



Mole Valley Conservative Association's Newsletter

Issue 17; August 2008

Welcoming note

Welcome to the August issue of the Mole Valley Conservative Association's Newsletter.

To unsubscribe to this newsletter, please contact us through the website 'Contact us' page with a subject line of 'unsubscribe'.

Our aim is to provide you with a monthly update on the work of the Conservative Association and your elected representatives. We would value your feedback or comments.

We hope you enjoy reading the August issue.

A word from the Chair

Gloom – and it is not just the weather



Gloom – every headline in the news or business section of newspapers makes one wish the urge to purchase a paper had been curbed.

I have just received a book catalogue and was interested to read that Gordon Brown's recent book – with a RRP of £10.99 is available for £2. This would seem to be an accurate reflection of his economic competence – devalue everything! His sale of gold at US\$260 is probably the worst decision, followed by the preservation of staff jobs at Northern Rock at vast expense.

Oil may now be at US\$120 per barrel but the underlying demand should ensure that the price continues to give the producing countries a good return. For Britain the realization that oil is priced in US\$ and in 12 days there has been a 7.5% drop in the value of Sterling against the US\$ will not ease the pain. The threat of 35% increases in gas and electricity prices cannot all be attributed to government mismanagement – an 11% increase in British Gas boiler service since last year is hardly the result of higher energy costs. To avoid a windfall tax perhaps the energy companies could keep prices to the consumers down, rather than have government redistribute it.

I have been pleased to read a number of articles reminding the M.P.C. (Monetary Policy Commission) that inflation is their number one concern and interest rates should, at least, be maintained if not increased. The US\$ has recently surged – as noted above. There are three reasons:

- 1) Poor economic data out of Europe – particularly from Spain.
- 2) Continued excessive borrowing, particularly by the U.K.
- 3) The normal desire for a safer home for funds when trouble threatens – as in Georgia.

The Georgian situation arose very suddenly – just the reason to buy Swiss

Francs or US\$. Gordon Brown and David Miliband took a long time to condemn the Russian incursion into Georgia and like many European leaders wanted to act as referees; not just players on the Georgian side. David Cameron was quick to condemn the Russians and as this is being written is on his way to visit Georgia, seems odd that one of Mr Putin's chums is allowed to own an English football team!!

On the local front we hope that very soon all the Mole Valley County Divisions will have their Conservative Candidates in place. We then need support from all members with canvassing, stuffing of envelopes and deliveries to ensure we have every success in 2009.

Mr Colin Crispin
Chairman, Mole Valley Conservative Association



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News from the House of Commons

The Surveillance Society



Over the last few years I have become increasingly concerned by the extent to which this government is strangling our civil liberties. I was shocked to read recently that the average person living in Britain has 3,254 pieces of personal information stored about them. Even more terrifyingly, much of this information will be kept on databases for many years or even indefinitely.

There are several ways and means by which Big Brother watches our every move including mobile phones, the internet, loyalty cards, banks, CCTV, number plate recognition systems, public transport and employees' radio-tagged security passes.

We cannot even be assured of this data being kept secure by the organisations that collate and store it. To illustrate this worrying situation, 650 public bodies can request customer data from phone companies. As we are all aware, there have been several embarrassing incidents where Government departments have mislaid highly sensitive information. HM Revenue & Customs managed to lose computer discs containing the personal details of 25 million people.

It has now emerged that over 1000 laws currently exist allowing authorities into our homes, with nearly half of these being introduced under Labour. There are some bizarre examples, such as the Plant Health (England) Order 2005 which permits inspectors to enter homes for the purpose of ensuring that certain plants have not been smuggled in without a "plant passport". Every aspect of our lives seems to be subject to state intrusion under this Government.

Sir Paul Beresford

Member of Parliament for Mole Valley

Report from Surrey County Council

Raising the London Olympics 2012 flag in Surrey



I have just read an article in the Daily Telegraph by our London Mayor Boris Johnson on the trials of Gatwick Airport, in it he complains about the long wait for baggage and the general service the public get - he suggests that with the Olympics coming in 2012 the only solution is to build a new airport in the Thames Estuary. Well in times of a slowing economy a great civil project like that would certainly help to keep the country working, but where would the money come from?

I also watched the opening ceremony of the Olympics in Beijing and like many others I'm sure wondered what on earth will we do at the London ceremony? Perhaps we should all write to Boris with some suggestions that won't cost the millions that China spent on theirs but might have some point of pride and history London and Great Britain. My interest in the Olympics is fuelled by the fact that it falls within my portfolio at County Hall and that on 24th August we will be raising the London Games 2012 flag in Surrey as the handover takes place to Boris in Beijing.



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The County Council is in recess currently – that means no public or formal meetings, however the authority is still working busily and has some real challenges to sort out after receiving an uncomfortable and worrying report from government inspectors about our children's services. The Leader of the Council along with the Conservative members have made some changes to the management of the service and are working with the government department to ensure that all Surrey children are safe. This will be our priority until we solve the problems highlighted.

Apparently like many others this year, I have not gone away on holiday, and while the weather has been pretty appalling it's been a good time to go through all the papers and files and have a thorough sort out.

County Councillor Helyn Clack
Member for Dorking Rural
Executive Member for Safer and Stronger Communities

Report from Guildford Borough Council

Stoke Ward By-Election



The Conservative Group on Guildford has moved back into campaign mode, following the resignation of Liberal Democrat councillor Alan Muhammed, who was elected in Stoke Ward in May 2007. The Liberal Democrats took this ward from Labour last year and, with the current Government in disarray, we are optimistic about our prospects. Polling Day is 11 September and if you are able to help with canvassing or delivery we would be very grateful. Please contact the Mole Valley Conservative office for further information.

The proposal to cease funding for a free town centre shuttle bus is currently making headlines in Guildford. This service, which has been in operation for several years, has been provided free of charge by the Borough Council, but the cost of provision has been increasing rapidly. When we looked at retendering the service this time, the annual cost was likely to exceed £100,000, which was an unacceptable burden on taxpayers, particularly when we already provide considerable funding for services specifically targeted at elderly and vulnerable users, such as Dial a Ride. In addition, with the extension of the free bus pass concession scheme to a national one earlier this year, taxpayers in Guildford were faced with a bill of around £400,000 and hence, we felt that it was very difficult to justify the continuation of the shuttle bus service for a further £100,000. We also looked at alternative ways of funding the service, such as sponsorship or making a charge, but none of the alternatives made a significant impact on the cost of funding. As a consequence, the service is being withdrawn at the end of August.

Cllr Andrew French
Deputy Leader, Guildford Borough Council



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Report from Mole Valley District Council

What's happening at Mole Valley District Council?



Some lighter news from the council this month.

To commemorate the National Play Day, the Mole Valley Playranger was joined by other members of Leisure Department, Mole Valley Housing Association and people from the LINKS project to provide a fun afternoon of unstructured play at St John's Church of England School on the Goodwyns Estate. In excess of 100 people attended the play afternoon, which was judged a great success.

The Playranger together with his Playmobile is a new facility run by Mole Valley Council. It is supported in part by a successful Big Lottery bid. Mole Valley is setting up a programme of events throughout the summer holidays, which will continue to be arranged in the autumn term in conjunction with schools.

Conservative Councillor David Sharland, Portfolio Holder for Health Safety and Wellbeing said:-

"The opportunities offered by the Playranger for unstructured play are countless. In recent times children have been protected and not allowed to take risks when playing. This facility does permit some risks to be taken and prepares children for the risks that they have to take in later life."

Apparently the Playranger has been extremely popular with Mole Valley residents. A Mrs L Fisher of Lonsdale Road, Dorking, who is the mother of two children, wrote into the Dorking Advertiser thanking the council for this initiative. It's always good to know we're doing something to make our residents' lives a little bit happier!

Cllr Malcolm Johnson
Communications Officer, Conservative Group
Mole Valley District Council



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News in brief

South East Business Confidence Survey



Lloyds TSB have published regional results of their Business in Britain survey. During the first half of this year, business confidence fell sharply across the UK. The survey measured regional companies' expectation of orders, sales and profitability for the next 6 months. The South East had a confidence rating of minus 7 per cent which is down from 16% in the last survey. The number of companies expecting sales growth in the next 6 months is down from 28% in January 2008 to just 2%. The survey also revealed that this lack of confidence will affect recruitment. However, there was a note of optimism that most businesses in the South East are likely to pull through the current financial climate and that the region will face slow growth rather than recession.

Future of Gatwick Airport



As many of you will have read with interest, the Competition Commission have been investigating BAA and has just published its report. As predicted, the

watchdog has recommended that BAA sell two of its three South East airports, namely Heathrow, Gatwick and Stansted. The forced break-up of BAA's monopoly should encourage competitiveness between the London airports which should, in theory, improve customer service and reduce delays. The Commission has also criticised BAA for preferring Heathrow and Stansted over Gatwick when deciding on carrying out improvements and making plans for building new runways. It seems likely that BAA will choose to keep Heathrow and sell the other two. BAA branded the regulator's report as "flawed" whilst airlines supported the findings. The danger to Mole Valley constituents is that a new owner of Gatwick airport is likely to push for a second runway there. A second runway at the airport would have a huge impact on local residents and any plans will be fought by local campaigners and environmentalists. In 1979, BAA and West Sussex Council signed an agreement which ensured that no second runway would be built at Gatwick before 2019. However, the huge worry is that this security could be overturned by Parliament.



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Feature Article

Polyclinic Plans and the Pharmacy White Paper Adjournment Debate

As you will remember from last month's newsletter, Sir Paul has been concerned about the Government's polyclinic plans and the potential impact of the Pharmacy White Paper. He had the opportunity to raise the subject at an adjournment debate on 22 July. The full text is below.

GP/Pharmacy Services (Mole Valley)

Sir Paul Beresford (Mole Valley) (Con): I am grateful for the opportunity to raise a small issue that is of deep concern to many people in my constituency. I would like to thank the Minister, especially as she is the last Minister to be standing, as it were, in the pre-recess period. I do not envy her; I have been in the same position before, and I hope that she has recovered from the shock of having to respond to this debate. I also hope that she will be sweetness and light, to the benefit of my constituents. What I am really asking is for the Minister to show a little understanding and perhaps some flexibility in her Department's thinking. As she will be aware, nationally applied rigidity can be damaging. I hope that she will listen gently and, as I have done several times, set aside her official speech and concentrate on the little bits and pieces that I raise in the debate.

To provide a bit of background, Mole Valley is the largest Surrey constituency; it is very different from the Minister's deep urban seat. Having been a local councillor in a solid London inner-city borough, I have some idea of the problems she has to face in her Bristol constituency with tower blocks, unemployment, health conditions and so on and so forth. My constituency is, as I said, very different. It has two small towns and approximately 32 to 33 villages, so it is rural and semi-rural. Some of the villages are large, most are small. The gaps between villages are often considerable green farming areas.

Transport is predominately by private car and there is very little in the way of bus services; most of the trains are on radial lines running into London and are often inappropriate. As the Minister may know from the package of departmental information given her about the population, a considerable proportion of people in the area are elderly and most of those do not drive or are very nervous of driving; they are certainly very nervous of driving and parking in the towns. In addition, there are many young families with children, especially farming families. That explains the relatively large number of village schools and, until recently, village shops and post offices, as well as village halls.

Surrey is perceived by outsiders as green and wealthy, but the wealth is mixed and so is mobility. Life expectancy is higher than the national average, so all access problems are more applicable, as a recent Help the Aged survey pointed out. Of course, as the Minister knows, age brings increased demands on the national health service.

Mole Valley is served by three hospitals in adjacent constituencies, none in mine; one of them—Epsom hospital—is under threat, but that is a discussion for another time. In Mole Valley, there are two so-called cottage hospitals, one in Dorking and the other in Leatherhead.

The Prime Minister recently paid the local area the honour of a visit to Leatherhead hospital. Sadly, I was unaware of his visit until after he returned to Westminster—I would have liked to join him at the



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hospital. No. 10 thoughtfully informed my hon. Friend the neighbouring Member for Epsom and Ewell (Chris Grayling), albeit too late for him to inform me. I was delighted 24 hours later to receive some apologies from No. 10, which were accepted, but I used the opportunity to request an audience, along with some of my colleagues, with the Prime Minister about the issues that I would have raised if I could have joined them. To date, the silence from No. 10 is significant but not golden.

Both hospitals have evolved to meet the need to act as intermediaries between the GPs and their clinics and the three general hospitals. Both hospitals work closely with the many GP practices in their surrounding areas. For example, Leatherhead is run as an independent, not-for-profit unit giving services, including clinical assessment, especially for heart conditions, X-rays, audiology and dentistry for handicapped, abused and difficult children. I had hoped to use the opportunity to expand on the latter part by bringing in the private sector to pay for refurbishments and so on, and perhaps establish a charity to provide dentistry—to put on my dental hat—in the hospital if possible.

The hospital is effectively a polyclinic without GP services—the latter are not necessary, as the GPs are close by in Leatherhead and the surrounding villages. GPs in Mole Valley have coagulated—if I may use that medical term—to form what I call mini-polyclinics. By forming partnerships with up to a dozen doctors, those clinics can offer the usual paramedical services as well as extras such as physiotherapy, minor surgery and, in the case of the Medwyn GP clinic in Dorking, dentistry—as long as one's Polish English is effective. Several of those group practices can thus run satellite services in many villages. They are generally also dispensing practices, and that makes them just financially viable and means that the village patients do not have to travel into the bigger villages with their prescriptions. The towns and bigger villages are served by many excellent and modern pharmacies, which have encompassed new demands and requirements from patients, local GPs and the Government.

All those relationships of GPs, clinics, local hospitals and pharmacies have evolved co-operatively to meet evolving patient needs, and have encompassed developing medical science as well as requests from the Government. Any Government changes, such as polyclinics and changes in pharmacies that affect dispensing GP practices, may be applicable in inner-city areas such as the Minister's constituency, but must not be applied prescriptively to rural and semi-rural areas such as my constituency.

I guess that it may be convenient for the Minister and even the Prime Minister to call Leatherhead hospital a polyclinic. However, to expand that to include general medical practitioner services, when they are being provided close by, or to impose a full blown polyclinic anywhere else in or close to Mole Valley, would be short-sighted and deeply damaging to NHS services, Mole Valley towns and especially villages. To quote one of the many deeply worried doctors,

“a polyclinic would act like a black hole drawing all in and forcing closure of GP clinics especially in the villages”.

Surrey villages have been and are under great threat—several village shops have gone. Recently, 25 per cent. of sub-post offices have closed and village halls have been hurt by the recent licensing



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legislation. Polyclinics and changes in the pharmacy rules could especially hurt GP services in satellite villages.

A recent speculative bid for a new pharmacy, ostensibly serving several villages east of Dorking, was carefully assessed and rejected by NHS regulators. The key reason for rejection was that the demand for prescription medicines was being met by dispensing GPs in the village satellite clinics. The presence of a new pharmacy in the villages would have disturbed the financial balance of those surgeries. Some or all would either curtail their hours or force closure for economic reasons. To add to this, there was severe doubt whether the proposed pharmacy would have been viable. The end result would have been a pharmacy that would have killed off some of the GP services and GP clinics and then died itself for economic reasons. The result in a few short months would have been disaster for those villages. Fortunately, the decision was a refusal. It would be helpful if these dispensing pharmacies were able to provide over the counter medicines and other minor pharmacy additions such as first-aid supplies, and I understand that the Government are considering that.

I am asking the Minister to accept that a rigid application of the new distance parameters for pharmacies would be severely damaging in rural and semi-rural areas. Similarly, I hope she and her Department will accept that polyclinics with GP services in areas such as mine would damage a delicate and evolved environmental balance serving the national health service, and that that would result in poorer services for patients. My GPs will be keen to learn of the Minister's response, and if they are unhappy I suspect they will ask me to ask her whether I and one or two representatives might see her to expand on anything that comes out of today's debate.

These clinics are major employers, particularly in the villages, and they serve many who would find travelling for NHS care an enormous problem. I would be delighted if the Minister used this chance to reassure the concerned GPs and their patients, because if she does not do so she will be deepening an already deep fear among many people who loyally serve the NHS and who use it.

The Minister of State, Department of Health (Dawn Primarolo): I congratulate the hon. Member for Mole Valley (Sir Paul Beresford) on securing the debate. It is a pleasure to be present this evening. I shall go straight to the heart of his two major points on dispensing GPs and GP-led health centres—or, as he called them and as they are often referred to in London, polyclinics. I hope that I will be able to reassure him, his constituents and those GPs who have been making representations to him that they should put aside their worst fears and instead embrace the agenda that he has outlined and that the Government are taking forward.

In his comments on dispensing GPs, the hon. Gentleman graphically laid out the complexities and differences in his constituency. Of course, if we compare it with, for example, my constituency of Bristol, South, his first proposition that one size does not fit all across the country is absolutely right, and that is precisely the Government's view. In looking at the provision of health services, it is important to take account of the needs and the location of the services in order to best serve patients in terms of quality and access to those services.

As the hon. Gentleman will be aware, the Government's White Paper, "Pharmacy in England: Building on Strengths—Delivering the Future", published on 3 April, set out our future proposals for



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expanding high-quality pharmaceutical services and developing the role of pharmacists as a leading clinical profession within the primary care team. He will know from my written ministerial statement of 17 July that next month we intend to publish our further consultation on the structural changes for the pharmaceutical services, which will run through the autumn.

Regulations governing dispensing by GPs have been in place since 1912, and despite some changes in April 2005 to implement measures agreed between pharmacy and medical representative bodies, they have not substantially changed for almost a century. A general precept adhered to not only by this Government, but by all Governments, is that doctors prescribe medicines and pharmacists dispense them. However, the hon. Gentleman alluded to the fact that community pharmacy is not always viable in all parts of the country, particularly rural areas. Patients need to receive their NHS-prescribed medicines promptly and efficiently, and that is where dispensing GPs can play a vital role.

I say clearly to the hon. Gentleman that the Government recognise the importance of the role of the dispensing GP and do not propose to end it; there is no question of the Government's advancing an agenda that is about disposing of the services of dispensing GPs. I know that some dispensing GPs have expressed doubts about their future. I hope that my clear statements today will show that it is not, and never has been, the Government's intention to disband or remove the services of dispensing GPs.

However, I am sure that the hon. Gentleman recognises that the system of GP dispensing contains anomalies and inconsistencies, and we want to seek views on how to deal with that. I stress the words "seek views", because there is no predetermination involved, and we have made no suggestion that GP dispensing will cease. We have also made it clear that in examining some of the problems and anomalies, which GPs themselves identify, it will be vital to consult. That is the case precisely for the reasons that the hon. Gentleman so clearly and correctly identified in respect of understanding the geography and the services that are in place.

I move on to the question of super-surgeries—polyclinics—and GP-led services. I am told by Surrey primary care trust that there are no plans to have any major new primary care developments in the area. However, the hon. Gentleman will be aware that that might not please all his constituents, given that the public have told us that enabling them to see a GP at a time that is more convenient to them—for example, at weekends or in the evenings—is their No. 1 priority in improving the NHS further. It is also true that Surrey PCT has more patients who are dissatisfied with the office hours opening times than anywhere else.

Sir Paul Beresford: I thank the Minister for letting me respond to that specific point. Interestingly, the GPs in my constituency are clear about the fact that they have reacted positively by expanding their hours—that includes weekend openings.

Dawn Primarolo: I agree with the hon. Gentleman, because, so far, 55 per cent. of the local GPs—77 out of 139—are offering extended opening hours. None the less, that leaves almost 50 per cent. of his constituents outside such arrangements. The point that he makes is that the investment in and the dialogue with the PCT and the GPs is about enhancing and developing services, not cutting back on the services that are available.



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I confirm once more that the guiding principle behind GP health centres is the wish to provide additional ways of accessing GP services—precisely the sort of things that the hon. Gentleman mentioned in his contribution. I am more than happy to echo the point that he made that that is best planned and delivered by agreement and in co-operation with the health professionals—GPs and others—in his constituency. The most important thing is that his constituents get the best quality of care and the best access to care.

In response to the two points that the hon. Gentleman made, I repeat that, first, there will be no requirement or any forced solutions in the development of GP-led centres or polyclinics in his constituency, but there will be continuing dialogue between the GPs, the PCT and other health professionals on how to deliver the best services; and, secondly, there is no predetermined conclusion and no desire to abolish GP dispensing. The White Paper raises questions about the accessibility of pharmacies and how we can iron out any problems in the current rules. It may not be a problem in the hon. Gentleman's constituency, but there are examples around the country of dispensing GPs being on the opposite side of the road to a pharmacy. Such anomalies need to be resolved.

Sir Paul Beresford: I accept the Minister's point about other areas. The difficulty in my villages is that a new pharmacy, on its arrival, will kill off the satellite dispensing pharmacies in the villages—we have seen some speculators try that—and then die off itself, leaving the villagers without pharmacy or GP services.

Dawn Primarolo: It is obviously not the Government's intention to drive GP services out of areas, given that we have announced that we will invest an extra £250 million in taking those services into areas that are under-doctored.

I am aware that applications have been made for two pharmacies, and those are under consideration. The White Paper attempts to ensure that we have the most appropriate services for the patient, delivered by the best-qualified provider. However, in encouraging that breadth of professionals in an area, we do not want to remove the GP service, for instance.

The hon. Gentleman is absolutely right to point out that, particularly in the areas represented by him and by some of my hon. Friends, it will be very important to consider the provisions for quality of care and for access. The White Paper says not that pharmacies offer all the solutions, but that they have the potential in certain parts of the country to open up the health service. We need to find a route whereby we can do that, where appropriate, without undermining quality provision where it exists. I know that he will agree that we need rules that are consistent and fair and that work to the best advantage of the patient and of the quality of care. That is what we are proposing to do and I see no reason why that should threaten the viability of GPs offering excellent medical services.

I hope that the hon. Gentleman will accept my reassurance and await the publication in the next month or so of the next stage of the consultation. If there are outstanding issues that he wants to raise with me, I will be happy to see him.

Question put and agreed to.

Adjourned accordingly at eleven minutes to Seven o'clock.