

Minutes of the Haddenham Medical Centre PPG Meeting

Wednesday 3rd February 2016

Attendees: Dr Howcutt, Ellen Solley (Practice Manager), Keith Milmer (Chairman), Barry Lynch (Vice Chairman) plus a further 17 PPG members.

The Chairman welcomed those attending the meeting.

1. **Practice Report: Ellen**

- Ellen welcomed everyone and wished attendees a belated 'New Year' greeting
- Two trainee GP Registrars have now completed their training and left the Practice. Dr Debbie Banks, a new GP trainee Registrar, will start in August. Her addition to the Practice is only part-time. In addition, Ruqaya has also joined the team as a new trainee administrator (apprentice).
- *Action on Hearing Loss*, a charity focusing on the needs of individuals with hearing & sight loss, will be holding an Information Event at the Medical Centre on 16th February between 10.00am and 1.00pm. There will be an equipment demonstration for both the visually and hearing impaired. Tea and coffee will be available. There will also be a raffle.
- *Action on Hearing Loss* will also be holding quarterly drop-in clinics from 10.00am–12noon at the Medical Centre on the following Thursdays: 3rd March, 2nd June, 1st September and 1st December. It is a signposting service, helping residents to find the information and help they need.
- The Clinical Commissioning Group data collation project is being implemented by the Medical Centre staff, which is making significant additional demands. In order for the data to be entered into the system, training is having to be carried out. The data will provide necessary information for long term medical conditions such as diabetes or asthma, so that an action plan for the patient can be put into place with the active participation of each patient. Various data will be collated prior to the appointment which will be available to the patient in order that they might take some greater control over the target setting within the review process.
- A new phone system has been ordered following some suggestions made by the PPG about possible improvements that could be made. Ellen had visited another Practice to see the proposed new system in action and check that it will meet our Practice's needs. It is hoped that the new system will be set up by the end of March.

Practice Report Continued: Dr Howcutt

- Our experience is consistent with the national problem regarding GP provision: it has been harder for many practices to fill their available training positions. The number of GP trainees ('Registrars') has dropped by 5% this year.
- Concern about the NHS European ranking was also expressed, having dropped to 14 out of 35 European health care systems. This should be seen in the context of the NHS having fewer doctors per head of population: in this respect the NHS sits at 28 out of 35. The result of having too few doctors available within the service is having a detrimental effect on health care provision.
- The nation-wide strikes within the medical profession are having an impact on the Haddenham Practice because of the involvement of the trainee Doctors.

- The current crisis in GP provision around the country is of great concern. Due to a number of factors, the Mandeville General Practice has been reduced from six partners to four partners which would then be two partners next year with retirement - they have had salaried GPs replacing some of these but were still down on regular medical staff. The Clinical Commissioning Group and NHS England have been very clear they will not allow the practice to close and have already commissioned a private company to run the practice; but inevitably in a time of concern and uncertainty, many patients are voting with their feet.
- Such issues underpin the fact that 55% of all GPs are of the opinion that the provision available to patient care is decreasing.
- Following up from a report in The Daily Mail suggesting that GPs are not visiting Care Homes as they should, Dr Howcutt commented that such suggestions are certainly not true. Indeed, but some areas are going above and beyond, with an additional specialist service. 'Good practice' is being shared between Practices with a view to making specialist provision for such patients.
- Due to the privatisation of some areas of the NHS, such as blood tests, the pathways to get things followed up are not always as clear cut as they have previously been under one all-encompassing NHS.

2. **Medical Car Park** – the Chairman asked what follow-up there has been following the PPG survey of unauthorised car parking on site. Quotes for the new signage have been obtained with plans for installation at the end of March.

3. **Getting medical test results on line** – there are levels of complexity around the completion of this task, which should have been in place by 5th February. The clinical software systems on a national level have not been working properly and have required up-dating. The availability of online test results has the potential to create additional work for GPs and nurses, as patients seek clarification of the information that is available to them.

4. **Appointment System**

Vice Chairman Barry Lynch reported that:

- There have been no recent complaints from patients
- There has been some very positive feedback from individuals about the prompt timing of follow-up appointments with the doctor
- On-line appointments seem to be more available
- The greater use of telephone consultations has been appreciated by patients

Dr Howcutt commented that:

- An increased number of call slots has been made available to improve the chance of a patient being able to speak to their named GP. This is a trial provision.
- The appointment system is constantly being monitored and tweaked to improve provision.
- Patient feedback has been very positive, and Dr Howcutt encouraged us to communicate this fact to others, as positive feedback is communicated far less commonly than negative comments.

5. **200 Plus Draw** – already in 2016, 130 tickets have been sold, which is more than in the same time last year. It is hoped that over the next couple of months this might increase, as there are still 33 prizes to be won this year. £5,000 is already in the bank with £1,000 being ring-fenced for prize money, leaving £4,000 for spending on new equipment for the Practice. This potential will increase with each new ticket sold. Thanks were formally expressed to Bob Coles and the team of patients who work so hard to facilitate and administer the 200 Plus Draw.

6. **Equipment review**

The most recent piece of equipment purchased for the Practice (a Dermatoscope) has been enabling patients to have their anxieties eased much sooner.

Future Equipment Purchases?

Monies raised from the 200 Draw together with individual private donations will be used for further purchases. Current suggestions include: a new ECG machine; a second TV monitor to provide patient information in the waiting area; and an Air Conditioning Unit in the minor operations room. All those present at the meeting agreed that the new ECG machine should be ordered. The cost would be in the region of £2,300 with some additional costs for software licences.

AOB

Payment for appointments?

The PPG Chairman had previously circulated an article from the BMJ debating the wisdom of charging a small fee to visit the GP. This might reduce the number of appointment 'No Shows', but even £5 per visit might prove prohibitive to some. Ellen explained that a register is being kept of all patients who do not show up for an appointment with either the doctor or a nurse. This is being monitored closely. No percentage could be given at this stage and the demographic profile of the most likely 'No Show' individuals was still unclear, although it seems that 'No Shows' are more common for Saturday appointments. The follow-up to this information will be undertaken with sensitivity.

A request that a pharmacist might be invited to attend and present to a PPG meeting was reiterated. This will be followed up by the Chairman.

A concern was raised about referrals to Private Hospitals. In some situations this may be possible and undertaken by consultation with the patient.

8. Date of the next meeting.

The Chairman was keen to avoid another Wednesday evening, as he is aware that some potential attendees always have a diary clash. It was therefore agreed that the next PPG meeting would take place on Tuesday 19th April beginning at 7.00pm.