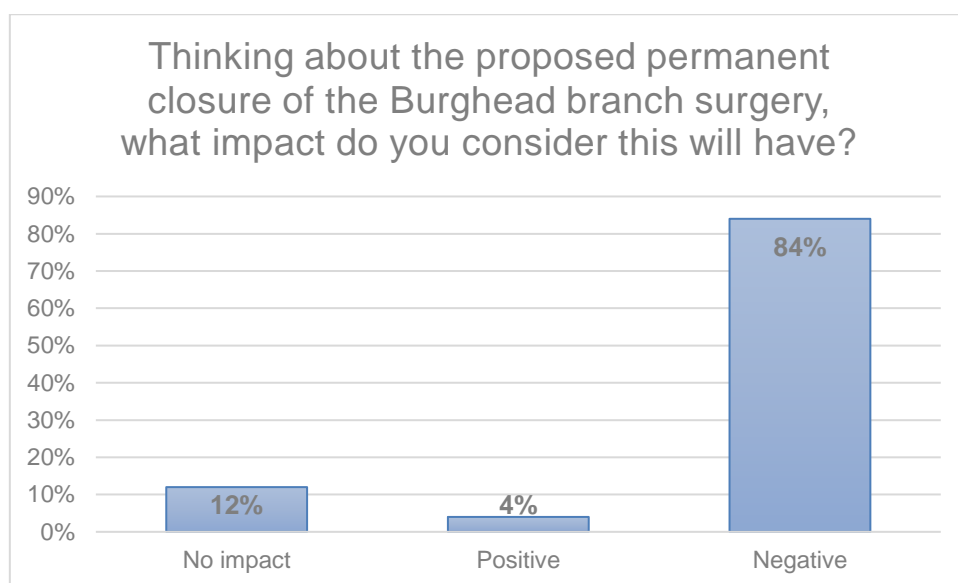
### Have you ever used the Burghead branch surgery?

Answer choices	Responses	
Yes	58.84%	366
No	41.16%	256
	<b>Answered</b>	<b>622</b>
	<b>Skipped</b>	<b>33</b>

### Thinking about the proposed permanent closure of the Burghead branch surgery, what impact do you consider this will have?

The majority of respondents (83.65%) felt the proposed closure would have a negative impact compared to 12.22% who felt it would have no impact. A further 4.13% considered it would have a positive impact.

Answer choices	Responses	
No impact	12.22%	77
A positive impact	4.13%	26
A negative impact	83.65%	527
	<b>Answered</b>	<b>630</b>
	<b>Skipped</b>	<b>25</b>



### Respondents were asked to tell us more about the impact they considered permanent closure of the Burghead branch surgery would have.

473 people answered. Issues raised included:

#### Loss of a local service and transport

This theme was mentioned in 346 responses.

The branch surgeries have been an integral part of village life for decades. Axing them will lead to their decline.

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Patients highlighted the need for a GP surgery in Burghead and the importance of health care services being available in rural communities which were already losing many other services. People valued having health care provision close to home, meaning they did not have to make travel arrangements or rely on others for help. Not having to travel saved time, money and reduced the impact on the environment. It was felt that some type of provision, no matter how limited the branch surgery may have been, was better than nothing.

Traditional coastal villages were said to have higher proportions of older residents who relied on easy access to services. People were concerned they would have greater difficulty getting to Lossiemouth as they got older. When patients had been unable to be seen at Burghead, they were able to access the surgery at Hopeman and vice versa. People had reassurance that came from having a surgery on their doorstep if they suddenly became unwell.

The population is rising due to new houses being built and closure of the service was seen as a backward step when demand for appointments was increasing. Burghead was said to deserve a surgery just the same as other communities and patients should not be expected to travel. Their choice was being removed.

It should not be assumed that everybody has their own transport. Public transport in the area is very limited. Expecting people to take four buses to Lossiemouth and return, which is via Elgin and can take up to four hours, was branded unfair. People do not want to travel when they are unwell. Conditions in winter can make the journey and waiting times particularly difficult.

People did not feel the council's dial-a-bus service was a suitable replacement. Journeys have to be booked a day in advance which mean it cannot be used for on the day appointments, and operates for a limited period. Patients felt it would be too stressful to try to co-ordinate appointments with the bus times and were worried about what would happen if their appointment time over ran.

There is a bus service between Burghead and Hopeman which supports patients getting to one surgery or the other.

### **Impact of permanent closure on more vulnerable residents**

This theme was mentioned in 74 responses and was closely linked to access to transport.

It was considered the elderly, people with a disability or mobility issue and parents with young children would be hardest hit by the loss of the branch surgeries as they would struggle more than other groups of patients to travel to Lossiemouth. The extended journey time via Elgin and the wait for connections would be detrimental to their health when they were already feeling unwell.

People unable to access public transport would be hit financially if they had to pay for a taxi.



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There were concerns that not being able to access GP services without support would impact on people's feelings of independence. They need the reassurance of having medical help close by.

Older people were worried what would happen when they could no longer drive themselves to appointments.

It was again put forward that the worry and stress of getting to Lossiemouth would make people reluctant to try to get an appointment, impacting negatively on their health and wellbeing and adding to levels of health debt.

### **Access to and capacity at Moray Coast Medical Practice**

This theme was mentioned in 81 responses.

People said they had never had difficulty in getting an appointment in Burghead. They considered the proposal would result in a poorer service.

Patients were concerned there would be increased demand for appointments at the Lossiemouth surgery, leading to longer waiting times and a delay in diagnosis and treatment. Respondents felt the practice was already struggling to cope with the existing workload and they highlighted the difficulties experienced in getting through to the practice by phone and in getting to see a doctor.

This view was shared by patients in Lossiemouth as well as those in Burghead and Hopeman. People saw the branch surgeries as benefitting Lossiemouth by supporting capacity.

Respondents were worried people would be put off trying to make an appointment and that their health and wellbeing would deteriorate as a consequence. They pointed to the increasing elderly population in Burghead and Hopeman who would have a greater need to be able to access GP services in a timely way.

Concern was expressed for the pressure on existing practice staff and it was questioned whether more staff would be recruited to respond to the increased demand.

Respondents highlighted the difficulties patients experience in using technology to access services such as eConsult.

### **Branch surgery buildings**

This theme was mentioned in 11 responses.

People questioned why the current buildings could not continue to be used, highlighting that they have served patients well for many years and the communities were content to make do with what had had before, rejecting the position of Health & Social Care Moray that they are not fit for purpose.

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The costs of a new build surgery were also questioned, with patients stating they were not seeking a facility which replicated what was available at Lossiemouth.

### Decision already made

This theme was mentioned in nine responses.

A small number of people questioned the validity of the consultation process, expressing the view that a decision to close had already been taken and that this was a “tick box exercise”. It was stated that as no funding had been identified for a new build or refurbishment of the existing buildings, closure was a “done deal.”

### Supportive and neutral

Points made among the 10 supportive and 18 neutral responses were that as the branch surgeries were already shut they may as well stay shut, and that patients would continue to be seen at the Lossiemouth building where they have access to a larger practice team. It would be more efficient for the practice to provide services from one building rather than three.

### **Have you ever used the Hopeman branch surgery?**

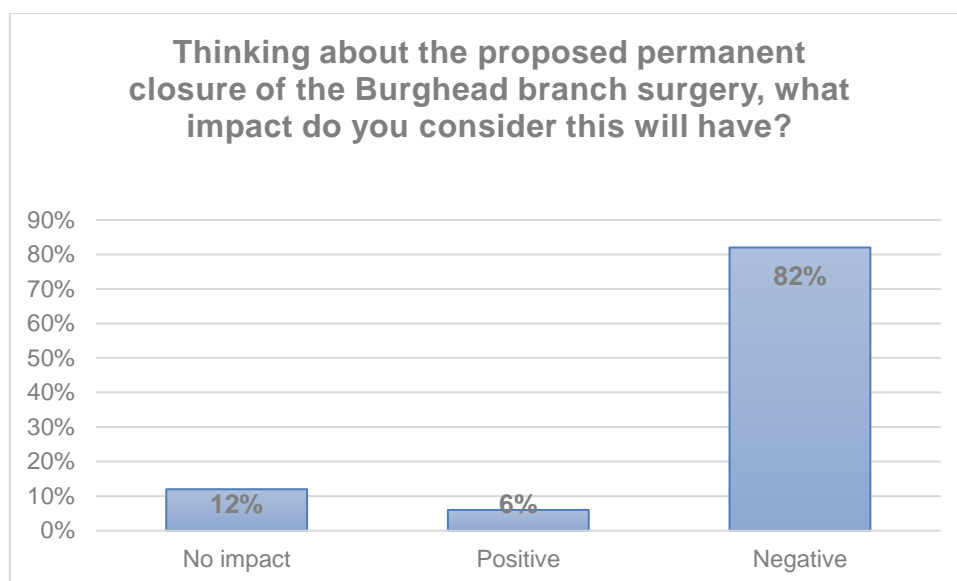
Answer choices	Responses	
Yes	63.61%	395
No	36.39%	226
	<b>Answered</b>	<b>621</b>
	<b>Skipped</b>	<b>34</b>

### **Thinking about the proposed permanent closure of the Hopeman branch surgery, what impact do you consider this will have?**

The majority of respondents (81.94%) felt the proposed closure would have a negative impact compared to 12.10% who felt it would have no impact. A further 5.97% considered it would have a positive impact.

Answer choices	Responses	
No impact	12.10%	75
A positive impact	5.97%	37
A negative impact	81.94%	508
	<b>Answered</b>	<b>620</b>
	<b>Skipped</b>	<b>35</b>

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**Respondents were asked to tell us more about the impact they considered permanent closure of the Hopeman branch surgery would have.**

417 people answered. 93 said their comments with regard to Hopeman were the same as they had expressed for Burghead.

Issues raised were very similar and included:

### Loss of a local service and transport

This theme was mentioned in 154 responses.

The population of the village is growing but has access to fewer services. Village life is being eroded and having a local surgery was the reason some people moved to Hopeman.

Not having easy access to health care support would put additional stress on people who were unwell. Savings were being put before patient care and at the cost of leaving residents with a much poorer service than they deserve. People are more likely to stay healthy if the doctor's surgery is nearby as they will more likely go if they have a concern or feel ill rather than ignore or put off making an appointment. They feel more comfortable being seen in a small surgery.

Not everyone has the option to take their own transport and the limitations in public transport and the dial-a-bus service were echoed from previous comments. People cannot always rely on relatives or community transport volunteers to take them to appointments.

There is a bus service between Burghead and Hopeman which supports patients getting to one surgery or the other.

Many elderly or less mobile patients would not be able to travel by bus causing them financial hardship if having to travel by taxi.

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Closure does not support the push towards people undertaking fewer journeys by car.

### Impact of permanent closure on more vulnerable residents

This theme was mentioned in 29 responses and was closely linked to access to transport.

There are many older people and parents of young children who do not have access to transport. Frailer residents who do not qualify for home visits will have reduced access to medical care. There was also concern there are not enough staff to meet increasing demand for home visits.

The loss of the local service would have a greater impact on patients with serious medical conditions and people with limited mobility. People on low income would be impacted by increased travel costs.

### Access to and capacity at Moray Coast Medical Practice

This theme was mentioned in 39 responses.

People said they had never experienced difficulty getting an appointment at Hopeman. They considered the proposal would result in a poorer service.

Patients considered closure would put more pressure on the practice's provision at Lossiemouth, with more patients meaning fewer available appointments. Many had not had a positive experience of accessing GP services since the start of the COVID-19 pandemic and were concerned waiting times would increase and the Lossiemouth surgery would be too busy.

### Branch surgery building

This theme was mentioned in five responses.

Repairs and improvements to the Hopeman surgery should have been carried out previously so that it remained fit for purpose, rather than being allowed to be run down leading to the current closure. It was considered improvement work to meet legislation could easily be carried out at reasonable cost when compared to overall health budgets.

### Decision already made

This theme was mentioned in 11 responses.

Valid points were made at the public meeting but the panel was not prepared to listen. The consultation materials made it appear a decision had already been taken to close the surgeries.

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### Positive and neutral

Points made among the six supportive and nine neutral comments were that having three surgeries close together was not a sensible model and having GPs working from a central locations would increase the availability of appointments.

### **What action could be taken to reduce any negative impact resulting from the proposed closure of the branch surgeries?**

401 respondents provided comment.

### Retain the existing branch surgeries

This theme was mentioned in 146 responses.

The overwhelming comment was not to close such vital resources.

It was important to people that at least one branch surgery was retained although any closure would result in a negative impact. Patients do not feel the branch surgeries need to be equivalent to the main surgery at Lossiemouth – being able to see a doctor or nurse locally was more important to them and most people have no issue with the size, layout and condition of the buildings.

### Transport

This theme was mentioned in 140 responses.

Improvements would have to be made in transport links, with a frequent, reliable direct bus service between Burghead, Hopeman and Lossiemouth which also linked in with smaller communities.

An on demand shuttle bus could run on days dedicated for Burghead and Hopeman patients. A volunteer car share scheme could be set up or a reduced rate taxi service made available.

People would need more information on dial-a-bus and operating times would need to increase. It should be easier to book transport for on the day appointments.

Waiting facilities should be provided at Lossiemouth, with a suggestion that the empty unit next to the surgery be utilised.

A safe cycle and walking route along the B9040 should be created.

### Existing buildings and new build

This theme was mentioned in 40 responses.

One or both of the existing branch surgeries could be adapted and upgraded to meet requirements. Both are in good locations. The funding proposed for increasing the clinical space at Lossiemouth should be spent at Burghead and Hopeman instead.

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If the buildings do not meet disability requirements they should be adapted rather than closed and disabled patients forced to travel to Lossiemouth instead.

A new surgery could be built in either Burghead or Hopeman or a location in between the two communities. These would be accessible using the current service bus. Developer contributions could contribute to the cost or a local developer could be approached to construct a new surgery. The costs put forward by Health & Social Care Moray for a new build were disputed.

The offer by the Burghead landlord to improve the building should be taken up.

### **Moray Coast Medical Practice – access and capacity**

This theme was mentioned in 37 responses.

Patients shared their negative experiences of accessing services since March 2020. There are concerns people are in poorer health because they have not been able to access health care. They called for improvements to the practice telephone system and a return to being able to see a GP without having to go through a difficult triage process.

Patients want better continuity of care – being able to see the same GP who knows them so they do not have to repeat their story all the time.

More should be done to reduce waiting times. The practice should recruit more staff such as nurse practitioners and for part-time GPs to increase their hours to be able to offer more appointments. Walk-in slots should be offered at the end of the day.

### **Alternative premises and increased provision**

This theme was mentioned in 19 responses.

Surgeries and clinics could be run from other buildings in the villages such as halls or schools or use could be made of a mobile clinic. Other health care practitioners as well as a GP could be made available.

Home visits should be provided on request. Local facilities and IT support should be provided to help patients' access virtual appointments.

## **Consultation meetings**

Two public consultation meetings were facilitated by the steering group. These events took place during October and November 2022

- Hopeman Memorial Hall, 6.30-8.00pm, 27 October 2022
- Burghead Community Hall, 6.30-8.00pm, 14 November 2022

The events were chaired by the Vice Chair of the Moray Integration Joint Board and took the form of a brief introductory presentation by the Locality Manager, Health and

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Social Care Moray, followed by a question/answer session between the public and panel which also included the Practice Manager of Moray Coast Medical Practice; the Chief Officer or Head of Service Health of Social Care Moray and the Public Involvement Officer.

Attendance at the two meetings was around 140. The feedback recorded from the events included:

### Hopeman meeting

- When is dial-a-bus going to be available? Can you guarantee it is going to be available?
- What's the point if you can't get the bus to take you to your appointment?
- Dial-a-bus is only available for a short period during the day. Lots of people will be trying to access appointments during that time and the wait will be longer and longer. No credence has been given to having one surgery to serve both communities. The decision has been made. Has there been any consideration of developer funding the replacement of the surgery with a new building?
- I thought the consultation was to look at the possibility of one or both buildings would be open. I live in Hopeman and never expect the service in Lossie to be replicated. It will never be equitable. I am interested if Stagecoach are now open to enhancing the service. When people need to see a GP or healthcare professional they need to see them and need to get there. There is no pharmacy attached to GP practice (at Lossie). Where am I going to go and get prescription? It will never be equal if you are looking at removing a service and that's what it is about.
- Buses are a mitigation. You are looking to manage the closure. You are closing the surgery because you can't staff it. What is the purpose of the consultation? You are recommending action against what has been said in the engagement. We were asked about access to healthcare. All the recommendations are against it.
- This is totally about cutting the service. What you are deciding is not fulfilling the Government of UN access to healthcare. If you are talking about equity you would need to keep it open. People are not using dial-a-bus because you can't get an appointment during the time.
- Prior to Covid both were open. People made do and managed. Was there talk of closing prior to Covid?
- Are you not going against the Scottish Government's directive on 20 minute communities? The owner of the surgery at Burghead offered to upgrade the building at no cost to the doctors and it was turned down.
- What people really want to hear is the truth so we can deal with it. People use the pharmacist and he does not have access to anybody's (medial) records. He can say go and see the doctor and they don't know what (pharmacist) has been prescribing. There is no link up with district nurses. You have to start linking up so all your professionals know what is happening or there is going to be an accident.
- Amazed Covid nurses don't have a direct link to the surgery.

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- You want to take doctor's surgery away. I feel we are taking away lots of things but we need to have a system in place so there will not be an accident
- You are going to the IJB and saying the rebuild cost is going to be £1.5m but no one in here wants duplication. What people here want a doctor, nurse and receptionist. I believe what you are asking the IJB for should be reassessed without the issue of duplication. We are not asking for that. If it goes to NHS Grampian (for capital budget) we are not looking for duplication.
- The desire from the community is to see the facility replaced with something locally and the obstacle is money. The doctors said they would not support a satellite surgery. With the growth of the community we should warrant it but it appears you are not going to get support to man it anyway.
- This is a ticking the box exercise, telling us what you plan to do. Lots of people are here tonight with valid questions. I think your mind is made up. There was a plan for Burghead surgery which was offered the facility to do it up. Was that spoken about? This is a very sad time for the community. Hopeman had 2 surgeries at one point. The village has doubled in size with developments and we are going to have nothing. Go back and go round the table and listen to what the community are looking for. Take on board what people have replied. It is not just about yourselves. You have got to think about our community.
- We have very big hearts in our community. Why don't we have a surgery here and have 60% of the population travel here. Would it be acceptable? 40% of the community wants to help you. What do we need to do to support you? Is there any other facility available?
- You are telling us where we have to go because you don't have the staff
- You are missing the views of the population who have had to register with Maryhill
- Having a surgery is a great asset. 6,000 of a population – is there anywhere else in Moray (of that size) that doesn't have direct access to healthcare? You must give us something back. Surely you can get the bus route to link up, something concrete we could rely on all the time. Otherwise it means you have to be a car owner to access the service
- There is enough demand for an hourly bus if you joined the route to divert to Lossie.
- We are talking about a lot of people in the village who can't use technology. People can't use eConsult.
- If we are going to run the community minibuss we will need finance. We are servicing something you should be funding.
- The community bus is working but dial-a-bus is not working.
- The community minibuss was won by the people of Hopeman. It was not provided to transport people to a facility in Lossiemouth because Burghead had closed. I don't believe that is what the community minibuss is for. You mention Stagecoach and there is still no resolution. With dial-a-bus, if I take ill at 3pm in Burghead, what do I do? New houses are being built – where are people going to go to see a doctor?



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- The opinion of young people is being missed. They scrapped the maternity unit, A&E has a lack of beds and there is an issue with recruitment. How long before we are sitting here talking about the closure of Dr Gray's?
- Are you saying this is the end of the discussion?
- You want us all to go to Lossie for a better service. You said you could fill the gap yet you are going to have extra staff.
- Taking Hopeman and Burghead population together, what level of service does it justify? Was the survey only sent to patients and excluded those who are registered elsewhere?
- Our community is growing yet there doesn't seem to be any plan to provide services. It is going to put more pressure on Lossie.
- There is new housing in Elgin and 2,300 extra in Hopeman and Burghead. Services can't cope. Developer contributions could be used for a new build.
- Are we being singled out but Aberlour and Dufftown are being kept open. Should be equitable across the whole of Moray.
- You are taking from this community.
- How many GPs working full time and how many work part-time? A number of people are trying to see a GP but are seeing a nurse practitioner instead.
- Can you confirm a decision has not been made?
- It seems the capacity at the medical centre is not there. Long working is not an excuse. Why can't you recruit? We must be a high priority. How are you going to get us to the medical practice?
- If you open the (branch) surgery there will not be this issue.
- They (the practice) are being paid by the NHS to provide a service but are not providing a service to our community.
- The buildings were fit for purpose before they were inspected.
- Have you taken on board what the community are shouting out for – to keep their surgeries? Hopefully we can come to a better conclusion.

### Burghead meeting

- Are you going to give iPads to all the old people?
- Risk of infection if a number of people with flu were travelling on dial-a-bus at same time
- People are not aware of dial-a-bus
- Timing of dial-a-bus is restrictive. Are receptionists aware of issues when patients are trying to make an appointment? What if an appointment is running late?
- Dial-a-bus is not being used as appointments are not being given at the right time.
- Is there not a Scottish Government directive on 20 minute journeys? This is a 2 ½ hour journey.
- Why all of a sudden are they (buildings) not suitable for purpose when they have been there for years and years?

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- I have read some of the reasons you are claiming (for the buildings not being fit for purpose) and I thought they were very trivial and things that could be easily sorted. Nothing substantial.
- 20 minute neighbourhoods – if you remove what is there now we will no longer be a 20 minute neighbourhood. You talk about good health. You are taking that away. You are going against the Scottish Government. The Practice is responsible for the upkeep of the buildings and there was no money invested. You are saying MDT can't come out to branch surgeries. It must be the only place in Scotland (that doesn't happen). You are causing overspill of people in to Elgin by too many people taking over practice in Elgin. You can expand Burghead and grow your practice
- Money to extend Burghead was turned down. Why was the man turned down who offered to improve the building?
- You are saying Burghead and Hopeman don't exist.
- Will you be publishing the results of the consultation?
- What happens if you take Lossiemouth out of the equation?
- 3 mornings, 27 individuals. Every slot was full. It was fully utilised when it was open. You say only 27 people seen – that is misleading
- There have been problems with the building over the years. Why not fix it in 2008, 2010? Why have you let them build up? Feels like you have let the problem build up
- In the previous report to the IJB it was said 54 patients were seen in a week. You are not comparing like for like when Lossie is open 9 hours a day. Hopeman and Burghead are more efficient and more productive than Lossiemouth.
- We can argue every single point you make. You do your questionnaire and consultation and it will all say you need to keep the surgery open. Hopeman said keep the surgery open and same result here tonight. Your recommendation is to close. How do you come to that recommendation? Is it true that Moray Coast would not come back? We can do everything else right but if they are not willing to come back it is useless.
- Everything is concentrated on Lossiemouth. We are saying there are other options. Your own 10 year Strategic Plan says very clearly you are putting the patient at the heart of every decision. We want you to do that so let's work together to put the service back. We are not looking at equality – we want the right care at the right time and in the right place. I might have something that does not the whole team (MDT). We need to talk about equity. To be able to address the issue of disabled access you want to remove access to everybody else. Let's make everybody else go to Lossie!
- Is Lossie the right place for everybody?
- How is patient supposed to get there (Lossie) quickly when can't get dial-a-bus? I was at the Lossie surgery and over 45 minutes I saw a maximum of 6 people going in. Are all appointments on line?
- The report is biased. Refused to put in what had been offered (by Burghead landlord). Are you (Practice) willing to go back? Urge Iain to put in all the counter arguments so a decision can be made. Why did you refuse to put the plan (for Burghead) in the report?

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- You are going to have to take his offer. You are stabbing him in the back.
- We have an obligation as the community to air our views. It is so easy to take a vote on something that does not affect you. They have kindly offered to get the surgery up and running in Burghead. We in Hopeman will support the community from Burghead 100%.
- It's a money saving exercise, not to help people. No one wants all the fancy things coming here. We don't have to have it all in one place.
- The decision has been made. Are you advertising dial-a-bus in the right way? Make people understand. People may give up (calling the practice) and call 999. Is it closed for now or 5 years down the line?
- I had concerns about the IJB meeting. How do you check the IJB's understanding of what is important? Do they really read the document and understand it and the implications of what they are voting for? They have got to take a balanced view and they have to understand the loss potentials.
- How many people are served by Moray Coast Medical Practice?
- A quarter of the population are paying their money and have not been getting the same quality of service for years.
- Patients are having to go somewhere else. Not all stakeholders are here – half of our community is served by Maryhill. We have the biggest community in Moray without a practice. Maryhill is going to have to take the strain. We are the biggest community without doctors. We need to come to a middle ground. You have people here who will build a building for you. You don't have the capacity to serve us.
- Will Maryhill give us the service we want? You don't want to come here. You have enough to do in Lossie.
- Is it not the case this is a done deal? You turned down the offer of a free surgery. You are going to spend £167,000 on five surgery rooms. For 2 years you have been talking to Stagecoach. The community is growing. It appears you can't cope. Closing Burghead and Hopeman is the wrong choice.
- Where did developer contributions go?
- If the Board decided that yes, they are going to back NHS Grampian, does the community have a route to appeal the decision?
- Hearing about MDT. Don't understand why they need to be in the building at the same time. GPs are able to work at home. Why can't they communicate from branch surgeries?
- Face to face is what patients want. Everyone has the ability to take notes and communicate so I don't get that as an argument

## **Submissions from community organisations**

One submission was received from Hopeman Community Minibus Committee.

“Since the end of the initial Covid lockdown, a new volunteer minibuss committee was formed from across Burghead, Cummingston, Duffus and Hopeman. Together with a team of volunteer drivers they have supported 591 appts so far that are either to the Moray coastal practice or for flu/Covid jabs which in the past they would have gone

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to the surgery for. Together with hospital runs they make up to 54% of our journeys. The need for transport is increasing with more people becoming unable to drive or financially not affording the journey costs. Going forward are you prepared to financially contribute to make this community transport sustainable as demand continues as the dial a bus service does not meet peoples appointment times or the social connect they are seeing from our service?"

### 5. Equality data

As part of this consultation equality data was collected from the responses gathered via the online and hard copy form to ensure patient views from all areas and communities were recorded.

#### Gender:

Answer choices	Responses	
Male	40.15%	261
Female	57.08%	371
Prefer not to say	2.77%	18
	<b>Answered</b>	<b>650</b>
	<b>Skipped</b>	<b>5</b>

Is the gender you identify with the same as the sex you were assigned at birth?

Answer choices	Responses	
Yes	96.39%	614
No	0.16%	1
Prefer not to say	3.45%	22
	<b>Answered</b>	<b>637</b>
	<b>Skipped</b>	<b>18</b>

#### Age:

Answer choices	Responses	
Under 16	0%	0
16-24	2.77%	18
25-44	10.02%	65
45-64	33.74%	219
65-74	25.12%	163
75 and over	26.19%	170
Prefer not to say	2.16%	14
	<b>Answered</b>	<b>649</b>
	<b>Skipped</b>	<b>6</b>

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Which of the following options best describes how you think of yourself?

Answer choices	Responses	
Bisexual	0.8%	5
Gay man	0.48%	3
Gay woman	0.48%	3
Heterosexual/straight	87.64%	546
None of these	2.89%	18
Prefer not to say	7.70%	48
	<b>Answered</b>	<b>623</b>
	<b>Skipped</b>	<b>32</b>

Do you identify as being a person with a disability of long-term health condition?

Answer choices	Responses	
Yes	39.03%	249
No	56.43%	360
Prefer not to say	4.55%	29
	<b>Answered</b>	<b>638</b>
	<b>Skipped</b>	<b>17</b>

Are you responsible for caring for a family member, friend or neighbour who needs support because they are ill, frail or have a disability?

Answer choices	Responses	
Yes	15.44%	99
No	80.34%	515
Prefer not to say	4.21%	27
	<b>Answered</b>	<b>641</b>
	<b>Skipped</b>	<b>14</b>

Are you currently pregnant or have you been pregnant in the last year?

Answer choices	Responses	
Yes	1.11%	7
No	96.04%	606
Prefer not to say	2.85%	18
	<b>Answered</b>	<b>631</b>
	<b>Skipped</b>	<b>24</b>

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### Ethnic identity:

Answer choices	Responses	
Asian or Asian British	0.31%	2
Mixed or multiple ethnic groups	0.16%	1
White	93.86%	596
Prefer not to say	5.67%	36
	<b>Answered</b>	<b>635</b>
	<b>Skipped</b>	<b>20</b>

### Religious identity:

Answer choices	Responses	
None	28.68%	183
Christian	60.5%	386
Buddhist	0.63%	4
Prefer not to say	7.68%	49
Other	2.51%	16
	<b>Answered</b>	<b>635</b>
	<b>Skipped</b>	<b>20</b>