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People's Panel Report Meeting held 28th July 2015 At NHS Office, Derby Road, Wesham

Opening and Presentation

The Panel Meeting was opened by Scott Smith who welcomed the attendees. He introduced Amanda Bate, Engagement Manager who thanked the group for their work at the previous meeting regarding the EDS Grading. She stated that their thoughts, comments and findings reflected what had been raised at the EDS meeting and it was useful to have these topics reviewed.

Christine Carty then introduced Tracy Riddick, Senior Integrated Governance Manager for Primary Care, who was to give a presentation on antibiotics and the leaflet that is currently in use which is known as 'a non-prescription prescription'.

Tracy gave an overview of the historical development of antibiotics and explained that as our bodies are starting to build up resistance to them they become less effective. This has resulted in the development of superbugs such as MRSA and Clostridium Difficile.

She highlighted that the CCG works with care providers to monitor use and effectiveness of antibiotics in various ways. This includes:-

- Auditing antibiotic prescribing
- Monitoring superbug infections
- Facilitating training and discussion between experts and front line staff
- Education patients – non-prescription leaflet
- Consulting with patient rep groups





Tracy asked for specific help from the group in moving forward with the work around education for patients. She asked how could the CCG better get the message out to the public and specifically asked for the answers to the questions Who? Where? and What?

At the end of her presentation Tracy Riddick and Scott Smith left the room and allowed the Panel members to have a discussion on the information presented.

Christine advised the group that at the last meeting Jen Olivine had acted as Chair and gave the Panel's feedback. Jen was willing to continue to do this but would be happy for someone else to do this role. Debra Dawkins offered to act as Chair for this meeting and it was agreed by the Panel. It was further agreed that nomination papers would be sent out and the Panel would be able to vote on whether to have a permanent Chair or ask at each meeting for a volunteer.

Panel Members Discussion

The Panel were asked to discuss and make a response to the question;
*How does the CCG get the message about antibiotic use out to the general public?
Who? Where? What?*

The Panel members had a brief discussion and highlighted that they thought in needed to be about changing mind sets – patients need to stop seeing antibiotics as the answer and GP's need to stop prescribing them as a line of least resistance. The Panel then split into two groups and discussed in depth the information that had been presented.

Each group then feedback the main points of their discussion.

Group A

- Getting the message across in a general way would work well if they are major campaigns. It is possibly not enough to do locally. Consider the national campaigns.
- Parents bringing children to surgery often expect or want to be prescribed antibiotics as they are worried about their child or need them to be well so that the parent can keep working.

FYLDE & WYRE CCG PEOPLE'S PANEL



Talking about health



- Different methods of communication need to be considered as people get messages in different ways eg Facebook, TV, radio, leaflets, word of mouth.
- Would prefer two separate leaflets – one to identify why over prescribing of antibiotics is a bad thing and the other for the non-prescription prescription.
- Consider having a simple slogan and repeat this through all publicity.
- Noted that the leaflet is very 'wordy' – unlikely that people will read it. Can it be simplified?
- Need to consider changing GP mind-sets as well as the public
- Can there be a campaign to target specifically parents with young children? Link with local organisations eg Sure Start, Home Start etc
- How can you engage with elderly patients – what will grab their attention?
- Advertising on GP screens may not be effective as patients don't generally read them.
- Ensure leaflet is short and snappy. Make sure it is out in all community locations and health care centres.
- What is the cost of printing the leaflets – is it cost effective or are there better ways of getting the message out.
- The leaflet should prepare patients not to expect being given antibiotics but this doesn't meet that brief.

Group B

- Suggested making more use of pharmacists as they are knowledgeable about medication and could review prescriptions when they are brought into the pharmacy.
- There are different types of GP's – those who would just prescribe antibiotics and those who would look for alternatives either around self-care, holistic therapies or even suggest waiting to see if the condition clears up on its own. Could GP's mind-set be changed to offer alternatives?
- Can the practice managers be more aware of patients being seen and offer suggestions, through staff, that antibiotics may not be the answer. This could be by handing out a leaflet whilst people are waiting or on check in.
- There needs to be an informed decision for the GP giving the antibiotics rather than just because they always have.



- Make the leaflet more child / young people friendly. Possibly have a competition to design a better leaflet.
- Work more closely with schools / colleges particularly around work experience weeks and within PHSE curriculum to raise awareness of the issues.
- Concern that the existing leaflet is patronising and the wording is not appropriate
- There were questions over what percentage of patients this is relevant for anyway.
- Can GP surgeries triage patients to determine if they need the appointment at this time thereby giving time for the infection to clear on its own without use of antibiotics
- If using the leaflet consider links on the back to say self-help care and ways to manage or contact other support organisations. Also what self-help you can do.

Chair's Feedback

The Chair then presented the findings to Tracy. The two groups had come up with very similar responses.

WHO?

It was felt that the mind-set needs to be changed of patients so they are not expecting antibiotics immediately if that is not appropriate. There also needs to be a sea change within GP's so that they are not automatically prescribing as the easiest option. This comes with education of both groups. Use pharmacists more effectively by getting them to review prescriptions that they come across and ensuring it is appropriate and not contra indicatory for the patient for any existing prescriptions.

WHERE?

Publicity through various methods including social media, flyers, radio or TV, advertising if possible, use community venues or local resources eg local community radio stations.

WHAT?

Targeted campaigns eg for parents of young children, elderly. Work with local providers to support this so could be done fairly inexpensively. Re-design the leaflet



so that it becomes an information leaflet for general use and the non-prescription prescription can be held in GP surgeries. Ensure self-help care is highlighted – what can the patient do? Consider using characters or strap lines such as the A&E leaflet which is more effective although make consideration to patients with sight problems including colour blindness. Work more closely with local schools to get the message out to the next generations. Consider the suggestions from the leaflet as to where the language is felt to be inappropriate and see how this can be amended to make it more user friendly.

Tracy thanked the Panel for their considerations and suggestions and said that they were a really useful perspective.

A further question was asked by a Panel member as to whether the organisations who had their logos on the leaflet had all agreed to this. Tracy was not sure but said she would feed this back to the communications team who designed the leaflet.

The answer to the question was that the People's Panel could neither agree nor disagree with the question posed.

Closing

The Chair was thanked for her comments and the Panel members were thanked for attending and taking part in such a frank and honest discussion. Panel members were reminded that the CCG's AGM would be held on 4th August and they were all invited to attend if available.