

# Launceston Medical Centre Patient Participation Group (PPG)

Minutes of the Meeting, 20 July, 2017, at Launceston Medical Centre

## 1. Chairman's welcome and introductions

Chairman Maureen Amy welcomed Dawn Rogers, Rosemary Bromwich, Cym Downing, Joan Heaton, Patty Taylor (secretary), Les Whaley, Jo Keogh and Peter Harper (practice business manager).

## 2. Apologies

There were apologies from Nik Burgess, Pam Davey (vice chairman), Gill Brown, Elizabeth L'Estrange West, Steve Dymond and Andy Yardley.

## 3. Minutes of last meeting

The minutes from 25 May, 2017, were agreed.

## 4. Update on medical centre expansion plans and other relevant medical centre matters

Peter said the medical centre was still waiting for the publication of the Premises Costs Directions (relating to NHS funding towards the actual build) and the revised terms for purchase of the land from NHS Property Services. The delays were not critical at the moment, he said, because the due diligence processes that had to be completed before any work could commence were underway and tenders had been invited for the building costs.

However, he warned that the delays on decisions for funding and the land purchase were becoming of concern and that after the summer it might be necessary to enlist the help of our MP to get things moving. The PPG said it was ready to support the medical centre in putting pressure on the authorities.

Jo asked whether there was a cut-off point for the surgery in accepting new patients and, if so, what would it be.

Peter replied that currently the ratio of doctors to patients was acceptable but real the problem with the increasing numbers of patients was the actual space available at the medical centre for consultations. Rosemary asked whether the medical centre could make use of rooms at Launceston Hospital in the short term. The chairman said the idea had been investigated but that rooms at the hospital were only available on an ad hoc basis and therefore were not suitable for regular surgeries.

### Staff

A new lady doctor had joined the practice earlier in July and was working two days a week and a new receptionist.

Peter said that the practice was continuing to interview potential new medical staff in preparation for the expanded premises. Given the shortage of doctors nationally, it was not sensible to leave all recruitment until the new build was finished.

### General

Les asked whether Peter and staff from Launceston Medical Centre visited other medical centres to share information and see what went on. Peter replied that he, and other members of staff, did sometimes go to other centres but there were also many meetings and other forums in which they shared information.

## 5. IT update

### Arrivée System

Peter said the first of the two new Arrivée Systems for patient check-in had been introduced about three weeks earlier. But because the system was proving only about 90% reliable, it had been decided to revert to the old check-in system while the manufacturers sorted out the glitches with Arrivée. It was estimated that work would take about a month.

## Patient online registration

A total of 370 patients were now registered with Systmonline. It was planned to carry out an exercise in the not-too-distant future to encourage all patients to go through the process of changing to Systmonline because it was not possible to do the change-over automatically.

6. Report of meeting with Mrs Su Buse, Matron of Launceston Hospital and discussion on next steps  
The group discussed the report of the meeting with matron. As the posters giving details of opening times for the Minor Injuries Unit had not arrived, it was agreed that the chairman and secretary should follow this up with matron. The group felt that it would be useful for the posters to be displayed at other locations than just the surgery: parish magazines/newsletters; library; tourist information centre; schools; halls, and information packs for new home owners on the estates being built.

It was also felt that patients were not aware of the clinics and outpatient services available at Launceston Hospital and considered that it would be useful for the PPG to compile a comprehensive list, with the help of matron, to be displayed at the surgery.

Action: chairman and secretary to meet with matron to discuss the MIU poster and its distribution and a full list of clinics and services available at Launceston Hospital on display in the medical centre for patients.

7. Consideration of Dartmouth PPG's patient survey (attached) and discussion on whether a patient survey would be appropriate for our PPG.

It was agreed that a survey of Launceston Medical Centre patients was not appropriate at this time. The centre had its own on-going family and friends survey and a suggestion box scheme so there was current feedback. Previous surveys had highlighted problems that can only be resolved with the expansion of the medical centre, e.g. parking, time taken to get appointments. It was felt that there would be merit in a survey after the expansion was operational.

## 8. AOB

Press reports of recommendation that doctors prescribe medication six months at a time  
Peter responded that this recommendation went against NHS guidelines and there were too many dangers inherent in prescribing large quantities of medication for long-term use.

Is it cost-effective for doctors to prescribe aspirin, paracetamol or similar cheap medications?

Doctors prescribe medication at a stated dosage for specific conditions as required by the individual patient. It was also important that doctors knew what medication patients were taking – the effects of some 'over the counter' medications could impact on prescribed medication or health conditions. The payment for prescriptions went to the Government, not the doctors/medical centre.

Is it common for patients to experience problems with the referral system? Who to contact if there are issues?

Generally the referral system works well in giving patients options for their appointments but it appears that sometimes appointments are fixed without consultation with the patient. In that case, the matter should be taken up with DRSS (Devon Referral Support Services).

## Future of Launceston Hospital

Joan reported on two public meetings addressed by Mr Philip Confue, CEO of Cornwall NHS: St Stephen's Parish Council and a special meeting in Launceston Town Hall about the hospital. Mr Confue had said that Launceston Hospital was too important to close. However, he advised people to lobby hard for Launceston to become one of Cornwall's urgent care centres.

It was decided that the PPG should support a bid for Launceston to become an urgent care centre and that the secretary should prepare a letter to send to our MP and copied to Cornwall Council, Launceston Town Council, the Launceston Community Network Group, and Kernow Commissioning Group.

Action: secretary to draft letter for the MP

#### Contact for League of Friends

Jo said that Mrs Enys Broad was the secretary of Launceston Hospital League of Friends. It was agreed that our secretary should contact Mrs Broad to invite the League of Friends to send a representative to the PPG as the League no longer had a member on our group.

Action: secretary to contact Mrs Broad

Cym informed members that the Memory Café would be celebrating its 10th anniversary at the hall on Saturday, 14th October, from 2-4pm. All members welcome to attend and support the event.

Date of next meeting: Thursday, 5 October, at 6pm at the Medical Centre.

