The Sidings

Patient Participation Group

Minutes of the Meeting 26h November 2019

Present:

Mark Shaw PM, Phillip Bosworth PPG Chair, Sue Fidler PPG Sec, Tim Boardman, Maureen Taylor, Pat Bowles, Suzanne Baxter, Myra Upton

1. Apologies and absence.

Apologies: Anne Martin, Mike Forbes, Dot Redmile

Absent: Nick Allday.

2. The minutes of the previous meeting 29th October 2019 were discussed and approved

3. Matters Arising: Dot Redmile resigned by email.

4. Practice and Update:

a. Discussion revolved around seeking clarification of choosing a Pharmacy on System Online. The option is available and lists the local Pharmacies.

b. It was discussed that if a patient ceases to use the facility for obtaining prescription items at a Dispensing Pharmacy Practice, it is not possible to re-join the facility. This was confirmed as an old NHS England and Dispensing Pharmacy Practice Regulation that cannot be circumvented.

MS confirmed the CCG have a Prescribing Incentive scheme which wishes to reduce prescription costs by stopping some low cost over the counter medicines (eg paracetamol) and switching to unbranded generic medicines, however before any switch is implemented there must be a discussion with the patient by the Doctor and there are instances where a Patient can remain on a branded medication. A robust discussion ensured regarding the pros and cons of prescribing low cost over the counter medications and the difficulty in separating genuine cases from fraudulent.

The question was raised about assignment of a Patient to a Doctor. MS explained that all Patients are assigned to Dr Barrett. Further discussion ensued regarding the robustness of history examination in the records by Doctors in the time allowed during a short 10 minute slot and risk - e.g. asking relevant questions about allergies, not seeing information on the Patients Front Page; but overall there must be an adherence to the Quality and Outcomes Framework (QoF). There is on-going encouragement to all Physicians to be conversant and comply with Patient safety. MS is trying to get a consistent approach from Physicians to the aforementioned.

MS confirmed that the Practice has a number of Locum Doctors who would like to be fulltime but until the practice has a 5 year CCG Contract in place they are unwilling to sign up on a permanent basis for a less than 12 month contract as the Sidings Contract with LCHS ends September 2020 and the Tendering Process for a renewal/new provider is only just beginning with a public consultation started in December, that finishes at the end of January 2020. The Practice at present is paying Doctors on Locum rates and substantially less expensive than Agency Locum rates (to the order of some 60% less, can be reduced when the Practice pays Pension contributions).

MS confirmed the Practice has to provide 1000 appointments per 72 Patients and that is approximately 250 appointments a day and the Practice is currently averaging 248 daily. Patient list is just under 18,000.

Patient Register:

A discussion was held around maintaining the Patient Register and MS confirmed the procedures that take place when a Patient is deceased or moves or leaves the Practice and registers elsewhere. When a Patient leaves the Practice the Practice ceases to be the Data Controller of their records and if the Patient requires a copy they must submit a Subject Access Request and/or ask the Practice they register with to request their records follow accordingly. The Practice does encourage via various messages that Patients inform them when their details change.

Staff:

One Receptionist has left and one new Polish speaking Receptionist has been appointed, and an additional Receptionist is to be appointed (90 hours total) along with one new locum Clinical Pharmacist. One Medical Secretary is returning from Maternity Leave working one day a week until the new year (phased return). Carol Burton has been appointed Lead Receptionist. LCHS are not making any structural changes to the practice going forward from 1st December 2019.

Medication review:

MS confirmed Face to Face Patient reviews are taking place to avoid any improper use of Prescriptions being issued for drugs.

Refurbishments:

MS confirmed there will be some new redecoration and face lift of the Practice in particular reference to the divided nature arising from the joining of the two separate Practices, Stuart House and Westside. Reburb work would be using monies from the Sync Fund.

Whatever the review of the Condition of the décor shows there has to be involvement of the Landlord of the building who is happy to co-operate however, of course, there is the impending Lease / Contract Review to be completed for September 2020 to give confidence to the Landlord of the continuation of occupancy.

4c. Complaints.

Discussion revolved around Patients feeling intrusion when asked what is wrong with them by Receptionists.

MS - Patients do not have to give information it is not compulsory. Receptionists can politely ask what is wrong in order to direct the Patient towards the most appropriate Clinician.

MS confirmed average of one complaint a week. Some complaints can be resolved informally but formal written complaints must be responded to in writing. The Practice received a good review on NHS Choices along with two compliments received from Health Watch. The Practice had four complaints from Health Watch the previous month.

5. Website

Patient Coffee morning advertised for December 13th organised by the Practice Nurses. PPG invited and Mince Pies and Coffee being served and Volunteers for Mince Pies appreciated. Nurses have worked hard and approached local business for Raffle Prizes.

6. System Online and Appointments:

MS confirmed appointments were good for the month and recommended the NHS APP to be used. MS confirmed that they have to have a percentage of appointments available on line for Spring 2020 and expect appointments to be plenty full going forward. On line access is processed for System Online in the Practice but Patients must have access to a computer or smart phone. MS confirmed the Practices is seeking to increase the number of online appointments which need to be timely and not a long time in the future.

DNA - Do Not Attend – missed appointments:

MS confirmed the Practice is looking at, on a per Patient basis, repeat offenders of DNAs

and the number of forward appointments some Patients are booking and whether some may be considered excessive or unnecessary, which may mean limiting the number of forward appointments that can be entered on line.

MS confirmed administratively the Practice is bang up to date with everything. Record summarising, administration, medical reports (back on track) plus Reception tasks and duties.

A question was raised about the usefulness of the “text back” service for appointment confirmation and MS would like to encourage more people to sign up for it.

7. LADMS: (Lincolnshire and District Medical Services – run by Marisco, Beacon and Louth Hospital.)

MS states service provision has improved along with staffing improvements and LADMS and two of the hubs are being inspected by the CQC (Louth and Beacon) no the Sidings.

Discussions are taking place regarding Video Conference Assessments as part of the extended access service, i.e. using the Internet instead of Face to Face appointments. Other areas of the country have trialled this already in line with the Government’s Digital Agenda. Discussions taking place as to whether the Primary Care Network (Boston) should take over the responsibility for the extended access and use either the current provider or a new provider for the service. MS confirmed that The Sidings hosted the first pilot in the Boston Primary Network, for the First Contact Physiotherapy Service using Transformation Funding. Discussions revolving around have the service available 5 days a week at The Sidings, instead of split across the six PCN Surgeries. One of the factors to consider is the distances from Swineshead and Donnington into Boston Centre or Pilgrim.

National Organ Donation:

A discussion revolved around the decision for people to make regarding the National Programme for Organ Donation taking place from February 2020. From Spring 2020 Organ Donation will move to an opt-out system. This means that all adults in England will be considered to have agreed to be an organ donor when they die unless they have recorded a decision not to donate or are in one of the protected groups.

This is the link: [www.organdonation.nhs.uk/uk-laws/organ-donation-law-in-england/](http://www.organdonation.nhs.uk/uk-laws/organ-donation-law-in-england/)

Chair passed around paper copies of the CCG Survey, Listening Clinic.

AOB

It was mentioned that the Practice should consider entering staff for the 2020 Staff Reception Awards.

Future Meeting Dates:

February 4th 2020; March 3rd 2020; April 7th 2020

June 2nd 2020; July 14th 2020.