

Heathgate Medical Practice
Patient Reference Group Meeting
Minutes of a meeting – 24th November 2015

This was a pre-arranged meeting with current members of the group invited to attend.

An attendance sheet was completed with 17 people present including Practice representatives, Dr Daniel Wallace and Mr Garry Whiting.

This meeting was Chaired by the new group Chair; Mr Henry Gowman, who had met with Mr Whiting ahead of the meeting to brief on some of the matters on the agenda.

Apologies were received from three members.

New Chair

Mr Gowman opened the meeting by re-introducing himself as the new Chair. He had offered to take on the role at the last meeting, which was unanimously accepted.

He explained how he saw one of the key objectives of the group as being critical friends to the Practice and although there is clearly the need for the Practice to consult with members on current issues, he has a desire to introduce a series of educational sessions on a range of subjects for a wider Practice audience (more later).

Patient reference group survey

At the last meeting, members asked the Practice to consider repeating its 'send us a postcard survey' but changing one of the questions to seek the views of patients to help address the increasing number of patients that are not keeping their booked appointments.

A new themed survey based around patients sending the Practice a Christmas card has been prepared and covers the following four areas:

1. How to obtain, or contact someone for urgent medical care when the surgery is closed.
2. How close to actual booked appointment times were patients seen in surgery.
3. The new question about how to handle the increasing number of patients that do not keep appointments.
4. Overall satisfaction with the Practice.

Its design was approved and Mr Whiting confirmed that the order with the printers would be placed so that the survey could take place in Practice during weeks commencing 7th and 14th December.

DNA rates

Last time members discussed the increasing trend in the number of patients that were not keeping appointments. 6 months data is now available:

Month	Number of patients that failed to keep appointments without telling the Practice	Equivalent hours of clinical time
May 2015	153	25 hours
June 2015	149	24 hours
July 2015	150	24 hours
August 2015	117	20 hours
September 2015	127	21 hours
October 2015	173	29 hours

Members again expressed their disappointment here and a wider discussion followed about how this trend could be stemmed. Mr Whiting and Dr Wallace explained the actions that have been introduced in Practice over the past 6 months. These include SMS text advice of appointments to patients, Reception team confirming appointments at least twice when booked on the telephone and the articles on the Practice website and in the Newsletter highlighting the frustrations this causes.

Mr Whiting explained for the first time that they had written to a number of patients who had missed appointments in consecutive months but not one of the 19 patients had contacted the Practice to discuss or apologise for this.

Members asked why the Practice could not telephone patients the day before appointments (like many dentists do) or send reminder texts. Mr Whiting explained that apart from the resource issue, patients needed to take responsibility for their appointments and either keep them or tell us when they are not required.

One member felt we were being 'too soft' on patients although he accepted that the Practice is limited on the actions they can take in terms of fines and expulsion from the Practice patient list.

Some members suggesting the PRG could create a rota and call patients the day before their appointments and whilst the offer was appreciated, this was declined on confidentiality grounds.

The situation would continue to be monitored.

Educational meeting

Mr Gowman explained how he had been invited as a guest speaker to an educational event at Old Mill and Millgates Practice. This was a meeting for patients on loneliness and he was there in his role as Chair of the local 'Men's Shed' group. Speakers from other organisations were present including Mind and Age Concern.

Mr Gowman proposed creating a series of such meetings for our patients and was seeking member support in terms of creating a working group to arrange such.

The Practice agreed to fund the Nightingale Centre for the first meeting and would help promote the evening event in Practice, on the website and in the Practice Newsletter.

Members thought this was a useful 'offshoot' of the main group and several members offered their support in helping Mr Gowman arrange the event.

The first meeting is planned for January 2016 and Mr Whiting agreed to circulate the names of those interested to Mr Gowman. It was agreed that three such meetings a year would be a good starting point.

Mr Gowman thanked everyone for their support with this idea.

CCG Prescribing Changes

Members were made aware of the financial challenges facing the CCG with the projected £6.6M funding deficit for the year.

As part of the plan to reduce spend, members were made aware of the pressure from the CCG to make changes to certain items that are prescribed at the Practice.

Mr Whiting ran through the changes the Practice had supported including:

- The ending of prescribing of Gluten Free products across South Norfolk.
- Switches in one form of inhaler used in the management of respiratory conditions.
- The switch from capsules to tablets for one specific drug where there are large cost savings for the NHS for each 28 day supply.

Members were made aware of the Practice policy of only changing patient's medication by letter where there was a like for like alternative. Mr Whiting and Dr Wallace explained that where other cost saving prescribing changes were being made that were not like for like, a face to face meeting would be arranged.

On the whole members accepted the need to make changes where less costly medications, that have the same clinical outcomes, are available.

Dr Wallace responded to a direct question about whether clinician's prescribing habits are directly influenced by costs. He advised that whilst it is right to consider the cost when public money is being spent, clinical appropriateness and safety is the main consideration.

Physiotherapy service

Mr Whiting explained the draft proposal for the centralisation of physiotherapy services to Long Stratton. This would see the loss of the service from our surgery.

Members were frustrated that this local service for patients could be lost and that patients would have to travel a distance to Long Stratton.

It was acknowledged that the public transport network to Long Stratton was limited and even though there are volunteer driver schemes, these can be expensive for long distances and can sometimes be limited with availability.

Members asked the Practice to voice its objections to this change in the strongest terms and Mr Whiting agreed to pass these comments onto the Provider.

Ear Syringing Services

The Practice is introducing a change in policy around ear syringing and members were made aware of the reasons for the change based on good clinical practice. The new proposals were discussed with each of the two protocols explained.

Members accepted the basis on which the changes were being made; safety and reducing the risk of infection and Mr Whiting agreed to feed back at the next meeting how the changes had bedded in.

CCG policy change – IVF and Hearing Aids

Members were made aware of the two consultations underway from South Norfolk CCG. The first is that on IVF which sees a new set of criteria around the provision of Level 3 Fertility Services.

The headlines from the consultation document were shared including the savings (£190,000) that the new policy would release to help the CCG financial situation.

The second consultation is that on hearing aid thresholds. This created greater debate and Mr Whiting explained the proposed changes linked to restrictions on referrals for NHS hearing aids for those with mild hearing loss.

Debate followed about where the AQP Providers (such as Boots and Specsavers) fit into the picture and Mr Whiting explained that whilst these are Private Providers, they are funded from the NHS for a range of services.

This consultation closes on 18th December and members were encouraged to respond if they felt it appropriate. If approved, the new policy will save the NHS in South Norfolk £180,000 a year.

Healthwatch

Mr Whiting explained how Healthwatch Norfolk was looking to engage with the Practice for the views of clinicians, managers, staff and patients on how Primary Care integrates with other parts of the Health and Social Care System.

Healthwatch was established under the Health and Social Care Act 2012 with an aim of providing citizen and communities a stronger voice to influence and challenge how Health and Social Care Services are provided.

Members were keen to support and Mr Whiting will share with members the date they are planning to be in Practice.

Our ears and eyes in the community

Members were asked to be our 'ears and eyes' in the local community.

Mr Whiting explained how it is a challenging time in Practice but that despite this, the Practice still strives to deliver the appropriate care at the appropriate time in the appropriate way. He explained that in some cases patients expectations are rising and sometimes they can be critical of us and unhappy if they do not get 'what they want' and only 'what they need'.

Several members belong to wider community groups and they agreed to feedback anonymously comments, they may hear about the Practice.

AOB

There were two matters discussed:

- 7 day opening – brief discussion on whether there have been any developments here. At this stage, there has been discussion between NHS Employers and BMA about a new voluntary GP contract from 2017 to address the 7 day opening plans but no specific details. One member asked if the Practice would be interesting in piloting a scheme. Mr Whiting confirmed that there were various national pilots in place at the moment, the results of which should be published very soon and these would be reviewed in Practice.
- CQC visit – to date there has still been no approach by the Inspectors. When they do visit us, Mr Whiting confirmed the Practice would be looking for support from members on the day.

Date of next meeting – to be arranged early February 2016. The educational sub group would meet very soon, with Mr Gowman arranging a date.

The Chair thanked everyone for their contributions to the evening.

Minutes prepared by Mr Whiting, Managing Partner.