

## **THE JUNCTION SURGERY ACTIVE PATIENT GROUP MEETING**

**DATE:** 27<sup>th</sup> March 2019

**TIME:** 5.00PM – 6.00PM

**ATTENDEES:**

Julie Sunderland (Practice manager)  
Jan Strodder (Nurse)  
Anita Ward (Receptionist)  
Pamela Briggs (Patient)  
Robert Briggs (Patient)  
Denise Oyston (Patient)  
Philip Carr (Patient)  
Nasra Hussain (Patient)  
Rachel Carter (Patient)  
Joan Coverley (Patient)  
Rodney Coverley (Patient)  
Zahid Iqbal (Patient)

**Apologies:**

Dr A Ahmad  
Sylvia Whiteside  
Wendy Walker  
Mr & Mrs Brown

**Tabled:**

Friends and Family test results for 2018  
National Patient Survey  
Terms of Reference  
Electronic repeat Dispensing

### **1. Apologies and Introductions**

Julie asked attendees for brief introductions and to advise what capacity you are e.g. staff or patient.

**Terms Of Reference** – Julie reminded attendees that this was not a forum to discuss individual medical issues or concerns but an opportunity to contribute to the development of the surgery. The TOR were tabled.

## **Aims and objectives**

*The role of the Group is to work closely with the practice to discuss services being delivered, the patient experience and to consider improvements that could reasonably be made and to act as a 'critical friend'. No personal grievances or medical issues are to be discussed at any time.*

### **2. Matters arising from the last meeting**

Julie advised the attendees that there were no outstanding actions from the last meeting.

### **3. News from us**

Julie advised the meeting members that the CQC (Care Quality Commission) meeting had been postponed due to circumstances beyond the control of the practice and had been rescheduled for 17<sup>th</sup> July 2019. Attendees were asked if they would be willing to speak with the CQC to feedback how they felt about the surgery. Several members agreed and Julie advised she would contact them nearer the time to remind them and advise them of the times they were required.

### **4. Patient survey results**

Members of the group were asked to consider the results of the anonymised survey undertaken in January 2018. She advised she was disappointed with the results for patients overall experience and ability to get through on the telephone but accepted the new measures put into place to improve the telephone access may not yet have impacted on these results as they were relatively new. Also tabled were the more recent Friends and Family Test Results which showed 93% of patients would recommend the practice. These results are electronic responses to the question being asked following an appointment with the GP. Mr & Mrs Briggs both advised that they always managed to get through and get an appointment as did Mr & Mrs Coverley, however, they did appear to have trouble responding to the request for FFT feedback questions.

**Action: Julie advised she would look into this matter for them.**

### **5. Primary Care Networks and the new G P Contract**

Dr Ali gave a brief overview of the new primary care networks which were being mandated from July 2019 to service a number of practices within the locality, joining together to cover 30,000 – 50,000 patients in an effort to improve services relative to their population and work collaboratively to share workforce and resources.

## **6. Practice structure**

Dr Ali explained that the practice had been trying to secure another GP for some time now but due to the area being unattractive to GP's they had struggled. In view of this they had engaged an associate clinical pharmacist (Mr Mohammed Afzal) and was in the process of employing a new Healthcare Assistant (Mr Joe Barlow) in addition the practice had secured a regular locum for Thursday mornings. The practice also had two registrars (Dr Chowdhury) and another one who was currently on sick leave but was due to join the practice in the near future. Both of these are likely to be with the practice until February 2020.

## **7. Electronic repeat dispensing**

Julie tabled an information leaflet explaining the electronic repeat dispensing facility and encouraged members to share with the community. She explained the benefits of being able to submit electronic prescriptions electronically for up to 12 months to nominated chemists subject to the patient being on stable medication. Thus avoiding the need for patients to come in or ring up to order their medication every month.

## **8. Medication queries**

Julie advised that around 80% of the telephone calls received into the practice were around medication queries and despite having several avenues to send these queries to, the practice was inundated relentlessly with medication queries. Dr Ali advised the practice was in the process of trying to secure access to a remote pharmacists for a couple of hours a day, with a direct number, to try and reduce the number of calls to the practice and lengthy delays on the telephone. An update would be given in due course. Some members advised that often it is the chemist that direct them back to the surgery so Julie agreed to contact local chemists to see what the issue were.

**Action: Julie to contact chemists**

## **9. Filming opportunities**

Julie advised that MyHealthHuddersfield, the federation of general practices across Huddersfield, were looking for volunteers to be part of a promotional film to talk about their experiences with the extended access service. Julie asked members to contact her if they were interested at all.

## **10. Healthwatch Kirklees**

Julie advised Healthwatch Kirklees were asking for patients to undertake a survey via [surveymokey.co.uk](https://surveymokey.co.uk) to feedback their experiences in contacting the single point of access for mental health services. Again Julie advised members to contact her should they need the link to complete the survey.

## **11. MIG (Medical Interoperability Gateway)**

Julie advised that the MIG was a secure middleware that enables the two-way exchange of patient information between local healthcare settings and that the hospitals would now be able to access patients records to view specific information to assist them in their treatment as practices are able to do so at present.

**The meeting was drawn to a close at 6.00pm. members were thanked for their contribution and were advised the minutes would be sent in due course. Dr Ali suggested the next meeting be in 6 months time.**