

Minutes of Alford Group of Doctors Patient Participation Group

Held 1.30pm Friday 29th September 2017.

Members ; Peter Hawkyard (Chair), Alan Reeves (vice Chair) Pat Hawkyard (Secretary), Pam Maplethorpe.

Practice ; Ian Atkinson (Practice manager)

Apologies ; Pat Mowbray, Hazel Blogg

Resignation ; Bob Baker has tendered his resignation and Peter advised the group that he had sent Bob an email, thanking him for his contributions and on behalf of the group, wishing him well for the future.

Minutes of Previous Meeting ; Approved

Matters Arising ; None

Chairman's Report

Notification has been received from the NAPP Board regarding proposals to remove further prescribing of some items by NHS England. There are possible risks for people with long term conditions requiring multiple medication, or to people of low income, from proposals to move to the personal funding of some medications. Some of the products under considerations are Eczema creams and ointments and Antiviral creams. There are others on the list which can be viewed on line. NAPP have organised a survey which can be completed on line either as a PPG unit or individually. It closes on Friday October 13th

The area PPG meeting was held in Skegness Tuesday 26th Sep. A presentation was given by Maureen Leonard of St Barnabas Welfare Support. It was explained the St Barnabas was not just involved in Cancer care but can help with COPD, Heart problems etc, and can assist with welfare benefits system claims, blue badge applications etc.

Also discussed was the disappointment of being refused funding under the 106 agreement for development of a large caravan site in Skegness. Despite initially being supported by the Council Officers, the planning committee passed the application without a 106 agreement attached. This has created a dangerous precedent and could result in all further application for 106 agreements being turned down. As this area is already underfunded, it was agreed that an appeal be raised on behalf of the PPGs expressing concern that patient needs are being ignored. Alford has an application going through at the moment so it is important that these decisions are challenged.

Everyone was asked if they had any feedback on the takeover by Thames Ambulance Service providing transport for patients to and from Hospitals. No one had received any comments whatsoever, and it was assumed that after the shocking service given by the previous provider, TAS was doing a reasonable job

On Thursday 28th Sep, Pat & I attended the AGM of the Lincolnshire East CCG. We were advised that the CCH failed to miss its budget surplus but remained within its overall budget. 45.5% of the CCG budget goes on Hospital Care which along with everything else found itself under pressure from heavy demand In 2017/8, the aim is to reduce the number of people admitted to Hospital. Currently, the CCG is failing to meet the NHS standards wait time of 18 weeks, achieving only an 80% level. A&E admissions are accounting for 90% usage of beds and this is restricting available beds for planned operations significantly.

Further developments will also take place in General Practice by more use of neighbourhood teams, further training of staff to become involved in care navigation, (these will be graded “Bronze”, “Silver” or “Gold” according to the level achieved. Basically , these staff will ensure you see the right clinician for your particular need.

Extended access 6.30pm to 8.00pm Monday to Friday and week-ends. (Not all surgeries will be involved and much will depend on staffing levels).There will be no compulsion to participate.

There will be further attempts to educate patients into increased self care.

Current medication costs are £52 million, hence the constant reviews of certain medications, and the possibility of removing them from prescription lists.

Practice Manager's Report.

Ian advised that we were still awaiting the launch of the CCG DNA publicity campaign. Currently, Alford DNAs were reducing ; - GP = 168, Nurse Practitioners = 170, Nurses 135 and HCAs 319. This could be as a result of reduced availability of advance appointments.

The “walk in” clinics are being well received, but will be monitored to avoid abuse of them.

The surgery had received good reports of the Thames Ambulance Service.

The CQC has been in touch to advise of some staff changes and to offer assistance in Alford gaining a 100% Good assessment

There were 6 complaints June to Sep. 4 were resolved by the Practice, 1 by the Medical Defence Unit and 1 case still under investigation.

The new telephone system had teething problems but has now settled down and is working satisfactorily.

We still have a vacancy for a GP but Dr Woppard is helping out a few days a week as a locum. Despite earlier reservations about recruiting *international Doctors, the Practice has now expressed an interest in taking 2 of these Doctors when they become available.*

Referrals continue to be a nightmare, not helped by the UHLT being in special measures.

Work with the Area Federation (now 27 Practices) continues and pressure is now being applied to recover costs for procedures not currently paid for at Practice level but fully funded if carried out in Hospital (.e.g.; Ear Syringing).

No progress has been made regarding the “closed list” application. It is felt that the CCG is “stalling”, being aware that if granted to Alford, others will quickly follow.

The retinopathy unit will visit Alford from Friday 27th Oct through to 22nd Nov but will not be available on Tuesday 14th Nov.

Funding has been obtained to extend the over 75s programme until March 2018.

Letters are going out advising dates of this year’s flu vaccinations. There will be no shingles or pneumonia vaccines available this year due to a nationwide shortage of vaccines.

A handful of surgeries have now merged and will become Primary Care Hubs in due course.

Maintenance continues and the entrance to the Surgery has been refurbished and railings put up to prevent cars reversing in to the building.

Members Feedback

Peter realised that personal cases should not be discussed, but felt that an exception could be regarding the recent very bad RTA that he and Pat were involved in. Of note, was the fact that both Police and Fire Service were on scene within 10 minutes and 2 ambulances arrived in 20 minutes. We received first class treatment throughout, and the follow up procedures from Grimsby Hospital and from the Surgery were exemplarily, so much so, that a member of the Alford Practice staff has been nominated in a recent survey as going “above and beyond” in her duties

Any other business

Peter advised that he and Pat would be attending a Patient Council Meeting in Woodhall Spa next Thursday. Two items they intended raising ;

1. At a recent Area PPG Meeting it was “leaked” that there was now available a piece of kit that can be plugged in to an I phone and can accurately diagnose heart and stroke problems. We have been led to believe that there are boxes of this kit lying in Lincoln with no indication as to when or where they will be distributed. Can this be investigated please?
2. Numerous complaints are being made regarding the issue of hearing aid batteries by surgeries being withdrawn. Even the Audiology Department at Grimsby Hospital could not give an answer, responding with –“ everyone will receive a letter”. Non complicated cases are to be removed from the list and only the complex cases will remain on Grimsby files. Rumour has it that the service has been out to tender, and that Specsavers have won the contract. As the decision was made in June, why the delay in advising surgeries (letter received 21st Sep stating scheme starts 1st Oct). Please clarify?

DATE OF NEXT THREE MEETINGS – FRIDAY 3RD NOVEMBER

FRIDAY 24TH NOVEMBER .NO MEETING IN DECEMBER.

FRIDAY 26TH JANUARY 2018. ALL AT 1.30PM