

## Greenway Medical Practice PPG Meeting, 27/9/11

Present: Dr Cameron - Partner  
Pam Fortune - Practice Manager

Mr & Mrs P Barker  
Mr D Cooper  
Mrs L Wood  
Mrs Tweedie – Yates  
Mrs J Goodier

Representatives from Hollybank School

Pam Fortune welcomed those present and thanked them for taking time to attend this second meeting of the Patient Participation Group.

The minutes from the last meeting were reviewed and no amendments made

- ✚ Although the patients in attendance at this meeting were also at the launch meeting, there remains no interest in making this group more formal by electing a chair and other officials.

Pam introduced Dr Cameron and the topic for this evenings meeting which was changes in the NHS as requested by the group at the June meeting.

### Changes in the NHS, how they might affect the practice

Doctor Cameron presented a brief overview of the Health and Social Care Bill and how these might affect the Practice and the NHS as a whole. Those present were invited to discuss their own concerns and views.

The group was asked what they thought the changes meant:

- 'It's all about money'
- 'GP's will be managing the money'
- 'Practices are going to merge'
- 'Government passing responsibility'
- 'Getting rid of the NHS'
- 'Splitting things up, making a mess'
- 'It's a nightmare'
- 'Worried the practice will change'

### **Overview:**

The current financial climate means there will be no significant new money for the NHS for the foreseeable future, meaning that in order to fund new services, look after the aging population and cope with increased demand, savings will need to be made from elsewhere.

£20 billion will need to be saved over the next 2-3 years!

Idea is to save money in management costs. PCT's and SHA's scrapped by 2013, replaced by Clinical Commissioning Groups and the NHS Commissioning Board.  
Hoped that by involving GP's, who are the 'Gatekeepers' to much of NHS spending (prescriptions, hospital referrals) that the health budget can be spent in a more cost effective way.

Effect on the NHS: increased competition  
job losses  
less central responsibility and planning of services  
provision of health care more fragmented

Effect on GP's: more responsibility for managing budgets for medication and referrals to hospital  
Opportunity to provide services that currently require a trip to hospital  
Closer working with neighbouring practices  
lots more work, less pay!

Possible good things: less spent on management, more on patient care  
GP's better placed to make decisions on how money spent, not politicians.  
competition might improve standards  
closer working with Local Authorities – less duplication  
Practices working together, sharing good practice  
Patients more involved  
Practice can have a say in local service planning  
Opportunity for practice to offer services more locally.

Possible Bad things: competition can lead to cost cutting and decline in quality.  
Failure of existing services  
No co-ordination in national crises  
Postcode lotteries  
Tension between clinicians, and between patients and clinicians  
Conflicts of interest

### **How is the practice involved?**

Those present were surprised to find the practice was not represented on the CCG board!

Practice a member of North Kirklees Health Alliance CCG, but has not, and has no plans to 'merge' with any other practice.

Increasing awareness of the costs of medication and referrals.

Attending regular meetings with other practices.

Looking at a number of areas to improve efficiency and improve quality:

- Antibiotic prescribing
- Anti-inflammatory drug prescribing
- Use of pain killers
- Improving asthma care for children

### **Concerns discussed**

All present value the current service being provided by the practice, and don't want anything to change.

Dr Cameron reassured the meeting that The Practice is not planning any great changes to how it functions in the near future. He acknowledged that increasing demand, both from patients and from new responsibilities being passed to the practice, places growing strain on it. He explained that he hoped that the PPG would help the Practice during this difficult time.

The concern that patients' choice might be restricted, having to see a cheaper provider, was raised. It was felt that this might be the case, but it would be hoped that such services would be of the same quality as those currently being provided.

Concerns were raised that the continuity of care for residents at Hollybank School might be compromised, if they were forced to register with different GP's. It was explained that this was unlikely to happen, and that the CCG would not be responsible for commissioning primary care in any case. The Practice has no plans to stop providing care for residents at Hollybank School.

### **Moving things forward**

1. Need for broader involvement in PPG discussed. A number of ideas were put forward:

'Virtual' PPG, where patients are invited to express views via e-mail

Face to face meetings valued: will continue

Using other ways of publicising group: posters in Tesco's, chemists, library, schools, Surestart centre  
article in Spenborough Guardian  
repeat prescriptions (not all patients may receive counterfoil from chemist)

2. Practice and Group need to establish priorities: needs to come with an area to work on: could be something big, e.g. telephone access to something small like provision of coat hooks in toilets! Ideas please
3. Once area agreed, need to produce a questionnaire to go out to wider population
4. Discuss results with PPG
5. Publicise actions taken and achievements made
6. Need to publish 'Patient Participation report on website, detailing all of the above

Next meeting: December 2011.