

PATIENT REFERENCE GROUP (PRG) MINUTES

(Condensed)

Meeting: Thursday 11th June 2015

1. PMS Review (SLS at the HLC)

This evening Robert had hoped to bring us up to date with the latest news on the funding issue now facing the surgery at the HLC, in that NHS England is proposing a cut of 25%. A review took place on 9th June and the result will not be known until some time in July, after which we will be put in the picture.

The surgery originally set up shop at the HLC to deal with the many foreign nationals now resident in the area, currently numbering around 3,600 (registered patients). This remains the main argument for retaining the facility at the HLC, and a 25% cut in its funding would be devastating; it would see a withdrawal to School Lane for all GP services.

The surgery has approximately 16,000 registered patients, and it will be a real struggle to accommodate all services from the one building at School Lane; there is limited space and staff are already falling over each other. The phlebotomy service will struggle to find space, and the waiting area could become crowded.

If NHS England does reject the SLS appeal then Robert will explain the process to the group, especially in regard to the role the PRG can play in a further protest.

2. Health Awareness Day

It was agreed the Health Awareness Day, held at the Carnegie Room on 11th April, went very well as far as the PRG effort is concerned. We managed to encourage 22 individual support groups to set up stall, and they were able to 'network', but it was disappointing to see the small turnout by the public. Despite the many posters and 1,000 flyers handed out, most of which had elicited a positive response, it seems people are only interested in health issues when they are already ill(?)

3. Patient Information Screen

The old screens at School Lane are to be replaced, and notice has been given to the current provider of this service. The surgery has had no control over content, and the new JX system will offer complete control with the capability to show health videos; there will no longer be any advertisements.

It has not been possible to install an information screen at the HLC as the surgery only rents the rooms, which means it does not have the authority. As a matter of interest, a partition screen was purchased for the phlebotomy service and we are waiting for the HLC to install it.

4. Patient Information Leaflet (when to seek help)

GPs are currently giving this issue their attention, and are seeking approval from the powers that be.

5. Complaints/Significant Events/Friends & Family comments

The last monitoring period has thrown up 4 complaints, 3 of which have been upheld. The surgery is always disappointed when a patient feels they have not been given the best attention, but this process is also good for the surgery as it flags up any holes in procedures.

6. Proactive Care Planning Co-ordinator

Muriel Hadley-Brown was introduced to the group as the Proactive Care Planning Co-ordinator at SLS, a role for which she is well suited (being a fully qualified nurse).

Muriel has been tasked with ensuring that the most vulnerable patients are able to manage at home, thereby avoiding an unnecessary hospital admission. She will co-ordinate the relevant care services, and if grab rails etc. are required this will be organised. 9 months into the job and things are going well, there has been a drop in the number of hospital admissions.

Patients are able to phone Muriel if they feel the need for some help at home, and she can arrange for other services such as dementia review if it is felt necessary.

7. Norfolk Safeguarding Survey (public awareness)

Members of the public are invited to fill in a short survey on the Norfolk Safeguarding Adults Board website at <https://www.smartsurvey.co.uk/s/norfolksafeguarding>, the aim of which is to try and learn how much people know about keeping adults safe from abuse or neglect.

8. Other Business

a) Population Growth Planning dialogue has now started between SLS, GLS and NHS England on how practices will cope with the increased population to come with the planned 5000 new homes in Thetford.

b) HLC update the minor surgery area is being refurbished and a wider range of operations will be made possible in 2 - 3 months time. Providers of cataract surgery, podiatry and urology services are currently in discussions with the HLC.

c) Every time a patient visits the hospital for an appointment it is charged to the surgery, and not all patients are aware of this. This raised a concern of 'unnecessary' appointments, with some of the group having being called back for check-ups and reviews they felt were less than essential.

d) GPs will inform patients if a prescribed medication is cheaper to buy 'over the counter' rather than at the current cost of a normal prescription (£8.20). Some items, such as Paracetamol, cost as little as 23p.

e) Some pharmacies will deliver prescriptions to the patients home, and at no cost to the surgery.

f) It was pointed out that Dr Tomlinson is not listed as staff on the surgery website.

g) On 20th May the latest SNCCG PPG Event was held in Attleborough, and those in attendance are now beginning to question their efficacy. Oliver Cruickshank, Engagement Lead at the SNCCG, will attend our next meeting... to face the music!

NEXT MEETING: Thursday August 13th, 7 pm at School Lane Surgery.

GLOSSARY

GLS - Grove Lane Surgery.

HLC - Healthy Living Centre.

PMS - Primary Medical Services.

PRG - Patient Reference Group.

SLS - School Lane Surgery.

SNCCG - South Norfolk Care Commissioning Group.