

# Minutes of Primrose Bank Medical Centre Patient Participation Group Meeting Held on Thursday 30<sup>th</sup> March 2017

## **Present**

Staff – Vivienne Smith (Receptionist), Julie Bartram (secretary).

Patients – Pamela Chadwick, Kenneth Riley, Shila Chudasama, Graham Haworth, Val Haworth, Linda Cronshaw, Raman Mistry, Patricia Cook.

Also attending Khalil Rifai on behalf of Specsavers (Audiology).

**Apologies** – John Chadwick Roger Brookens, Amrit Kaur, Ram Sharma and Val Edge.

**Welcome** - Pam welcomed all to the meeting and thanked Khalil for coming to talk to us.

**Minutes of last meeting** – All ok

## **Matters arising**

In the last meeting we had discussed the CQC visit which had just taken place and wanted to know the outcome. We informed the patients that the report had been received and the surgery had received a “good” rating. There were some minor changes suggested in the report which have now been implemented. **Just to note that posters were put up in the waiting room within a couple of weeks of receiving the rating, to inform patients.**

A&E visit survey – At the last meeting Pam and Shila had volunteered to undertake a survey of patients visiting A&E, but this had been cancelled twice and they weren’t sure why. Having spoken to Helen **I can confirm that this was because the hospital had refused permission.**

Message machine – “appointment” still spelt incorrectly on the machine. **I have reminded Helen.**

## **Specsavers - Audiology**

Khal came to talk to us to outline the hearing aid service offered at Specsavers where he is an audiologist. This service has been offered since 2010 when it was opened to the community. It is said that hearing loss affects around 10 million people in the UK and large increases are estimated as people are living longer. However of these 10 million only about 2 million wear hearing aids, which is probably partly due to the stigma attached. However hearing aids have moved on a lot, in technology and in size, and are hardly noticeable. Hearing difficulty can lead to other problems, such as social isolation, as sufferers do not wish to go out where they cannot join in and mishear what is being said. They can also be suspected of having memory loss/dementia when it is assumed they have forgotten what they have been told, when in fact it is just that they hadn’t heard what was said to them, probably nodding in agreement rather than admitting they couldn’t hear. Specsavers, by increasing awareness are trying to tackle the barriers and encourage more people to access the service.

Khal pointed out that they do offer a 7 day/week service for basic maintenance of hearing aids (such as for blocked tubes). Ken said he had used this service and it is very good. He had also been very pleased with the after- care service, the battery replacement by post.

Khal said they are leading more to battery replacement when attending an annual service in the shop now, as people had been stockpiling batteries causing a lot of wastage.

Referral for their service is through the GP and can be done via the Choose & Book service. However he also does home visits if needed. Referrals for this should be done direct and not through C&B.

Pam said that she finds that people talk to the hard of hearing as if they are thick. By removing the stigma of going to the hospital hopefully people will not feel the same and will access the service more readily.

Graham told of the speed of the service; he was referred on Monday and was seen on the Thursday. He said it was a 1<sup>st</sup> class service.

One thing putting patients off attending Specsavers rather than the hospital was that they thought that they would have to pay for their hearing aids, but this is not the case. It is a free NHS service. Giving patients a choice of where they want to go. There are clinics in Blackburn 6 days a week with a trained audiologist, and there are also trained hearing care assistants to help with hearing aid problems and maintenance. When referred to Specsavers they do a full clinical assessment with fitting of the hearing aids if possible on the same day (85-90% are fitted on the same day). They then get a phone call after 2 weeks to check they are ok. There are some contraindications to having the hearing aid fitted but these patients are referred on.

Hearing aids are very neat and discreet. They are very highly technical and are worth £1100 to £1200 each. One set is given free of charge on the NHS but there is a fee of £68 for replacement of a lost hearing aid (Private hearing aids are made to measure so need to be sent off to be made). The records kept show the settings so replacements can be done quickly.

When referred you are under their care for 3 years, after which you are recalled for another hearing assessment. If there is no change you keep the same hearing aids. However if there is a change and new hearing aids are needed you will need a fresh referral from the GP.

A question was asked about using the phone as some people struggle with the phone. Khal advised that they hold the phone to the back of the ear as that is where the microphone is situated, and not within the ear.

Per the follow-up Khal said the hearing aids are very comfortable and people forget that they have them in, he said that their figures show that after 12 months of having a hearing aid 99% are still wearing them.

Pam thanked Khal for a very informative presentation, he then left the meeting.

### **Prescriptions on Demand**

This new procedure started in November. Per Blackburn CQC pharmacies are no longer able to order medications for patients. To facilitate this we now take orders for repeat medications over the telephone, between 10:00 and 11:30 and between 12:30 and 3:00.

We ask that patients tell us exactly which medications they need, rather than just saying they need everything, and by going through them it prevents medications being ordered that are not needed. In November the CQC estimated that they had saved £2000 and by the end of December they estimate savings of £14892. Patients can also order repeat medications on-line.

There are proposals to try to stop people ordering over the counter type medications for minor ailments, due to the cost to the NHS. Viv handed out some information sheets about

the type of medications included, eg paracetamol, gaviscon etc. Shila said that she has pain management problem and needs painkillers but these can only be bought over the counter in very small quantities so it would be very inconvenient for her. I pointed out that these proposals are only for minor ailments, and are not aimed at patients with a chronic problem where the medications are required long-term.

Viv also handed out some feedback forms where they could show whether they agree with the restrictions, but pointed out that they will need to fill these out on line as the closing date is tomorrow.

Linda said that at the food bank they also try to collect some of these medications for those who cannot afford to buy them.

### **Any other Business**

**Late attenders:** A question was asked as to how this policy is working. Viv said that we still have some problems, but in general it is working well. We try to stick to the 5 minute rule, but if a patient rings with a valid reason to say that they will be a few minutes late we do try to accommodate them. However we still have problems with patients failing to attend their appointment and not ringing to cancel.

**Coffee morning:** This year's coffee morning is scheduled for Thursday 5<sup>th</sup> October. We have changed from Friday as this is mosque day in attempt to get more people to attend. We also plan to hold it in the treatment room and waiting room as the feedback received was that people hadn't come as they struggled with the stairs. Pam said that she would be happy to promote this and asked that we bring some raffle tickets to the next meeting to give out for the patient's participation group to sell. Viv also asked for donations as raffle prizes.

**On-line registrations:** In January we had 53 more patients registered for our on-line booking/ prescription ordering service. We do not have the figures for February or March as yet, but we have been promoting this.

**Next Meeting:** Per the previous minutes, the next 2 meetings are to be chaired by Val Edge, with Pam as deputy. Then Graham said he was willing to help and would chair the following 2 meetings. Pam asked if I could attend and do the minutes again, and if Viv could attend on behalf of the surgery. We both agreed to this. It was also requested that we bring 4 or 5 copies of the previous minutes to the meetings; Viv said she would see to that.

Pamela thanked everyone for attending.

**Date of Next Meeting – Thursday 7<sup>th</sup> September 2017 @ 12:30**