

Kingsmead Healthcare



KINGSMEAD HEALTHCARE PATIENT PARTICIPATION GROUP Agenda & Minutes 20 March 2018

Agenda

1. Present & Apologies For Absence
2. Minutes of the Last Meeting & Matters Arising
3. Friends & Family Test Results
4. Updates on Ongoing Work Strands
5. New Work Strands – Patient Driven Initiatives
6. Patient Suggestions
7. News from the Practice
 - City & Hackney Practice Network
 - City & Hackney CCG & GP Confederation
 - Department of Health & NHS England
8. Out of Hours Service
9. Staff Updates
10. Pharmacy Updates
11. Any Other Business
12. Date of Next Meeting

Minutes

1. Present: Mrs. C. M
Mrs. B. M
Mr. R. B
Mr. B. E
Mr. S. M
Mrs. S. S
Mrs. S H-W

Apologies for Absence: Mr. P. W, Mr. A. F, Ms. H C, Miss. S. K, Mr. D. S.

Mrs. Stevens welcomed all members of the Kingsmead PPG Meeting.

2. The minutes of the last meeting dated 10 October 2017 were reviewed and accepted as a true reflection of the proceedings. These were signed off by Mrs. Stevens.

3. The results of the FFT survey continue to *reflect a very positive perception of the Practice and its services*. The cumulative monthly results (November 2017 to March 2018) since the last meeting were as follows:

November 2017: Total number of forms returned: 85
 Those extremely likely to recommend the Practice to F&F: 59 (69.41%)
 Those likely to recommend the Practice to F&F: 26 (30.59%)
 Those who had a neutral (neither likely nor unlikely) view: 0
 Those unlikely to recommend the Practice to F&F: 0

4. Updates on Ongoing Work Strands

Please refer to the section on 'Achievements and Considerations 2016-17'.

5. New Work Strands – Patient Driven Initiatives

Please refer to the section on 'Aims and Objectives for 2018-19'.

6. Patient Suggestions

The quality of the Practice's services are reflected in part from the outcomes of the monthly Friends & Family Test, the national patient survey tests published on the NHS Choices website as well as the annual patient satisfaction survey carried out in the last quarter of the year.

For the purposes of reporting, the summary results of the patient satisfaction survey are listed below and the PPG is very encouraged by the overwhelmingly positive perception of the Practice team and its services. A total of 57 patients returned their surveys.

95%	Proportion of patients who would recommend their GP surgery
91%	Proportion of patients who are satisfied with opening hours
96%	Proportion of respondents who gave a positive answer to 'Generally, how easy is it to get through to someone at your GP surgery on the telephone?'
93%	percentage of patients rating their experience of making an appointment as fairly good or very good
98%	Proportion of respondents who described the overall experience of their GP surgery as fairly good or very good



GP Survey Results
2017-18

The following written comments were received from the patients:

Access - Sometimes very busy phone line. My GP is very good. Always listens to me and if I had an emergency situation and go to the surgery he will see me the same day. Thank you very much to all of you. Keep up the good work.

I'm happy with the service. Doing good work.

Well behaved workers and receptionists. Well organised.

The nurse is very rough.

I haven't got any comments.

I really like your services. All the times I called for an emergency appointment, I am always provided by one. I am very pleased with the GPs in this surgery and they are well trained to handle our calls. I am a very happy customer.

Overall my experience with my local surgery has been amazing. However, I did have a very bad experience and I discussed it with someone. However, I hope it definitely won't happen again.

I can never say any bad experience or words about this surgery I have been with this surgery since I have been in the flat. The GPs, receptionist staff are very friendly and always ready to help in all aspects. Very good, polite people generally. Well done and Keep up the good work.

Good medical treatment. That is why I like coming to this surgery. The nurse and HCA are very good. Never feel pushed for time.

Good service particularly like the late evening appointments as this caters for working patients.

I have been with this surgery for about 5 years now and each time I call to book an appointment or speak about my results, it's always fantastic. The reception response to my enquiry is just fabulous. And whenever I visit their welcoming spirit is always amazing.

My GPs are very approachable and listen to my problems. Very kind and accommodating.

The following is a summary of suggestions received from the members of the PPG and patients during 2017-18:

- a. To review the current structure of the Baby clinic (time and access limited at this time) and also consider the provision of a pram park.
- b. To assess the cost-effectiveness of having a dedicated asthma and COPD clinic especially as the numbers are on the increase year on year and patients with sub-optimal control do need regular follow-ups.
- c. To assess the cost viability of providing a water dispenser in the waiting area.
- d. The Kingsmead PPG newsletters should be issued four times a year instead of twice – in May, August, November and February. The PPG and the Practice should evaluate the cost effectiveness of sending them to the patients and come up with the best compromise between cost and effective communication. The preferred option was to leave a few copies in the waiting area but make them available on the websites.

- e. Some patients had asked some of the PPG members if it was feasible to have a chiropody and physiotherapy clinic at the Practice and whether it was possible to consider a private chiropodist practitioner to run a clinic here.
- f. Every newsletter should highlight the fact of increasing participation of patients with the PPG as there was a growing sense of stagnation with little interest from new patients.
- g. The Practice must urgently review patient access management in the light of increasing competition from agencies such as GP Hand.
- h. The PPG and the Practice must review approaches by which to get more patients to attend NHS health checks. This is a very cheap, time-efficient way to get screened for cardiovascular disease, high cholesterol and diabetes.
- i. More and more patients should be signed up for using online services. Currently 22% of the Practice population are signed up although the active users are fewer in number.
- j. The PPG-Practice should actively consider the use of music in the waiting area.
- k. The Practice should advertise through posters and newsletters as well as on the websites about the new extended access service available at Hib Practices in City & Hackney.

Members of the PPG agreed that some of the suggestions were very worthwhile and that a concerted effort should be made to progress towards, if not realise, these goals in 2018-19.

7. News from the Practice

City & Hackney Practice Network
 City & Hackney CCG & GP Confederation
 Department of Health & NHS England

Nothing to report but there will be several new releases in April 2018. At this time, perhaps the most important issue affecting patients at Kingsmead, as elsewhere in City & Hackney, is NHS England's decision not to fund the Pharmacy First scheme. This is a potentially disastrous scenario as the scheme provides 1300+ free consultations for specified minor ailments per GP Practice in City & Hackney. Alternatives are being actively considered by the CCG and we will keep all patients posted through our Practice websites.

8. Out of Hours Service

Nothing to report

9. Staff Updates

Nothing new to report. The Practice continues to use locums to fill in the vacancy created by one of our GPs who is on maternity leave.

10. Pharmacy Updates

PPG members were very concerned about the withdrawal of funding for Pharmacy First by NHS England in the next few weeks.

11. Any Other Business

The various members of the PPG thanked Mrs. Stevens for her hard work throughout the year to promote the cooperative agenda of the PPG and hoped that she would continue in this role in the following year to help drive it forward.

12. Date of Next Meeting

15 May 2018 at 1.00 PM Kingsmead Medical Centre. Patients are encouraged to attend. Notices for the meeting date will be posted on the website, in the newsletter and in the waiting area.

1. Notable Past Achievements

- New telephone system
 - Completely refurbished premises
 - New Patient Arrival console
 - Extension of opening hours to include Thursday afternoons until 6.30 PM with a GP clinic from 1 October 2017
 - New digital display and patient call system (Envisage)
 - New Practice website in addition to the mandatory NHS Choices website
2. Six-monthly to quarterly newsletters – Achieved 2017-18
 3. Increase in number of patients registering directly through the website – Achieved goal over previous year but ongoing
 4. Increase in number of patients requesting repeat medications using the website - Achieved goal over previous year but ongoing
 5. Increase in number of patients making appointments on line - Achieved goal over previous year but ongoing
 6. Monitoring waiting time to improve patient experience – this was reviewed and found to be not so helpful in terms of cost-benefit. It would be more appropriate to review patient access in order to maximise it at all possible times. This will be a target in 2018-19.
 7. Increase patients to take up on the offer of NHS Health checks. The initial target of 85 was far exceeded by achieving 202 screenings – ongoing
 8. Monitor quality of patient privacy in the waiting and other areas – reviewed but ongoing
 9. Use of A&E coordinator to reduce the number of inappropriate A&E and OOH contacts – clinics still running and ongoing
 10. Annual patient survey regarding services – done 1-10.3.2018 and results published and discussed
 11. Evening and weekend appointments – availability increased through Hub arrangements – achieved 2017-18 but also ongoing
 12. Managing medication issues to reduce waste – achieved by increasing repeat dispensing from 250 to approximately 812 in 2017-18, comprising 45.85% of the practice population.
 13. It was felt that recruitment of patients to attend PPG meetings was better dealt with by the receptionists as they see regular patients and can encourage them to attend the PPG meetings. Another idea put forward for attendance to PPG Meetings would be to have a raffle (something small) to encourage patients to attend. Everyone loves a raffle!
 14. It was agreed that a POSTER in reception and also consultation rooms would be a good idea, However it needs to be keep it simple – short and to the point otherwise patients will not read it and then putting it on the website if possible.

PPG Achievements 2017-18: Three Special Reports:

1. Medicine Management - Reduction in waste of repeat medications

What actions were taken to address the priority?

It has been estimated £300 million of NHS prescribed medicines are wasted each year. It is therefore incumbent upon each patient as well as Practices to ensure this is reduced to a minimum. Patients waste medications for several reasons, some deliberate, others circumstantial. These include non-compliance, deliberate or intentional non-adherence, unintentional non-adherence, non-preventable waste such as death of a patient or preventable waste such as when a patient stockpiles medicines for 'just in case'. Although this is a vast area to address with multiple issues to address, it was agreed that taking into account the limited resources available to GP Practices, the best endeavour would be to monitor issues of repeat medications through increase in repeat dispensing and involve pharmacists more in medication reviews and to nominate a clinical and a non-clinical lead to drive the monitoring as part of everyday clinical practice. The PPG members initiated this suggestion and it was agreed that the Practice should proceed with the implementation.

The Practice subsequently nominated a GP lead along with the Practice manager as the non-clinical lead and the repeat dispensing protocol was reviewed and instructions issued to all members of the team to adhere to the rules. It was agreed that the most efficient way would be to use the tools we already have on EMIS Web and reception staff were advised to follow a clear pathway for every repeat prescription received. GPs and other clinical staff also involved in repeat prescribing such as the HCA were cut out of the loop in being asked not to issue repeats to convenience the patient. Each prescription request is evaluated, issue records checked and periods calculated to establish the level of compliance. Medication reviews are now done every six months for each patient on a repeat and those found to be compliant with a stable clinical status are issued prescriptions through 'repeat dispensing', thereby involving the pharmacist in the monitoring process. They provide feedback on any discrepancies in compliance. In the last five months, the number of patients on repeat dispensing has increased from about 250 to 802.

Result of actions and impact on patients and carers (including how publicised):

Through 2017-18 and especially in the last 5 months, the GP clinical and Practice manager have been largely responsible for monitoring requests for repeat prescribing and it has helped to cut down on waste. The process has also made those involved more experienced and knowledgeable about the whole procedure. The work is ongoing as part of everyday clinical practice but the PPG feels it has made a valuable contribution to help patients manage their health better whilst helping the NHS through reducing cost on wasted medication. It will be some time before a long term meaningful shift in patient, prescriber, and dispenser behaviour changes permanently – it is also a question of personal attitude towards health as well as public finances - that would finally result in an overall sustained reduction in pharmaceutical waste on a national level.

2. Extended Access with Evening & Weekend Appointments.

What actions were taken to address the priority?

Access to GP services is always a high priority on the service agenda and the Practice has been considering cost-effective ways of extending access to patients. Following a review in 2016-17, it was agreed that the Practice should reconsider at least largely financially neutral ways on extending the opening hours, with the options being to provide appointments from 8.00 AM or opening full day on Thursday or even considering Saturday morning surgery. The GPs and Practice manager worked out the costing and time commitments and it was agreed that the most viable option would be to open Thursday afternoons.

Result of actions and impact on patients and carers (including how publicised):

This thinking fortunately coincided with NHS England's decision to make DES extended hours payments conditional on opening the full five days instead of a half day closure. The Practice has therefore provided more access to its patients through remaining open for normal services until 6.30 PM on Thursday afternoons. Meanwhile, the local GP confederation has also created Hub Practices in each of its geographical localities which remain open at weekends. Appointments are accessible to all patients and booked through the reception of the Practice where a patient is normally registered. There is no issue with records merge as the clinical database is designed to automatically incorporate the consultations any patients may have at these HUB practices.

3. Registration of Patients for Online Services

What actions were taken to address the priority?

With the ever-increasing emphasis by the Department of Health-NHS England to provide more and more online accessibility to patients, whether for registration, requesting repeat medications or viewing limited personal clinical GP records, it was an obvious choice to deem this a priority for 2017-18. Besides, it has the advantage of reducing the workload of reception staff both for managing new registrations and making new as well as review appointments. It was agreed with the PPG that all members of the Practice team and the PPG would encourage as many patients as possible to sign on as possible for using online services. Patients are being encouraged to sign on by reception staff both verbally and through posters in the waiting area, the Practice leaflet, advertising in the newsletters and through the two websites.

Result of actions and impact on patients and carers (including how publicised):

The PPG and the Practice team feel that this priority should be ongoing and the advertising for improving access should be encouraged at all times. The results have been very encouraging. In 2016-17, the Practice signed on 10% of its Practice list. In 2017-18, the number has increased to 22%.

Proposed PPG Plan for 2018-19

1. To review the current structure of the Baby clinic (time and access limited at this time) and also consider the provision of a pram park.
2. To assess the cost-effectiveness of having a dedicated asthma and COPD clinic especially as the numbers are on the increase year on year and patients with sub-optimal control do need regular follow-ups.
3. To assess the cost viability of providing a water dispenser for patients in the waiting area.
4. The newsletters should be issued four times a year – in May, August, November and February. The PPG and the Practice should evaluate the cost effectiveness of sending them to the patients and come up with the best compromise between cost and effective communication.
5. The patients had asked some of the PPG members if it was feasible to have a chiropody and physiotherapy clinic at the Practice and whether it was possible to consider a private chiropodist practitioner to run a clinic here.
6. Every newsletter should highlight the fact of increasing participation of patients as there was a sense of stagnation. It was felt that recruitment of patients to attend PPG meetings was better dealt with by the receptionists as they see regular patients and can encourage them to attend the PPG meetings.
7. The Practice must urgently review patient access management in the light of increasing competition from agencies such as GP Hand.
8. The PPG and the Practice must review approaches by which to get more patients to attend NHS health checks. The issue of payment for only a fixed number of screenings per year by the local GP contract managers should be highlighted to the CCG and GP Confederation.
9. More and more patients should be signed up for using online services. Currently 22% of the Practice population are signed up although the active users are fewer in number.
10. The PPG-Practice should actively consider the use of music in the waiting area.
11. The Practice should advertise through posters and newsletters as well as on the websites about the new extended access service available at Hib Practices in City & Hackney.
12. The Practice should consider increasing the number of appointments available online.
13. The Practice should purchase MJog or iPlato to contact patients through texting.
14. Monitoring waiting time to improve patient experience – this was reviewed and found to be not so helpful in terms of cost-benefit. It would be more appropriate to review patient access in order to maximise it at all possible times. This will be a target in 2018-19.