

HAVE YOUR SAY - RINGMEAD MEDICAL PRACTICE PATIENT PARTICIPATION GROUP NEWSLETTER



Reminiscences of an 89 year old

I don't have a very good memory, old age I suppose, but what I do remember as a young girl going to the Doctors with my Mum. You would enter the Surgery, give your name to the Receptionist sitting behind a desk, then take a seat. When seated you would look around to see how many people were in front of you and when it was your turn you took a manila folder from the Receptionist and went in to see the Doctor. I seem to remember that no one pushed in and it went quite smoothly. All the information was handwritten, no computers in those days.

When I married in 1963 my husband and I moved from Middlesex to Berkshire and things had changed quite a bit by then. We lived in Crowthorne for some years and the Practice we attended had a purpose built Surgery and things were far more organised, although everything was dealt with by phone or attending the surgery. We moved to Great Hollands in 1971 and joined the Ringmead Practice headed by Dr. Kramer. The surgery was then held in a house in Vandyke. A Receptionist took your details and you took a numbered disc to see the Doctor. One Doctor who wore a bow tie, I seem to remember, also smoked at your consultation, something that would certainly be frowned on now, but then it was part of life. The Surgery in Birch Hill was also in a house in Lochinvar and the same procedure occurred there. Birch Hill built it's own purpose built Surgery and the Ringmead Great Hollands Site was built and is held under lease together with the Great Hollands Surgery – a separate Practice. Ringmead Medical Practice amalgamated with Heath Hill Surgery in Crowthorne and now operates from those three sites. As a patient we can attend any one of these sites which many years ago we were only able to attend the Surgery where we were registered.

Dr. Kramer was the Senior Partner when we joined the Practice and when he retired Dr. Kassianos took over and when he also retired Dr. Sachdev took his place. How things have changed, mainly because of technology. Great Hollands Medical Practice now has seven Partners and seven other Doctors, some are part time making 10.6 full time GP's. Apart from Doctors, we have various Nursing staff, Physiotherapists, Clinical Pharmacists and Paramedics, not forgetting the army of administrative staff including Prescription and Patient Services headed by the management Team. Making appointments and seeing blood results etc., has changed too as with Patient Access we are able to use our phones and computers to see results and make appointments without having to go into the surgery or make a phone call. Who would have thought it all those years ago!!

The NHS now

To put the local NHS into perspective, the UK population in 2020 was 67.220 million! In 1970 it was just over 55.650 million. (source <https://www.macrotrends.net/countries/GBR/united-kingdom/population>)

Information published by The Nuffield Trust shows that in May 2020, the number of patients per GP in the Frimley Trust area was 1755! (Source <https://www.nuffieldtrust.org.uk/news-item/is-the-number-of-gps-falling-across-the-uk>)

Changes to the way the NHS works were obviously necessary and many of us will be aware that the NHS England Clinical Commissioning Group has now been replaced by Integrated Care Systems (ICS) pulling together Primary and Secondary Care, Local Authorities and others to plan, deliver and execute changes to local NHS services. It is hoped that by creating 42 ICSs across England covering populations of approximately 500,000 to 3 million, the delivery of health services will improve and inequalities will be reduced. Frimley Health ICS is the one for this area.

Historically, Local Clinical Commissioning Groups (CCGs) were created following the Health and Social Care Act in 2012, replacing Primary Care Trusts in 2013. They were clinically led bodies responsible for planning and setting up NHS healthcare in their areas. ICSs have existed in one form or another since 2016, operating as informal partnerships which used 'soft' power and influence to achieve their objectives. They are now legal entities with statutory powers and responsibilities. They have 2 key components:

1. Integrated Care Boards (ICBs) which are responsible for planning and funding most NHS services in their area and
2. Integrated Care Partnerships (ICPs) which are statutory committees comprising local government, voluntary, social enterprise, community sectors, NHS organisations and others to develop a health and care strategy for the area.

They have 4 key aims:

1. Improve population health and health care
2. Tackle inequalities in outcomes, experience and access
3. Enhance productivity and value for money
4. Help the NHS to support broader social and economic development

Why are ICSs needed? Because the health and social needs of the population have changed dramatically since the inception of the NHS when the focus was on treating single illnesses and conditions. People are now living longer with multiple complex and long-term conditions and are increasingly needing long-term support from a number of different professionals and services. Often 'fragmented care' from a number of services is being delivered which hasn't been coordinated around their actual needs leading to poorer outcomes, duplication and inefficiency. In real terms, it costs more and delivers less.

Our area is part of the Frimley Health and Care ICS and further information can be found via the link below.

<https://www.fhft.nhs.uk/about-us/a-better-future-for-health-and-care/>

Source <https://www.kingsfund.org.uk/publications/integrated-care-systems-explained>