

From: Chamberlain Adrian [Code A]

Sent: 18 December 2002 16:11

To: [Code A]

Subject: FW: Gosport review; confidential

Importance: High

Professor Baker,
Sorry this took so long

Practice histories are:

The Medical Centre
66 Stoke Road
Gosport
PO12 1PA

	Start Date
Brendan COONAN	14.01.79
Derek NORTH	01.08.80
Declan Nigel LYNCH	01.03.84
Peter Philip GARRATT	01.08.90

Gosport Health Centre
Bury Road
Gosport
PO12 3PN

David Anthony EVANS	01.10.91
George BURLEIN	01.05.97
Paul Anthony BURGESS	04.02.98
Rosalind Margaret REID	01.04.02

Sorry, it appears the earlier spreadsheet that you received was incorrect.

-----Original Message-----

From: Schwarz Katy

Sent: 18 December 2002 14:47

To: Chamberlain Adrian

Subject: FW: Gosport review; confidential

Importance: High

Hello Adrian,

As discussed, please see the attached spreadsheets showing the list sizes in capitation age bands, by quarter, by GP for the chosen control practices (1 and 8). *PLEASE NOTE* that I have also re-done the original spreadsheet for Dr. A.C. Knapman and partners and attached it with this email as I realised that I had missed off a GP code! Please advise Richard Baker to delete the first list size spreadsheet I sent.

Please can you also advise Richard Baker that there are two GPs in Dr. Evans practice (Dr McNutt and Dr Reid) who have got two GP Codes each.

I have included a key to show the GP names with each spreadsheet.

It was not clear whether the counts by quarter by GP of deprivation patients was needed? The latest quarter deprivation figures are on the spreadsheet I sent from which the controls were chosen. Please let me know if a full deprivation history is needed and I will do that seperately.

Katy

Katy Schwarz
Information Analyst
Hampshire and Isle of Wight
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-----Original Message-----

From: Schwarz Katy
Sent: 12 December 2002 10:30
To: Chamberlain Adrian
Subject: Gosport review; confidential
Importance: High

Hello Adrian,

Following our conversation yesterday, please see attached spreadsheet showing the capitation list sizes, deprivation counts and percentage of the total population of 65 to 74 yr olds and over 75 year olds, for each of the Gosport practices.

I have anonymised the practices, and highlighted the subject practice.

As discussed, the controls will need to be selected by trading off similarity in patient profile with number of patients in deprived areas.

As I also mentioned, Hilary Young did a vast amount of work on the Gosport practices in 2001, mostly profiles of patients, deaths, claims, over a 5 year period, which may be relevant?

I await the decision on the two control practices, so that I can start getting the data together.

Katy

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-----Original Message-----

From: Chamberlain Adrian
Sent: 11 December 2002 14:53
To: Schwarz Katy
Subject: FW: Gosport review; confidential
Importance: High

As requested Katy
Adrian

-----Original Message-----

From: Copage Manda
Sent: 10 December 2002 18:39
To: Chamberlain Adrian
Subject: FW: Gosport review; confidential
Importance: High

Adrian could you do the necessary please. Thanks.

-----Original Message-----

From: Tanner Simon [mailto:**Code A**]
Sent: 10 December 2002 10:20
To: Copage Manda (PPSA)
Subject: FW: Gosport review; confidential

Manda

Sorry to burden you further. Could you help Richard Baker again?

Simon

-----Original Message-----

From: Baker, Prof R. [mailto:**Code A**]
Sent: 09 December 2002 12:04
To: Tanner Simon
Cc: Copage Manda (PPSA)
Subject: RE: Gosport review; confidential

Dear Simon

Manda Copage has very kindly provided the information we required. I have been discussing our proposed analysis with Peter Goldblatt at the ONS. We have found that in analysing mortality rates at practice level, the choice of comparator for estimating the expected mortality rate is crucial. Could we therefore ask for a little more assistance?

We are seeking one or two practices local to the other one (Dr Barton's). They should be on the Gosport peninsula, with a similar type of patient population - to minimise any possible case mix problems (Townsend scores for all the practices would be helpful). If there were a single practice with, say 12-15,000, that would suffice, but ideally two practices would be best, with a total patient list of 10-15,000. We need to know the names of the doctors in the selected practices, over the same period as before (the ONS identifies deaths by searching on GP names).

I am sorry to respond with a request for more information, and hope this does not cause too many problems. Please let me know if any further details are needed on this.

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-----Original Message-----

From: Tanner Simon [mailto:Code A]
 Sent: 03 December 2002 13:03
 To: 'Baker, Prof R.'
 Cc: Copage Manda (PPSA)
 Subject: RE: Gosport review

Richard

I have asked my colleague Manda Copage, to respond to you directly with this information.

Simon

-----Original Message-----

From: Baker, Prof R. [mailto:Code A]
 Sent: 28 November 2002 14:18
 To: Tanner Simon
 Subject: RE: Gosport review

Simon

Can you find me some details about Dr Barton's practice? I need the address, the names of the partners - to include when they joined. If there have been

changes in membership of the practice from the time Dr Barton joined, the details would be really helpful. Information on list size over the same period would also help.

In health authorities as they used to be, there would have been a primary care division with this information readily to hand. I am not sure if the SHA now holds this, or whether the PCT is the organisation with the details. However, I did not want to contact the PCT directly. If there is someone you would recommend I talk to directly, please let me know

Thanks

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-----Original Message-----

From: Tanner Simon [mailto:Code A]
Sent: 05 November 2002 16:31
To: 'Baker, Prof R.'
Subject: RE: Gosport review

Richard

My knowledge of community hospitals is pretty limited. I would have thought that most community hospitals admitting older people would be fair comparators. I'm not sure why so much is being made of the proximity of Haslar (though I suspect that it reflects a prejudice that military hospitals treat older people in some way differently) This must be conjecture. I'm not sure whether it would be a good or bad thing to choose local comparators, but beyond giving you a list of addresses, I don't think I could hazard a guess at their "comparability" with GWMH.

I think you need to discuss with the CMO about contact with the relatives. The issue is back in the news again following Anne Alexander's press conference on Monday. All seems a bit sensitive.

Simon

-----Original Message-----

From: Baker, Prof R. [mailto:] Code A
Sent: 04 November 2002 15:10
To: Tanner Simon
Subject: RE: Gosport review

Simon

I am making some initial progress, but can I ask for your help on a couple of matters?

1. We need to identify the potential comparison community hospitals now. The systems for obtaining the data are more or less sorted, and we are close to making a start. Can you suggest community hospitals in the district/region that would be relevant to take into account? From the meeting with the PCT, such hospitals that were not far from military establishments would be one group (I think Plymouth was suggested, but am not certain about this). However, GP care and admission categories (as much as can be judged about these prior to detailed investigation) would be necessary to take into account also.

2. I have not met with relatives yet - there may be reasons why this should be delayed; however, my concern is that I would not want to be thought to be avoiding the relatives.

Hope all is well with you.

Richard Baker

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