

Tadley Medical Partnership Patient Partnership Group

Annual Patient Meeting

Held in The Link, Newchurch Road on Wednesday 3rd August 2022

Minutes

Sixty-three patients attended this meeting.

1. The Chair welcomed everyone and introduced the PPG Committee and members of TMP staff present. She asked that patients considered completing the available form to become members of the PPG and to agree to the Committee contacting them via email directly in future instead of via the Practice (for GDPR compliance). This would enable patients to be consulted about a range of issues without using any TMP time.
2. **Apologies:** E Chapman, G Jose, A Houghton, T Neighbour, B Tucker, J Aaby, M Gill, J Ryczanowski, J Woolcot, E Erskine, M Hale, D Hale and J Watson.

Of the one hundred and four patients who were given seats only fifty-six attended which meant the thirty-three on the waiting list could have attended had apologies been received.

3. **PPG Committee review** Many patients had taken the opportunity to send in questions and comments prior to the meeting. These showed that concerns locally are the same as those reported by Healthwatch Hampshire of problems of getting telephone calls answered, a lack of face-to-face appointments and the availability of appointments and methods of booking them.

Over the last three years the PPG Committee continued to meet, mostly via Zoom, and addressed various issues including providing opportunities for patients to have a voice - drop-in sessions were tried but poorly attended so discontinued, a Focus group was set up to contact a wider demographic, work has been started in conjunction with the Hurst School and the ppg4tadley@gmail.com address has received many patient messages which have been relayed to the Practice, discussed at meetings or queries answered directly. This is the easiest way to contact the Committee and is monitored regularly.

Two misconceptions have been dealt with repeatedly: the dispensary is owned by TMP but the two pharmacies are not so they operate independently, and the Community Nurses are not based in Tadley so not part of TMP and should be contacted separately.

This year the Committee has had two representatives attending the North Hampshire Clinic Commissioning Group PPG meetings (which met fortnightly though 2020 and 2021) enabling us to receive information and report our concerns directly. Thanks to those members.

The PPG section of the website has been further developed and ways to reach patients without the ability to benefit from the IT opportunities available have been discussed at every meeting.

Two other members attend the monthly Tadley Wellbeing Forum which is attended by representatives of many organisations based locally and has proved a useful place to gather and share information.

Various online trainings plus meetings with NHS and Hampshire medical groups have been attended.

A Committee member expressed concern that defibrillators locally were not being maintained so this was investigated with South Central Ambulance who are the responsible authority. All machines have been checked, listed with their locality and have a Guardian who checks them weekly.

Subgroups have worked on Communication strategies and the production of information leaflets for patients.

The Committee will continue to look for opportunities to engage with a wider cross-section of the population by developing a more active consultation group. They will be continuing current commitments to other forums in person and online and focussing on your feedback whilst developing strategies to deal with your issues in collaboration with TMP.

Practice review

Dr Newman had received all your questions and comments prior to the meeting so was able to incorporate replies into his talk.

He began by saying he was pleased to be attending a meeting of the best PPG of the best practice but the snapshot he provided of Primary care was of a tough situation where resources and personnel are severely stretched daily. He said General Practice was not in good shape prior to the pandemic having been underfunded for many years.

The TMP is quite different to how it was historically with ten partners now down to four with eight associates, mostly part-time. These twelve have personal lists but only survive with the use of locums who are more expensive and do not have a patient list. There is a shortage of GPs as people seek shorter hours and greater flexibility including the ability to work in research or a hospital for part of each week. The practice also has a range of other clinical professionals on site such as Gavin, a paramedic, who conducts home visits and works with elderly, frail patients and the three ex-ED (previously known as A and E) nurses who are Advanced Nurse Practitioners in the surgeries.

Patients have also changed and, particularly younger patients, are impatient and demand appointments when they could often use a pharmacy or self-medicate. Whilst no-one would want those in medical need to hold back

often the ones who do this as they 'don't want to bother anyone' are the ones who should be seen.

As well as the acutely unwell the Practice has seen a rise in those with mental health issues and is aware that those with chronic diseases and the 'worried well' all have a need to be seen. Review clinics for Asthma and Diabetes are running and are pre-bookable.

The practice is aware of the frustration of patients over appointments. On Monday 250 acute requests were received and Tuesday 200. A new telephone system is being installed soon that will mean calls will no longer drop off but callers will instead be told their position in the queue. Calling in through the middle of the day means the lines are less busy for non-urgent messages. Not everyone wants to tell the receptionist their problems but the questions are designed to tease out whether the issue is urgent, serious, routine or administrative so the appropriate response may be offered. Some conditions have a red flag on the IT system so giving a name is sufficient to alert the person answering the call.

E-consult was a huge success but this brought the problem of a lack of time to deal with all the forms (some patients sent three a day) so, whilst this form of communication will be part of the future, for now it is switched off when there is no chance of requests being actioned within a reasonable timescale.

In July there were 8000 patient consultations and 40% of these appointments were Face-to-face and 60% were telephone appointments. Last week alone, 10% of patients contacted the Practice. Patients do not always understand that, since the triage system ended, the telephone call is the appointment. Bookable telephone appointments with a choice of doctor will be available online soon followed later by some face-to-face appointments.

TMP is part of the Rural West (Hampshire) Primary Care Network along with Watership Down Health. Watership Down comprises the surgeries at Oakley, Overton and Kingsclere. There will be NO merger with TMP but collaboration and sharing of staff such as a physiotherapist already takes place. Government policy is encouraging networks to share appointments but here that is not practical unless someone is willing to travel further for an earlier appointment. The six networks around Basingstoke jointly set up the vaccine hub at Chineham and are currently working out of the old Laura Ashley shop in Festival Place. Government policy is also to ask practices to operate 8am to 8 pm and on a Saturday so this venue may be the location for some of these additional appointments

People are concerned that Operose, a US company managing some of the Basingstoke practices (often with a poor press), may take over TMP which has no intention of working with them in any way.

Dr Newman said that the staff enjoy what they do and want to keep doing it but he felt he must make patients understand the difficulties being experienced by Primary Care currently. He appreciated the complaints received as it enables change to take place. A good way to effect change is through the PPG Committee.

Q and A session

In response to questions from the audience Dr Newman gave the following answers:

- Referrals to the hospitals by the GP take a long time because of the backlog from the pandemic. The list is moving but slowly.
- Although Tadley is growing, TMP could not afford new premises which is why alterations are being made at Holmwood to free up space for more consultation rooms. The number of patients has been stable for years at around 20,000.
- Other practices have a similar problem with space e.g. Chineham has portakabins in the car park yet the CCG blocked their wish to expand. Health officials are slow to get involved at the planning stage of new estates.
- There are increasing tiers in the NHS. The system is reverting to one integrated care system (ICS) run by a Board. In North and Mid Hampshire doctors have fought to get two GPs on this. Primary Care has a good relationship with the North Hampshire Hospitals Trust and their CEO, Alex Whitfield, is on the Board. However, ICS planning is still vague.
- The delay in completing a form for an employer, mentioned by a patient on behalf of his daughter, will be investigated along with the process involved in this type of admin request along with how it would work if a patient applied to the private Candover Clinic. Would their notes be made available? Dr Newman apologised for the delay.
- He said he would be grateful for information on the 111 service as people reported confusion and finding themselves 'in a loop' between there and the GP if the Practice is still open. However, TMP may be overwhelmed at a given time so directing patients elsewhere. The doctors are completing thirty consultations a day and there comes a point at which it is unsafe to take on more. During the day 111 has access to GP appointments at TMP.
- 111 should be warning the NHH if a patient is being sent there so they should not arrive and find the department locked.
- If a patient is asked to travel to Hook it is because there was a reorganisation at the NHH taking the space used by the out of hours GP service which also merged with the Frimley Park hospital service. Hook was chosen as halfway between the two hospitals.
- Dr Newman was grateful that so many patients are supportive and helpful. He plans to go away and think about the various offers of

practical help made. However, it is a community problem with older people (most of the audience!) using the service appropriately already.

- The average suggested number of patients per full time GP list is 1750.
- The Well being Forum has offered useful connections to TMP and increasing community support is taking some of the load away from TMP where there is a more appropriate organisation.
- Prescriptions must be placed monthly as the previous system of three or six months was too wasteful. Repeat dispensing might be the answer so ask at the pharmacy who will set it up for you.
- There are blood test appointments available at the practice but able-bodied patients are encouraged to attend the hospital when they can.
- If you need a blood test for your annual medication review check with Reception that a request is on the system so the results are available at the time of the review.
- We may share appointments with Watership Down but not with Mortimer Surgery as that is in West Berkshire. Some patients will continue to be referred to The Royal Berkshire Hospital.

Closing Comments

The Chair again thanked the audience for attending and asked anyone interested in filling one of the three vacancies on the PPG Committee to remain behind at the end.

H Metcalfe

11th August 2022