# Reading Patient Voice Group Draft Minutes



## **Reading locality**

## Treasurer: Jill Lake Information Officer: Tom Lake Membership Officer: Tom Lake Data Officer: Francis Brown

## 1 Welcome and Apologies

Date	15 <sup>th</sup> May 2024
Location	Committee Room 4b, Civic Offices, Reading & online
Present	Paul Williams, Milman Road Surgery
	Jill Lake, Pembroke Surgery
	Francis Brown, Guest, Balmore Park
	Cathy Cousins, Pembroke Surgery
	John Walford, University Health Group
	Dr Prem Sharma, Chatham Street
	Raymond Emmet,
	John Starr, Pembroke
	Geoffrey Million, Guest, Balmore Park
	Joan Lloyd, Balmore Park
	Tom Lake, Pembroke Surgery
	Brian Morley, University Health Centre
	Mark Drukker, Longbarn Lane
	Deirdre Drukker, Longbarn Lane
	Alice Kunjappy-Clifton, Healthwatch Reading
	Simon Shaw, Healthwatch Reading
	Sunila Lobo, UHC
	Tony Lloyd, Wokingham Patient Voice
	Phil Lowry, UHC
	Shaheen Kausar, Western Elms Surgery
	Rosemary Cahill, Kintbury & Woolton Hill
Apologies	Monica Morris, Theale Surgery,
	Laurence Napier-Peele, Milman and Kennet
	Valerie Gardiner, University Medical Centre
	Catherine Mustill, Emmer Green
	Barry Dickens
	Libby Stroud, Pembroke

## 2 Pharmacy in Reading and BOB

David Dean, Chief Officer of the Thames Valley Pharmaceutical Alliance spoke and then answered questions, assisted by Kevin Barnes, Contract Support Officer.

Please see the associated slides for complete information.

Thames Valley Pharmaceutical Alliance is an organisation of the pharmacies in the area supported by a small levy on prescriptions dispensed. It is analogous to the Local Medical Committee for GP practices. It is not a charity. It has 2.5 (FTE) employees.

Reading has 29 community pharmacies. 2 are "100 hour" pharmacies (currently permitted to be open for only 72 hours). Oxford Road Pharmacy is still actually open for 100 hours a week.

We also have the Orange Pharmacy - a distance selling pharmacy.

#### ESSENTIAL SERVICES

**Discharge Medicines Service** Patients are referred by a provider trust (e.g. Royal Berks) on discharge and are given advice and guidance on their medication. This service stops about 1 in 10 being readmitted. Mostly for patients with complex medication, the service supports acclimitasation and gatekeeping.

Medicines Disposal Too much coming back.

Healthy living Pharmacist can give advice and signposting

Paper and Electronic Dispensing 80% of prescriptions now electronic and 15% electronic repeats.

#### ADVANCED SERVICES

Pharmacy First The new service for 7 specific minor ailments described in more detail below

#### Flu and Covid-19 vaccinations

Contraception

Hypertension Blood pressure check - GPs sending patients for regular checks - workoing well in Reading

 $\mathbf{New\ meds}$  - can have a consultation within first 3 months

Covid-19 Lateral Flow Test free for eligible patients

Smoking cessation

LOCALLY COMMISSIONED SERVICES

#### Morning after pill

Substance misuse Needle exchange and supervised consumption

urgent meds Palliative drugs and COVID-19 antivirals

Minor ailments Over the counter drugs for minor illnesses iprovided for patients on lower income e.g. head lice treeatments, athlete's foot treatment.

#### Pharmacy First Service

Advice and drugs for 7 minor conditions - by referral (GP or 111 etc) or walk-in.

#### The Seven Conditions

Most are treated there and then. 10% need to be advised to pay another visit to their GP for further help. 90% of pharmacies signed up in 1st month. Saving GPs 10M appts/year.

All Reading Pharmacies are registered for this.

So far in Reading: 1500 GP referrals - possibly another 4500 from 111 and walk-in

Half of referrals and walk-ins from deprived areas.

Workload - 2.6m/month 5% up pa

Top 3: Sore throat - fenale urinary tract infection (UTI) - sinusitis Bottom 4: middle ear infection - infected insect bites - shingles - impetigo

#### State of Pharmacy

Supply chain - awful at the moment - some meds you can't get now.

Some pharmacies are losing money on dispensing certain meds.

Funding - zero incrase in 9 years - Costs up by 40Working with PCNs, GPs and Trusts and PPG/Healthwatch

Discussion

Alice Kunjappy-Clifton: Not everyone knows about Pharmacy First – can we help get the message out? David Dean: We are trying to get the BOB comms team to act especially in deprived areas as in- Reading. Nationanlly pharmacists are trying to get NHS England to do more publicity. Alice Kunjappy-Clifton: Some communities have not heard about it.

Jill Lake: I live just 200yards from a pharmacy. Do you have to have a GP appointment to get a referral? David Dean: No - the receptionist can send the referral to a pharmacy of the patient's choice. Jill Lake: It is unfortunate that there is no notice on the wall in the waiting room. Nor on the door of the pharmacy. Paul Williams: With common drugs like statins the tablets are available in different forms – sometimes coated sometimes not coated - smaller and bigger tablets - easier and more difficult to swallow. What rights does the patient have to get the tablets in their preferred form?

David Dean: Variants arise when a patent expires. Big pharma have sole rights on a drug patent for 20 years from the date of filing. Then generics can be made.

Paul Williams: Can pharmacist change the choice of specific drug?

David Dean: They may be able to so if the prescription is a generic prescription.

Cathy Cousins: If pharmacist suspects a further problem do you have to make the GP appointment yourself? David Dean: Pharmaciss have access to a dedicated phone number with the GPs to ask for an emergency appt if necessary - depending on the practice. But your pharmacist can't make the appointment.

Simon Shaw: How can PPGs help?

David Dean<sup>®</sup> I am happy to talk to PPGs - and Health and Wellbeing Boards. Healthwatch will be doind a survey in September.

Rosemary Balsdon: - Is there a directory of pharmacies with information on those which require referrals or just take walk in?

David Dean: All phramacies in BOB can do it - just walk in.

David Dean: A community pharmacy is not a dispensing practice - not Pharmacy First

On Sunday - use NHS service finder or JOY app to find a pharmacist which is open.

Shaheen Kausar: I tried both Superdrug and Boots in town but the pharmacist was too busy. David Dean: That is unfortunate, Some pharmacists have second languages as a skill.

Brian Morley: Do they still have a notice on the door of pharmacies about the late pharmacist?

What sort of training do pharmacists have? David Dean: We only have notices about bank holiday pharmacies - there is no rota system any more.

Pharmacists take a 5-year pharmacy course - much is history taking and clinical examination. Continuing Prefessional Development (CPD) is required and keeps them up to date.

Francis Brown thanked David Dean and Kevin Barnes for a most interesting talk and discussion.

## 3 RBH governors report

Sunila Lobo: RBH has a significant deficit and a need to find savings, that is its biggest challenge. It is still very busy in A&E - now 450/day in A&e and admitting 100/day.

Paul Williams:: Prof. John Ashton, our public health consultant has sugested that a new hospital in Reading could be a white elephant

Sunila Lobo: We also have a focus on maternity after all we have learned about ethnic inequality and birth trauma.

### 4 Berkshire Healthcare governors report

Tom Lake: Berkshire Healthcare has once again managed to end up with a surplus - this time  $\pounds 3.8$  million. But the BOB area of the NHS as a whole has a deficit of about  $\pounds 90$  million, out of a total budget of around  $\pounds 2.5$  billion.

We recently got the results for Berkshire Healthcare of a national survey on Community Mental Health - here we have a look at where the trust has done best and worst compared with others. Perhaps notable is a poor score for following up after prescribing medications in community mental health.

## 5 Review of Friends and Family Test Results

Please see the attached sheet of results.

Francis Brown: I have tabulated results from the Friends and Families Test as issued by GP practices over 9 months. I have used only those with at least 100 responses /month. The results have been rescaled with respect to all practices giving sufficient results and eligible in England. The distribution of test results is very skewed with the median at 90% so I have rescaled the results to move the median to 50%.

To look at a few results: Twyford and South Reading are regularly poor.

Their is rising disatisfaction with our GP practices..

Balmore Park - exhibits a steep drop from Nov 23 - perhaps due to the introduction of the new online triage system.

Wokingham Rd, Emmer Green, Kintbury and Wooltton, The Boat House (Pangbourne) and Mortimer get an honourable mention.

Comments are given by about 1/3 but surgeries are reluctant to share them though they are yerribl useful.

Some have no data - e.g. Pembroke

Jill Lake: No one asked me about my appointment at Pembroke Surgery.

Francis Brown: Most surgeries send out requests to complete the FFT by text message (most common) or console near the exit. FFT service is written into the contract but no guidance on the number of submissions required. TYpical number would be 300-400/month up to 200 with comments.

Rosemary Balsdon: What about Theale? Francis Brown said there had been a data problem for that practice.

Brian Morley: EVery time I do some online ordering I get asked, "How satisfied were you with your purchase?". I am gGetting fed up with completing these forms. I attend the University Medical Centre - I was fed up but now realise it is useful.

Francs Brown: Known as fatigue.

Paul Williams: I helped with setting up FFT for Milman Road. We tried limiting numbers of people asked - first expected response via website - but didn't work - then - free text often had important info not conveyed by the single question.

Sunila Lobo: University Medical Centre seems to have only a middling result.

Francis Brown: It used to be in the high 90s but has drifted down.

Sunila Lobo:- There has been no PPG meeting at UMC for a long time - perhaps I will request one.

Jill Lake: Any incentive for doing this service?

Francis Brown: - Commissioners take scant notice unless patients emphasise it. it has 4 mentions on 1 page out of 200 in the contract. Some of the patients at some surgeries are getting a poor deal.

Ray Emmett: The senior partner at Balmore Park went on a 10-week holiday. Feel practice is not as good as it used to be. Anima - the online triage system - I used it - no appointments available. My wife rang and was told, "That's quite serious please pop in."

Francis Brown: There has been no recent PPG meeting involving a surgery staff member.

Sunila Lobo: The last PPG at UMC was hosted by Dr Elizabeth Johnston. We had a presentation about ARSS - audience anxious about new roles.

Pembroke Surgery: is proposed to have said something Non-urgent appointments have a 2-week wait. Younger people get 4-week wait even if they are quite concerned.

Shaheen Kausar: At Western Elms there is no non-urgent appointment for up to 16 weeks - I was told - phone at 8am - but that is impossible

Rosemary Cahill: In our PPG wee are looking for representatives across the demographic - not all above 60.

Francis Brown: We may be an elderly crew but usually well-connected. Central Wokingham dismissed their PPG saying they were not representative.

Brian Morley: At University Medical Centre - no PPG for a long time - since Covid? Well advertised jobs within the surgery would be good - diversity needed.

Deirdre Drukker - PPG at Longbarn Lane - not well advertised. Younger people are very busy and under pressure. Younger people need hybrid meetings.

Jill Lake: Over 60s may be representative of the users of the practice - apart from young parents.

## 6 Reading Healthwatch Report

Alice Kunjappy spoke to the attached slides, outlining Healthwatch Reading's plans for the year.

The hospital rebuild was mentioned - Alison Foster was reporting that rebuilding on the present site would be slower and more expensive than building a new hospital elsewhere. There would be a face to face consultation (workshop) on 19th June (unfortunately clashing with the next Reading Patient Voice Meeting).

## 7 AOB

- Our next meeting would be at 6pm on 19th June and the speaker will be Prof John Ashton, our public health consultant.
- We would be having a stall at Waterfest on 8th June in the Forbury Gardens. Volunteers were needed to help with

the stall - please contact Tom Lake - we need helpers for 2-hour slots starting at 10.00 to help with setting up while Tom removes his car and returns to the site.

- Self-referral is now available to Berkshire Healthcare NHS Trust for musculo-skeletal problems (for physiotherapy) as well as for mild or moderate mental distress (Talking Therapies).
- The Integrated Care Board will meet at 10am on 21st May online and in Aylesbury.
- Reading University would hold its Community Festival on Saturday 18th May on the Whiteknights campus.
- The Old People's Working Group next meets at 2pm on 5th July.
- Reading Health and Wellbeing Board next meets at 2pm on 12th July.