

DRS WEBSTER, TWOMEY & LOWCOCK

PATIENT PARTICIPATION GROUP

Minutes of Meeting Held on 27th March 2014 at Rainford Health Centre

Present On Behalf of the Practice

Dr Ulrich Veltkamp, GP

Mrs Helen Sansbury, Practice Manager

Present Representing Patient Group

Mrs S Corfe

Mr D Cowley

Mr P Conachey

Mrs L Conachey

Mrs L Burns

Ms S Kimberley

Mrs J Shaw

Mr K Gratton

Apologies for Absence

Ms J Lloyd

Mr J Rosbotham

Mr W Singleton

Mr B Marten

Mrs J Marten

Minutes of the previous meeting were agreed to be a true and accurate record of discussions.

Matters Arising

Helen informed the meeting that the new telephone system had been installed. Although we were not using all the features of the new system it was important to inform patients that we now have two telephone numbers to contact the surgery on:-

01744 882855 and 01744 457361.

The practice website and all other forms of communication will be amended to raise awareness of the two numbers.

Results of Patient Survey

Helen circulated the report showing the results of the patient survey on whether we should embargo or not the early appointments. The results of the survey showed a slight majority of patients wishing the appointments to be normal pre-bookable appointments. Discussion took place around the results of the survey being just what we had discussed previously at the meeting on 19th December 2013 . It was agreed that the practice would reconfigure the appointments and commence as soon as practically possible.

Near Patient Testing

Dr Veltkamp spoke about Near Patient Testing. He explained that a number of drugs that are prescribed are both very effective and dangerous. In order to spot dangerous effects early it is necessary to carry out regular blood test. This can be quite frequent and cumbersome for patients. As a consequence a minority of patients do not attend for their tests. This resulted in the death of some patients in the UK who carried on taking Warfarin not knowing that their blood had become too thin. Therefore GPs are now required to ask for the “yellow booklet” (a record of the patient’s blood results) before they prescribe Warfarin. As most patients request their prescription through the chemist or on-line this requirement has become difficult to implement. The situation will improve when the practice introduces a practice based testing system for Warfarin. But there will be patients who still need to be tested in the hospital. Various solutions were discussed, but it became clear that all of them appear to have serious drawbacks.

Even where the practice is aware of patients not attending for their check-ups it can be difficult to persuade patients to come for their necessary tests. Receptionists were given short shrift when they rang patients to remind them of the need to have a blood test. It was agreed that patients need to take a degree of responsibility for their own well-being, but it would be useful if it was easier to get the tests done and patients did not have to wait so long in the phlebotomy clinic.

Any other business

Dennis Cowley asked Dr Veltkamp about the use of Statins in all patients over the age of 50

Dr Veltkamp responded that prescribing was always a weighing up of risks against benefits. Statins reduced the risk of heart attacks by at least a third. This was important where someone had a high risk of getting a heart attack. Where the risk is very small to start with, a reduction of that small risk by a third is not of much benefit and in those cases this risk of having unwanted effects might be seen as unacceptable. Doctors were therefore quite sceptical about policies to widen the prescription of Statins to cover patients at relatively low risk of heart disease.

Date and Time of Next Meeting

Monday 30th June 2014, 6.30 pm – 7.30 pm at Rainford Health Centre