

Belmont Hill Patient Participation Group 2015-16

2nd Meeting Minutes – 29 October 2015

Present: Dr Gail Holloway, Oscar Millar, Khaled Chowdhury, Christopher Towers, Barbara Lawton, Lesley Dean, Laurene Brooks

Apologies: Geoff Carr, Hilary Ball, Penelope Caudell, Sophie Dean,

Agenda:

1. Welcome & Apologies.
 2. Changes to Dr Holloway's and Dr Pierpoint's clinics – both doctors are reducing their hours – Dr Holloway will work 2 sessions a week on a Friday and Dr Pierpoint will work Tuesday, Wednesday and Thursday. A new salaried GP, Dr Yuqi Huang will be working Mondays and Fridays. All changes will be effective as of Monday 2 November 2015. Dr Nguyen will also be returning from paternity leave on this date.
 3. 0844 number – discussion re completely removing this number from all advertisements – already removed from website and NHS Choices. Survey results suggest that patients very strongly believe a queuing system is important to allow fair access to GP. Discussion of pros and cons and possible alternatives.
 4. Possible new security precautions in building – CCTV, security light in front car park & new locks.
 5. CCG community projects. The CCG has suggested a number of potential new schemes to be developed within Lewisham neighbourhoods. Currently taking feedback on suggestions from primary care providers and service users.
 6. Flu clinic update – Were patients satisfied with the walk-in clinics – any suggestions for next year?
 7. Anything further...
- Dr Holloway welcomed all attendees, welcomes and apologies.
 - 1. 1st item on the agenda was to discuss new GP starting at the practice. Dr Holloway and Dr Pierpoint are both reducing their hours and so a new salaried doctor has been employed to make up the sessions. Dr Holloway will be working all day Friday. Dr Pierpoint will be working Tuesday-Thursday.
 - The new doctor, Dr Yuqi Huang, will work all day Monday and Friday from Dr Pierpoint's room.
 - Some members of the group expressed concern that there will be a shortage of appointments with female doctors. Dr Holloway explained the process in choosing this doctor over a female doctor and it was agreed that this seemed like the most appropriate course of action.
 - 2. 2nd main point on the agenda was the 0844 premium rate number used to contact the surgery. The number was originally introduced due to a high demand for a telephone

queuing system when contacting the surgery during busy periods and operates alongside a local rate number. Due to some controversy over the often very high costs incurred when calling this number from various networks the surgery, after receiving advice from the CCG, decided to remove this number from its advertisements. It has already been removed from all online sources including the practice website and NHS Choices but before changing the practice leaflets and signage it was decided that it should be discussed with the PPG.

- A survey was carried out amongst 256 patients to determine how the numbers are used. The results showed that 50% of patients only ever used the local rate number anyway with around 20% using the 0844 number. Over 80% of patients felt that a queuing system is important to allow fair access to their GP services.
- Various alternatives to this number were explored. The surgery is tied into a contract with the telephone company, Daisy Health, for another 18 months and would be required to pay in excess of £12,000 to break this contract. For approximately £3000 the 0844 number could be changed to a local rate number.
- The matter was explained by Dr Holloway and the practice manager, Khaled Chowdhury before opening the floor to the PPG members, all of whom strongly agreed that such a premium rate number should not be used for a GP surgery. Again, all agreed that a queuing system would be very useful but not when it costs the patient so much to call as this then counteracts the idea of 'fair' access by favouring wealthier patients.
- It was decided that, while a queuing system would be favourable, the 0844 number should be completely removed from all practice material and an alternative should be sought. It was agreed that the potential costs of changing this number were too high for the surgery to pursue at this time and that the practice manager would continue to seek suitable alternatives.
- 4. Potential need for CCTV after doctor's phone and wallet stolen from clinic room. Discussed added security, patients were in favour of CCTV but obviously not in clinical spaces.
- 5. CCG Community projects discussed briefly, patients expressed interest in enhanced pharmacy services, possible in-house pharmacist to assist staff in prescribing, offer advice to GPs, medicine management.
- RACP clinic in the community – take weight off A&E – provide easy access for chest pain.
- Flu clinics very successful this year – suggestions for future. Patients suggested more clinics, possible evening clinics but otherwise very impressed – walk-in sessions operated very smoothly with minimal queues – efficient service.