

August 2024

The Leat is distributed for the patients of Leatside Surgery by the patient group to provide information and news about what is happening at Leatside and also in the wider NHS.

The Leat is edited by Mike Mintrum, Graphics by Jill Lawrence.

Farewell Dylan

Dr Dylan Watkins retires in September and the LPG wish to thank him for his 26 years of service to the practice and wish him well in France.

You can read Dylan's thoughts later in the newsletter

From the Chair

Greetings to all Leatside Surgery patients

I did say in the last edition of the Leat that there would be a new editor this time. Well.....*the best laid plans of mice and men etc.* You may also have noticed our new logo. Both of these developments have arisen because of changes in the LPG Committee and we welcome Jill Spinks and Cliff Moreley who have been co-opted on to it.

Again because of circumstances, we have had to change the date of the General meeting from 29th October to **18.00 on November 5th**. The general meeting, held half yearly, is an opportunity for all patients to attend and to put forward any questions to the committee and the two GPs who will be present - so please make a note of the new date - **18.00 on November 5th**.

Out of hours help

Some patients have asked us to clarify the arrangements when the surgery is closed. The out of hours doctors service used to be provided by Devon Doctors, but the contract is now held by Practice Plus Group. Access to this service is completely handled by NHS 111 who will triage your case and direct you to the appropriate service, which may include attendance by a doctor from Practice Plus. The Patient Group would like to hear of experiences with the out of hours service so if you have any comments, please email them to the LPG Secretary (seclpgleatside@gmail.com).

Surgery News

The Practice Manager writes:

Did Not Attend Appointments

Below are the stats for DNAs (did not attend) for 2024 so far. These are for patients who had a booked appointment but did not attend it and did not cancel before the appointment time. The headline figure is that on average we have lost 46 hours a month of clinical time due to patients not keeping their appointments. This will mean that by the end of the year we expect that over 2,200 appointments will not have been attended, which is over entire weeks work not delivered.

We are mindful that sometimes unavoidable situations arise which means that patients are unable to attend an appointment, and that due to sickness we are required at times to cancel appointments at short notice. However, at present close to 3% of all appointments are not attended and if we could reduce this then we would be able to dramatically improve our appointment waiting times within the space of a year.

We are conducting a piece of Quality Improvement work this autumn on how we can reduce our DNA rate, but in the first instance I think that raising awareness of the impact of this with the patient group would be a helpful first step.

Even as much as an hour of notice allows us to offer a cancellation to a patient so it really does help. Patients who book online or via the NHS App are able to cancel and we have a dedicated cancellations line which is answered on average within a minute. If patients can come up with other suggestions as how they could more easily cancel appointments or indeed if there are suggestions for how we could improve our reminder process then we would be very open to this feedback.

Month	Appointments not attended	Hours of clinical time wasted
January	182	45.5
February	195	48.75
March	168	42
April	192	48
May	191	47.75
June	151	37.75
July	209	52.25

Phone Waiting Times

Over the course of 2023 we had feedback from patients that our phone waiting times were not acceptable and needed to improve. We listened to this and agreed that our handling of call demand was not up to our standards. In early 2024 we implemented a number of changes to improve patient experience and speed up the time it takes patients to get through on the phone.

The first change was to implement a new phone system in March, which can provide us with better real-time information on call waiting times and also enable us to review demand across the week and over time. We have used this data to implement a new rota internally to better match our workforce to the peak times of phone demand and moving non-patient facing work to quieter times. We have also further recruited into the team and increased the number of hours within our reception team.

I am very pleased to say that we have seen a significant improvement in the average call waiting times over this period.

In April across the week, phone calls were taking an average of 7 minutes and 36 seconds to answer (appreciating that at busy times the wait was much longer than this). In June and July, the average call waiting time had reduced to 3 minutes and 29 seconds. This is a 60% reduction in the average time it takes to answer phone calls coming into the surgery.

We have received a lot of written and verbal feedback from patients which has highlighted that this improvement has been noticed, which is hugely appreciated. We will continue to work to improve on our service delivery and will regularly publish our call stats to demonstrate what we are doing.

A valedictory message from Dr Watkins

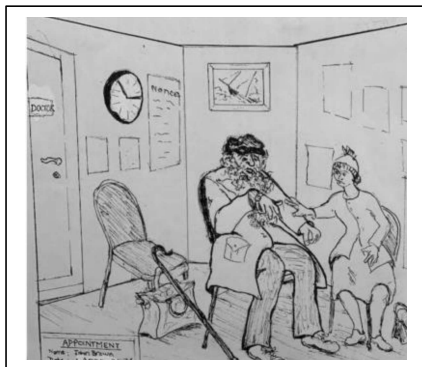
I'm retiring this September after 26 years at the Surgery.

When I joined, I took over Dr Lewis's room in Fore Street surgery as he retired; but before long at Easter 1999 we moved into the purpose-built Leatside building. The partners had taken out a large bank loan to build it and we all still own the building and the business today.

Dr Lewis is still going strong aged 86 by the way...

Since then, we have seen others leave: Dr Manser, Dr Loverock, Dr Grant, Dr Frankland, Dr Ingoldsby and Dr Gelder; and others join... all the great doctors we have there today... many of whom trained locally to be GPs.

After working as a Junior Doctor in hospitals in Leicestershire and Warwickshire I moved to Exmouth in Devon to train as a GP - and looking around for a job when I finished, I saw the Totnes job advertised - and I set about making sure I got it. A job in my hometown? What could be better? (Dr Shelmerdine and later Dr Grainger were my GPs when I was a child.)



A great place to live, and with my wife Deborah at the helm, to bring up our kids. Marcus is now 30 and a Science Teacher in London; Caroline is 29 and an Environmental Consultant, and Ella, at nearly 27, is working at Dartington Hall.

It has been a privilege to have been such a part of so many people's lives while a GP here. Despite the initial appearance I am sure we do a much better job at providing years of continued care and knowledge of our patients than many GP surgeries... in fact a great big 6 foot tall lad in his mid-twenties the other day asked, "Who's going to be my GP now? I haven't ever seen any other GP but you".

We hear this so often from people who move to the area as well - how welcoming the building and the people are at the surgery and what great care they get.

This has become increasingly apparent in the last few years: as access to see a specialist has got progressively less and less your GP has had to become the one able to provide you with near-specialist level skill and knowledge; and I think all our GPs can do this - because we have had to adapt to the new NHS.

If you plucked a GP from the past and landed them in the middle of a typical surgery today, I think they would be genuinely astonished at the skill and knowledge of today's GPs.

But what of the future? Well, who really knows...

The new government has inherited the same financial constraints the last one had, so I doubt we'll see a massive immediate increase in NHS funding. Perhaps they could look at auditing the costs better and financing different areas better. Hospitals get huge sums of money with little apparent oversight of how it is spent and on which priority areas. General Practice really does get so much less of the money proportionately than it deserves.

Thanks to Elizabeth for the cartoon.

The Patient Group would like to welcome Dr Jamie Graham to the practice. We wish him well and look forward to working with him.

The role of people managing your care who are not doctors will increase. There are very many very experienced nurses and paramedics now working as independent clinicians - always with the oversight of a GP in our case, but we value their expertise. Let's face it - they are there because they earn less than a doctor, but with all the financial constraints nowadays, that is necessary. Nonetheless, they are excellent and many of you will have come across Steve, Kim, Sarah, Tom and Danny at the Surgery now, I'm sure.

The partners will, after I leave, have to continue to change the ways in which things work to continue to offer a sustainable, long-term effective health service to the people of the area.

So, I am sure you are all in very safe hands for the future. My successor is Dr Jamie Graham and I'm sure he will provide his own introduction here before long.

Totnes Caring Corner

Coming soon! Totnes Caring will be having a charity golf day Male Handicap 28, female handicap 36! We are hosting a golf tournament this October! Thursday 3rd October, we will be at Dainton Park Golf Club - book your team space in advance. Proceeds raised will come to us and support our lovely local charity.

There will be breakfast baps pre tee off and a delicious two-course meal in the Oak Restaurant to finish! Email gemma.taylor@totnescaring.org.uk to register.

On Friday 25th October, please join us for a magnificent masquerade ball at The Royal Seven Stars Hotel for a night of music, fun and laughter. £30 a ticket – including welcome drink and canapes. All money raised will come to Totnes Caring in supporting our local community.

Endpiece

If you wish to contribute to the Leat or would like to see particular information, please contact me at chairlpgleatside@gmail.com.

Committee Members

Mike Mintrum (Chair), Katie Porkess (Vice-Chair), Janice Balch (Secretary), Sue Barry Campbell, Jill Lawrence, Sally Lougher, Cliff Moreley and Jill Spinks.