

TRAFALGAR MEDICAL GROUP PRACTICE PATIENT PARTICIPATION GROUP

You are cordially invited to the Meeting of the Trafalgar Medical Group Practice Patient Participation Group which is be held at **5pm on Wednesday 15th February 2023 at Eastney Health Centre.**

As the meeting is in an NHS building everyone attending the meeting is requested to wear a face mask

AGENDA

1. WELCOME

2. MINUTES

To agree the Minutes of the Meeting held on 26 October 2022

3. PRACTICE UPDATE

To receive an update from the Practice

4. CHAIRMAN'S STATEMENT

5. PATIENT EXPERIENCE MANAGER

To receive a presentation from Daryl Whitehead

6. WRITTEN QUESTIONS AND ANSWERS

7. CONSENT/POWER OF ATTORNEY

8. FUTURE MEETINGS

- a. Future Meetings meeting of the PPG have been arranged for 28 June 2023 and 25 October 2023
- b. To give consideration to topics for future meetings.

NOTE: THE MEETING IS SCHEDULED TO FINISH BY 6.15PM

If you have any questions about the Practice, Please let Sally Atkins have these by 1st February 2023, these will be read out at the meeting together with the answers, personal questions cannot be considered at the meeting

At the Meeting of the Trafalgar Medical Group Practice Patient Participation Group held at Eastney Health Centre on Wednesday 29 June 2022

PRESENT

David Pryke – Chairman

Mrs. Sally Atkins – Nurse Administration Manager

Dr. Penny Wilson

Sister Sam King – Nurse Manager

Ms. Astrid Brown, Miss Annette Chipperfield, Dr. Latha Davda, Mr. John Doughty, Mrs. June Glass, Miss Anna Hickmore, Mrs. Pat Huxtable, Ms. Pam Lander- Brinkley, Mr. Robin Lander-Brinkley, Mr. Magan Patel, Mrs. Shanta Patel, Mrs. Jayne Pryke, Mr. David Steel, Mrs. Anne Stockham, Miss Elizabeth Walthen, Mr. Derek Wynne,

Apologies from: Mrs. Joan Kooner and Mr. Terry Wilson - The Chairman said that Terry's eyesight was now too poor to continue coming to these meetings and on behalf of everyone wished him well for the future

1. WELCOME

The Chairman welcomed everyone to the meeting and thanked Latha Davda, Anna Hickmore and Liz Waltham from the University of Portsmouth Dental Academy, Dr. Penny Wilson, and our nurse manager Sister Sam King for giving up their time to attend this meeting

He pointed out that any questions for the practice should be sent in advance of the meeting which was to try and ensure that the questions could be fully answered as there was not always an appropriate member of staff at the meeting to give an answer. This would happen for all future meetings.

He also reminded everyone that the meeting was not a forum to discuss personal issues and that these should be directed direct to the Practice.

2. MINUTES

The Minutes of the meeting held on 23 February 2022 were agreed as a correct record.

3. ORAL HEALTH

The Chairman welcomed Dr. Latha Davda (Dentist), Anna Hickmore (Staff Dental Nurse) and Liz Walther (Student) from the Portsmouth University Dental Academy. Anna gave the presentation: -

Tooth decay and its effects which included poor aesthetics, pain, infection and extraction. - this could be prevented by brushing teeth twice a day for 2 minutes, one snack between meals and reducing sugar

Root Caries which was decay at the gum margins which was faster to progress and harder to treat and older people were at higher risk.

Gingivitis (Bleeding Gums) – this was not normal and is caused by plaque and or calculus this condition was reversible and could be prevented the same way as avoiding decay. 20% of gingivitis cases progress to periodontitis (gum disease)

which is irreversible it goes deep into the pockets. The risk factors were smoking/vaping poor diet and stress. The effects of periodontitis included tooth mobility (wanky teeth), tooth loss poor aesthetics/function resulting in the need for dentures or implants.

Fluoride could be prevention of tooth decay, most toothpastes contain 1450ppm and fluoride mouth washes were available. Children under 7 should brush their teeth and spit out, they should not rinse and children older than 7 and adults should brush their teeth and rinse with fluoride mouth wash. Dentists, hygienists and dental nurses could apply fluoride varnish in the practice.

Latha said that oral health effects on general health were linked with diabetes and heart disease. Oral cancer could also be an outcome, this had a 5 year survival rate. About 95% of all oral cancers occur at the age of 40 but the average age of diagnosis was 60 smoking and alcohol were risk factors

Anna said that it was important to look at oral health as a gateway to the rest of the body.

The Chairman thanked Latha, Anna and Liz for their presentation

4. CHAIRMAN'S STATEMENT

The Chairman said that members have read in the press recently that Portsmouth has the highest number of patients per GP in the country. This put a great deal of pressure on all of our GPs in the practice, but it was not only the GPs that had to cope with all of these patients it gave to rise to increase pressure on nurses, receptionists and to all staff at the practice. They all work exceedingly hard trying to deal with the patients and also still had to put up with abuse from some patients. Everyone would agree that abuse to the staff is completely unacceptable and with the workload that our staff had it couldn't be easy. He asked everyone to be kind and considerate to all of the staff at the practice as they were with us.

He also said that members would have seen in the press that patients were no longer required to wear face masks when attending surgeries. The Practice has asked that patients continue to wear face masks for appointments where possible.

5. WRITTEN QUESTIONS AND ANSWERS

a. Sharps Boxes

There had been a recent issue about sharps forms - A patient needs to complete a form for sharps boxes collection which are available from the surgeries to fill in and return to Portsmouth City Council, if necessary, a patient can telephone the necessary information through to the practice and the information will then be emailed to Portsmouth City Council.

Portsmouth City Council does have a website that gives information about sharps boxes and the necessary forms can be completed on its website

b. GP Follow up Appointments

If at an appointment a doctor advises a two week review, why can they or the receptionist not make the follow up appointment in the surgery's diary on that visit – why must the patient return to the start which can be arduous and time consuming?

The GP would normally send a message to reception to do this. If a GP advises you of this, you can either check with them or go straight to reception to book the appointment or have it put as a task reminder if the rota is not yet on the system

c. Appointment System

Why are we not returning to the pre Covid appointment system?

Sally had spoken to Dr. Singh regarding the appointment system and was advised that the present system was more efficient. The Practice still does face to face appointments if the GP thinks that it is required after speaking to the patient. Most issues can be dealt with on the phone. This system keeps the practice running as efficiently as possible and enables GPs to deal with more patients. All GP surgeries

have changed many times over the years, and it is understood that most surgeries now carry out the same system.

d. Telephone System

Is the Practice happy with the new telephone system, is it working as intended and is everyone familiar with it?

Having listened to complaints the practice has continued to upgrade the system. All staff answering phones will log out when they leave their stations – it is thought that this did not always happen, and patients were left waiting longer. There is a message put on the system when there are no more GP appointments available on that day but unfortunately if you are already in the queue, you will not get this message. If you get the engaged tone, it means that all 20 lines coming it to the surgery are in use at that time. Some patients are still not listening to the options correctly, they are pressing any button to get an appointment when it clearly states that you will not get an appointment on any other line. When this happens calls for an appointment cannot be transferred, and the patient will need to redial and start again.

The Chairman said that he had tested the system and that it was working efficiently.

e. Doctor Patient Ratio

What is the practice's current doctor/patient ratio for our community and is it enough?

The press numbers that were advertised 2483 per GP are incorrect for this practice. We currently have 14 GPs which include 7 partners and 7 salaried. The ratio is 1885 per GP. We are not allowed to close our books for new patients and are trying to employ new GPs/locums. Dr. Singh had said that there were normally 30 new GPs that would come from Queen Alexandra Hospital each August, however last August there was only 2. 16 years ago, there were 28 practices in Portsmouth now there were only 11 – some due to mergers to survive. The Practice is advertising for more GPs but there were no applicants to date.

We continue to try to reduce the work of the GPs by having a team of administrators, there is also a 7 member workflow/admin team who deal with all paperwork coming into the practice as well as e-consults, the website and online inquiries which has many requests for different things

E-consults are misused to request appointments and prescriptions – these are then wasted. The e-consult system closes after a certain number are received. A member of the workflow team deals with the administration of them and sends them to the GPs. The GPs deal with these as part of their contract along with their other work

6. PRACTICE UPDATE

Sally Atkins reported that the Practice now had a Social Prescriber, - Kate Prowse, a physiotherapist (by referral only) – Ben Cairns. There was also a growing prescribing team, and the practice was advertising for another pharmacist.

As from 1 July 2022 Talking Change would be offering Cognitive Behaviour therapy for Insomnia as another form of therapy available for patients.

Sister Sam King said that there were 2 Health Care assistants leaving shortly and 2 fully trained Health Care Assistants would be starting shortly. There were currently 8 nurses including 1 nurse practitioner and the Practice was advertising for another nurse practitioner.

Staff morale was not very good, there had been receptionists crying almost daily because of the abuse directed to them. They had been sworn and shouted at, both in person and on the phone. Receptionists have left because they were unable to cope anymore. As a result, there had been a number of new receptionists, and everyone was asked to be patient and kind to them. It was not their fault if there were no appointments left.

The demands on the GPs were unprecedented and everyone was trying their best to deliver a service.

7. FUTURE MEETINGS

Future meetings had been arranged for 26 October 2022 and 15 February 2023 and it was hoped that at one of these meetings there would be a presentation on healthy eating