

Minutes of a Meeting held at 7pm on Wednesday 15th February 2023 at Haddenham Medical Centre

Present Barry Lynch (Chair), Dr Mark Howcutt, Ciar Munn. Ronak Patel and 45 members Apologies from David Gregory, John Feore, Raj Sivaswami, Gill Fisher, Davinda, Annette Sunmmerskil, Neil Dury, Larraine Gooch, John Brandis, Alan Watkins, Jeanne Watt, Heil and Vanessa Shepherd-Smith, Angela Hiam, Steve Smirthwaite, Jane Geddes, Margaret Rayner, Lucy Hunter, Viv Birkby

- 1. The Chairman welcomed members to the first PPG meeting to be held in the Medical Centre for 3 years! The PPG have purchased a p.a. system as members had difficulty in hearing everything at the last meeting. Hopefully this will improve audibility tonight. He then introduced our guest speaker, Mr. Ronak Patek, the new proprietor of Vicary Pharmacy.
- 2. Mr. Patel told the meeting that Vicary Pharmacy is currently handling around 1,000 prescriptions a day. He said that prescription payments from the NHS were not very profitable and that to maintain the business he must rely on vaccinations and over the counter items. He plans to introduce other services such as diagnostic consultation for non-prescription drugs and an ear wax removal service.
 - Mr. Patel advised that the initial period after he took over the pharmacy last year was quite challenging as all the previous staff had left and he had to train up a completely new team. He felt that he was now much better organised and was introduce a prescription tracking system which uses QR Codes which will be scanned for added security. Pharmacy assistants access details on a phone and they can scan the QR code enabling prescription to be found quickly. The system commenced operation 1st Feb. and patients will receive a text when their prescription is ready. He feels that with this new system he will be able to cope with the population increase due to the New Builds in Haddenham. He believed that many customers from Thame were coming already to Vicary Pharmacy for their prescriptions which had exacerbated the congestion at the pharmacy in recent months.
- 3. Practice Report Dr Mark Howcutt and Ciar Munn
 - Dr. Howcutt introduced Ciar Munn who has joined the team as Practice Manager.

Dr. Howcutt recognises the problems patients have been experiencing with appointments. It continues to be difficult working as a GP. They suffer with a greater than expected demand and are struggling to meet the needs of everyone. The good news is that there is less Covid, less flu and less strep though there are more cases of Norovirus especially across hospitals. Waiting lists are long - up to 1 to 2 years which means more people coming back to their GP. Patients wait for letters from consultants and come back to us for explanation.

Maintaining staff levels has been challenging. We have lost Jenny who has been with HMC for 25 years and Bev, another nurse. We had recruited 2 nurses who have subsequently pulled out, hopefully, 2 more nurses will start soon. We are 1 doctor down with nobody applying for the job, 1 receptionist down with plans to replace. There has been a lot of sickness recently with 3 doctors off sick.

We are trying to be positive and working harder. We are making changes with extended roles to other specialist staff to help the GP's we have Amanda who is the nurse practitioner and Anna the pharmacy technician. We have been hearing of different ideas other practices are implementing and are assessing the benefits.

4. PPG Chair Report

The current unprecedented tsunami of demand for GP appointments. coupled with staff shortages, has limited the PPG in moving several projects forward with the Practice. The PPG has agreed with the practice to delay engagement in projects that consume the time Medical Centre Staff until the beginning of April.

The PPG believe that an important way in which pressure can be reduced on the NHS is for patients to take more responsibility for their own health and to monitor their own conditions. We realise that patients cannot do this without help and the PPG is examining the possibility of providing support and education sessions in the following areas: -

- 1. Weight Loss Groups (for example programme provided by of X-pert Health or similar)
- 2. Diabetic Control (for example programme provided by of X-pert Health or similar)
- 3. Training Workshops for online services such as NHS APP
- 4. Social Prescriber and Wellbeing Groups

One Medical Centre in Aylesbury has already launched a patient education programme and we will be discussing with our Phoenix Primary Care Network what help they could give us.

Other projects we are looking at from April are a PPG membership drive and a patient/practice guidance document laying out what each can expect from the other.

5. Question Time.

Members had pre-submitted questions and these and addition questions from the floor were accepted by the panel – Dr Howcutt, Ciar Munn and Ronak Patel.

Marie-Helene Usherwood – Is there a way to stop being deferred to call back another day when trying to get hold of a GP .

MH – It is difficult when the resource of appointments is limited. We try to accommodate urgent calls and ring them back the same day. Other surgeries have answer phones messages which say ring 111!

Mike Trotman – I have been a "customer" of the Medical Centre for the past 45 years, and have never had a problem obtaining an appointment until now. I have been calling the desk for the past three working days at 8.00 sharp and the number has been permanently engaged. I have tried multiple times this morning and half an hour later it is still engaged. I did eventually get through yesterday but a recorded voice informed me that all the appointments were taken and I was number 12 in the queue!

The national newspapers are telling us that doctors are increasingly retiring early and working part time, and given the massive amount of building going on in Haddenham, I would like to ask what measures are being taken to remedy this appointment situation?

Ciar said that it would helpful if the phone system could switch to a message that all appointments other than urgent ones were taken for the day and save patients from holding on a long time only to hear that appointments were taken for the day and that they needed to ring back the following day. There is a problem that changing the phone message was difficult and if it is changed when the appointments had run out this would kick out everyone in the queue.

Question from floor - Could there be a separate booking to see a nurse or online way? MH - No this was tried before but different types of treatment led to patients making appointment with the wrong nurse.

Question from floor – If all appointments have gone for the day why can we not make appointments in advance?

MH – We cannot allocate appointments in advance as things change constantly for example availability of doctors.

Question from floor – Can HMC cope with all the New Builds in Haddenham and the population increase these will bring to the area in view of the current shortage of appointments?

MH – We are optimistic that we can hande the increase in patient numbers, however, the number of GP's dropped 7% in last 8 years and doctors are given less funding. Population up, GP's down. We get funding per patient, patient first funding later, it develops extra room to provide doctors.

Question from floor – How many people in reception are answering calls, perhaps we could have extra reception staff for first 1-2 hours in the morning.

CM - said 2 members of the admin team help for 2 hours in the morning in addition to receptionists so we normally have 3-4 staff answering phones. They are hoping to get another computer, they have 3 at the moment. Online bookable appointments are available for forward appointments ahead and are released at 8am.

Comment from floor – Reported a recent call when all appointments had gone the matter was resolved for the patient who had nothing but praise for the practice.

Enid Robinson – The paper prescription now out of date was a useful item to hold when travelling outside of the Medical Surgery Area. I have relatively few medications listed and in lay people terms easy to pronounce and spell, but with important information immediately available in this form, is there an alternative? Not all patients have internet knowledge or availability.

RP replied that the NHS are moving to paperless working which can cause difficulties. People who cannot receive online or mobile can contact the chemist so that a note can be added to their records and a prescription can be printed off and inserted in the prescription bag.

Jonathan Tong – What is the status of ear wax micro suction availability at our HMC?

MH – this was stopped due to resources in funding. Also there was a safety issue identified at Kings Cross. Ear wax removal done by ear syringes can have problems afterwards – Micro Suction is better. CCG and PCT would not fund this and there are no plans to fund by NHS with the exception of the Audio Clinic at Stoke Mandeville though this is not really for ear wax removal.

RP – Looking to offer new services of Ear Micro Suction at Vicary which would be private, he would like to know from patients if they would like the chemist to offer other beneficial services?

John Feore (not present) – When we request a prescription from our surgery, who bears the cost of the medicine? Are the items borne by the surgery, or by central NHS?

MH – taxpayers through general taxation. NHS monitor and can inform the GP how much they have spent on medication, also there is a break down which can see what should be bought from the pharmacy instead of having the meds prescribed.

RP – Chemist are paid for meds by NHS though they are short changed on occasions. They are paid per item a dispensing fee.

Question from floor - On repeat prescriptions sometimes patients given 1 month and sometimes 2 months supply. Who decides this the GP or pharmacist?

MH – The GP, NHS say monthly and some practices only do monthly. If patients change meds a lot we issue monthly, people on regular meds given 2 or perhaps 3 months. We are not legally allowed to issue items such as sleeping tablets or morphine for a longer period. HMC is more generous than other practices and patients can request to have extra supply. NHS say monthly to reduce waste.

RP – Chemist paid per item, so monthly prescription is more valuable to the chemist. 2 months supply reduce by half making it less profitable just to do prescriptions. NHS do not pay for stock and there has been no change in contract for 5 years which does not take into account Electricity and heating etc. so support from the village is appreciated.

BL – Endorsed what RP said and expressed opinion that we should all support our local pharmacy. Use it or lose it!

David Bevan (not present) – Three from me to the panel.

Do you understand the current patient experience – good/bad?

What actions will you put in place to improve it and in what order?

What best practices will you implement from other practices/pharmacies that will form part of your action plan eg email/text/WhatsApp to contact surgery, less anxiety inducing music whilst on telephone hold, improve customer flow in the pharmacy.

MH – difficult to answer such wide ranging questions but we are constantly trying to improve despite increased patient demand and difficulty in recruiting enough staff! We have little time to plan and improve when faced with increased patient and NHS demands . It is not simple to add additional online facilities. Certainly WhatsApp and other commercial sytems would not be acceptable for security reasons. Doctors are faced with increased time spent on administration and have other responsibilities such as being GP Trainers and Appraisers.

CM – The unpopular music has been changed to something a little softer!

Question from M Trotman - Which doctors work full time at HMC?

MH - 2 full time doctors (Dr Howcutt 4 days, Dr Munir 5 days) the rest are part time. NHS stipulates 37 1/2 hours per week as Full Time

Question from Enid Robinson – Is NHS keeping abreast with population

MH – ICB have figures when people register. Initially we had 7000 patients with 3 $\frac{3}{4}$ doctors and now 9000 patients with 5-6 doctors. Patients visits used to be on average 3 per year now it is 6-7 times a year. Survey of new doctors asked if they would work in a GP practice, $\frac{1}{3}$ work as locum, $\frac{1}{3}$ abroad and $\frac{1}{3}$ private sector.

Question from Barry Lynch – The surgery is no longer collecting full Sharps Bins. Where has this service been transferred to?

MH - This was changed a long time ago and you contact Bucks Council to dispose and pick up new sharps bin from HMC.

BL – It is extremely difficult to find reference to this service on council website. BL will contact Council to add relevant Search Engine terms such as "Sharps Bin" which currently finds nothing!

Question from Peter Jeffrey (not present) – Are repeat prescriptions still being printed out and are bags on a large prescription being numbered eg 2 of 3?

RP – No the NHS is going paperless - repeat prescriptions are no longer being issued automatically but if a patient needs one they can ask at the pharmacy or surgery. Bag numbers are not printed but the new system will show the number of bags to be given to the patient to prevent mistakes.

Sara Barnes – Thanked Ronak for his talk but advised that she had already moved to another pharmacy due to past difficulties.

RP – The new system implemented would resolve the earlier problems and the phone is being answered more quickly. There had been stock issues – they currently have 2000 items of stock and when busy stock can sometimes be out. They are continually improving and he hopes people that have left will return to the pharmacy. Prescription ready messages will be sent by text so it is necessary for the pharmacy to have peoples mobile number. If you are not receiving these "ready" messages please advise the pharmacy of your Mobile No.

- 6. Any other Business There was no other business to be discussed.
- 7. The Next PPG meeting was provisionally set for either 26th April or 3rd May at 7pm (TBC).
- 8. The Chairman thanked the members for their attendance and declared the meeting closed.