

School Lane Surgery

PATIENT REFERENCE GROUP (PRG) MINUTES (Condensed)

Meeting: Thursday 21st April 2016

1. Previous minutes

No issues were raised concerning the previous minutes.

2. Letter to Jeremy Hunt + reply

Following our letter to Jeremy Hunt MP, the Secretary of State for Health, a reply has been received from the Department of Health.

We wrote to Jeremy to raise our concern about the lack of planning for healthcare services in the town as it expands, and pointed out the reluctance on the part of both our own Clinical Commissioning Group and the NHS England Area Team to take responsibility for ensuring appropriate healthcare facilities are in place. The reply was short, the advice being to contact NHS England directly with our concern.

We learned this evening that the Head of Integrated Commissioning with Norfolk County Council and the South Norfolk Clinical Commissioning Group has agreed to represent *health and social care* on the recently established Thetford Development Board: it has been made clear that they will seek to bring relevant colleagues to planning meetings when primary care and public health issues are on the agenda, and GP practices will be consulted with regard to new and expanded premises.

3. Staff changes

Dr. Sola Aminu is in position at the surgery, having returned to the fold she is now a salaried GP.

Ines Perez, receptionist, has now left the surgery to take up a position at the West Suffolk. Replacing her will be one Natalie Stenson, and she joins the team in May.

The Practice is currently looking to recruit another administrator.

4. Infrequent patients to be barred from the surgery?

There are plans being developed in the east of England which could see patients being barred from their GP surgery if they do not make a visit within the last 5 years. Patients will be sent a maximum of 2 letters to try and establish if they are still in the area, and if so, whether or not they wish to remain registered with the GP practice: failure to respond will see their names removed from the practice list.

This move is seen by some as an attempt to cut funding, as each registered patient is worth £136 to the surgery (to cover the cost of their care for 12 months), and it will mean a further load for administrative staff: SLS has 16157 registered patients.

Young people are most likely to be affected by this initiative as they are inevitably going to be fitter, with less reason to visit the surgery. Other names are removed from the practice list when the surgery is given notice of a patient moving house, leaving the country or upon their death.

5. Patient access to information

The surgery has received a request from a Polish patient for an interpreter to attend our meetings so that she can join us in our discussion, and we are currently inquiring into who would be liable for the cost; the lady in question does speak some English, but not enough to feel confident.

Our meetings last around 90 minutes, and it is estimated that this service would cost around £200 per session. The group feels that if every point of our discussion has to be translated, and responded to, it could slow proceedings to a crawl; we could be there until midnight! It's not very practical, and while we understand that it's important for every patient voice to be heard, it must be done cost effectively.

The point was made that there are 30+ languages spoken in Thetford, and each group might feel entitled to have an interpreter at our meetings if this request was to be granted.

The surgery website has a translation tool, but so far we have been unable to provide the minutes in a foreign language; this may be down to the document format, and it is being looked into.

6. Dr. Martin Hadley-Brown to talk at next meeting

Martin is one of the foremost GP's in the country to specialise in diabetes, and as such he has offered to come and talk to the PRG on the subject. Members are asked to submit questions, and a list will be passed on so that he can do some preparation; our concern is more about what we ourselves can do to raise awareness of the causes, rather than the intricacies of the disease, and help patients to understand how type 2 diabetes can be avoided.

Members would also like to talk to Martin about how he sees things at the surgery from the senior partner point of view, and if he is agreeable a list will again be prepared so that he can be ready for the meeting. We know that GP's are having a stressful time of it at the moment, and it would be enlightening to hear an overall perspective from the boss.

It was also suggested a new GP could be invited to a later meeting, to talk about how things have changed.

8. Other Business

a) Charges for non-essential treatment - Plans are afoot to charge for *non-essential* treatment, and as patients we would be more than a little concerned about who decides what is or is not essential; this could very much affect an individual patient's mental state, and the final decision should be left to a clinician?

This is a hot topic which is due for discussion, stay tuned.

b) GP Appointment waiting times are currently around 4 weeks, and this is because one of our GP's is unwell.

c) South Norfolk Clinical Commissioning Group Event (14th April, Cringleford) - We learned that no targets are being met at all, and that as a consequence there will be a deficit to be made up by yet more 'efficiencies'. It came as little comfort to learn that the panel that makes the decision on cuts has 5 current and 2 retired GP's on it, the result is still more cuts to health services.

The main topic of the event was medicine wastage, and after a slow start it became quite animated. There were many personal anecdotes on the subject and it is clear that it will be difficult to do very much about it.

Norfolk GP's issue 35 million prescriptions per year, of which 5% are wasted: this percentage equates to 4.9 million pounds, 1.4 million of which is down to South Norfolk; our region is the lowest in the country.

It was suggested that unused sealed medicines could be put to use if they were placed in a tamper-proof container along with a temperature monitor device, and some homework will be done on this: medication can be rendered useless if it is not kept properly. The rules are very strict when it comes to the issuing of medication and the current situation is that once a medicine has left the pharmacy it cannot be reissued.

In the 1960's and 70's an unused medicine would be sent abroad, to the *third world*, rather than go to waste.

It was agreed that patients need to take more responsibility for their medication.

e) Thetford Library now has a health promotion section, with books available on medical conditions. Also available are themed *reminiscence suitcases*, which have been designed to try and help those with dementia to remember times gone by.

f) Mobile Chemotherapy is now available at the Healthy Living Centre on Tuesday and Friday.

g) The Did Not Attend rate is no longer advertised at the surgery: all efforts to eliminate the problem have been unsuccessful and there now seems little point.

h) Alison Leather is responsible for Quality Assurance at the South Norfolk Clinical Commissioning Group and she has expressed the desire to come and talk to us, for which the provisional date of 25th August has been pencilled in.

NEXT MEETING: Thursday 16th June, 6.45 pm at School Lane Surgery.