

**Long Ashton Patient Participation Group**  
**Wednesday 18<sup>th</sup> November 2015**  
**Long Ashton Doctors Surgery**

**Present** :- Dr. J Grenfell-Shaw, Carol Wessel ( Chairman), Kathy Turner (Practice Manager), Marie Kirkland, Calmore & Carmen Marshall, Jean Pullin, Margaret Crawshaw, Claire Chippafield, Margaret Webb, Gretta Holdway (Minute Taker), Pat Preston, Rehana Allan ( Representative from Community Connect).

**Apologies:-** Annabelle Preston, Kelvin Taylor, Sally Sterland, Madeleine Wilmot.

Carol Wessel opened the meeting at 7pm by welcoming Margaret Webb who has come as a new member this evening.

**Matters Arising as from Meeting 8<sup>th</sup> July 2015**

Defibrillator - CW and JP said they need to get together with The Bowls Club to talk over this matter.

PP said she had been to the surgery three times regarding the Lost Property, she had left her name and number, but to no avail, Dr. GS , thanked PP, at present all lost property had been disposed of, surgery will contact PP in future.

Patient Feedback - the feedback from patients has risen from 60% to 80%, Retinopathy Clinic will be coming back next year.

MK asked what actions or improvements have been made?

Dr. GS - more availability, more effective staff, extended hours ( start 7.30am Monday to Friday, and a late surgery, on alternate Tuesdays or Thursdays). No Locum since the end of July. " GP's are like hens teeth, be nice to them."

PP added it is a two way system.

CM asked about the new building,

Dr. GS, bid has been submitted, possibly expanding, although no money at the moment, it is more realistic to expand than new build.

JP - what may come in development around.

Dr. GS more houses - means bigger premises.

**Agenda 18/11/15**

**Complaints, Praise, Patient Feedback incl. NHS Choices**

KT - positive comments coming through, they are looking into what can be done with negative comments, cards behind Reception. "Good comments boosts moral."

### Quality Improvement - Use of IT/on line access, texting and phone system ( including appointment booking systems & electronic prescribing)

1. Patient not getting appointment?
2. Telephone answering message, too long?
3. More appointments on line?

Dr. GS all these points will be looked into, although they have shortened the answering message, Electronic Prescribing will come in January ( Patient will nominate chemist and prescription will go electronically.)

KT - will look into having an organised session for explaining “how to book on line” albeit numerous posters in Surgery.

### Extended Hours, Carers & Safeguarding

KT - surgery having drive to look after Carers, contact people, misconception you have to be claiming Carers Allowance - Not True.

PP - “ How would you know who is a Carer?”

Dr. GS - Recognised quite a few, missing possible more.

### Community Connect - Funded by North Somerset Council

Rehana Siraj-Allan - Community Development Coordinator, had been to Long Ashton and met a few of the locals, they are looking to promote a team of village agents, who would look for people over 50 needing help, I.e. Sign posting to local services, learn a new skill, activities and benefits In their own communities, information, or just finding out what the person may need. This group would cover Long Ashton, but they cover Congresbury, Nailsea and Yatton  
Anyone wishing to partake in this, please contact Rehana on 07422078548

### Flu Clinic

Several members present said the sessions were total chaos, not satisfactory, huge problems.

KT - has been in touch its other surgeries to ask how thy handle this event, also that the surgery will be collecting ideas. MC asked if the Village Hall could be used. JP replied there would be a charge for this.

Dr. GS explained that there were significant changes and also if patients went to the Chemist to have their flu jab, the surgery would lose out, because the Surgery gets paid for each patient. Also patients were turning up at the wrong time.

PP - watch this space for next year.

### Nursing Situation

For the next 6 weeks approximately, the two main nurses will be off sick, both having procedures. A bank nurse will be engaged for this period.

Dr. GS -

1. Specialist nursing service will not be available
2. Diabetic patients can see Dr.s if necessary
3. All patients can have longer than 10 minutes if necessary, ask at reception
4. training of Phlebotomist to take on other duties
5. Bear with us
6. reduced level of service

The Chairman asks if good wishes from PPG can be given to both nurses for a speedy recovery.

### Patient Access for Appointments

Access is better, although this point was brought up earlier, they will however look into answering message.

#### Practice News, Future of Practice, Government Policy

Dr. GS Funding for Primary Care has dropped from 11% to 8%, even though work has moved from hospital into General Care, this is a real issue, difficult climate at the moment, not times of plenty.

You hear about A&E, but you do not hear about GPs, 6 times more going to GPs than A&E.

In Bristol - Pilot Scheme on line, where patients can go of advice from a GP, or just where to go for information.

KT - Admin has gone up, lots of forms with Tick boxes, paper work has gone up tremendously, which has had a big impact on primary care.

#### Priorities & AOB

JP - should receptionist ask patient what test is necessary

MK - bring a lot of wheelchair patients to Surgery, and the pavement outside needs lowering

Dr. GS - it took a year to have the disabled bay painted

PP - is the parking outside of the Surgery any better

Dr.GS - Yes

PP - is there anything in place within the surgery for Bereavement Services

Dr.GS - None within the Surgery

Carol informed us that we are part of The National PPG.

There being no further business the meeting closed at 8.15pm