Park Grove Surgery

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Minutes of Patient Group Meeting 27.11.2013 12.00

Present

Michelle Wildsmith Sharon Newsam Cyril Duffy Ann Gillott Ian Gillott Jennifer Baker Carolyn Clay

Apologies

Sheila Hayward Dorothy Hayward Dana Crooks (advised will forward views by post)

Not in attendance

Michael Edwards Sandra Edwards Brian Lowe Raisa Morgan

E Members

Amy Gillott Samantha Harrod Vikki Priestley

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Michelle thanked the group for attending and welcomed two new members of the group, Jennifer Baker and Carolyn Clay.

MW advised the group that we needed to decide areas of priority for this year.

We reviewed the areas of priority and action plan from the last meeting and discussed if there had been any improvement.

Areas of priority/Action Plan Review

The group reviewed the areas of priority/action plan from last year.

• Appointments and Telephone Advice (increase staff am)

MW advised the group that she had conducted a search and on that particular day there had been 78 tasks sent to the GP for appointments, telephone advice and adhoc prescriptions, so we were aware that the tasks/requests were being sent. MW advised that this was in addition to other tasks from District nurse, chemists etc and home visit requests.

One member of the group had a particular experience where he had rung for an appointment and was given one that afternoon but required a more urgent appointment. MW advised that she would look into this separately and listen to the call.

CD mentioned that when ringing all appointments seem to have gone by 8.45am, MW advised that tasks are then sent to the GP and the search showed that this was happening.

• On line registration – to promote

MW advised that at the last meeting there were 1515 patients registered for on line booking and since then this had risen to 1981.

ANP – to make patients aware

The group discussed how some people may be put off by the word Nurse but agreed that they were equally as good as a GP. One member suggested that we could advertise them on a poster. MW mentioned that we had covered it in the newsletter but the members hadn't seen the newsletter that had been displayed in the reception and on the website. Agreed to promote this more.

DNA – more proactive about patients who don't attend pre booked appointments

MW advised that the surgery had been more proactive at sending out the DNA warning letters however in January 2013 we had 296 DNA and in October we had 341 so despite efforts this had actually increased. CC asked how we notified the patients, MW advised by letter and then repeated DNA would send a further letter and consider removal from the practice list. CC suggested that the patients were telephoned afterwards.

Newsletters

See above - ANP

Notice Boards – General tidy

Members had noticed that they had been tidied up but that the chairs were not in the best place for viewing. MW advised such a small waiting area that there wasn't really anything that could have been done about this.

Areas of priority

Appointments

Lengthy discussion regarding structure and how all practices in Barnsley have different structures but all are suffering the same problems with regard to demand. The one used by the practice started a few years ago and adapted from National structure. Discussion regarding how can only book up to two weeks in advance in effort to reduce DNA rates.

Discussed about CQC visit and the group asked if the Practice Managers in the area met to share good practice. MW advised that they meet monthly and have done so for many years.

The group discussed how there should be more of a push for on line booking and to promote on posters. SN there were some posters, MW perhaps could update them.

AG wondered if we could find out how many per age band were registered on line. MW yes we could find out this information.

CC asked how many appointments were available in a day and how many calls for appointments, MW not sure of this information but advised the group that we would only be able to look at reasonable changes. Couldn't make more appointments available had to look at using those appointments correctly.

Discussed about the use of 111 previously NHS direct.

The group discussed patients that attend for minor ailments such as colds, sore throat etc before trying pharmacy preparations. CC asked if GPs/ANP point this out to patients when they attend. MW not sure would have to ask the question.

We discussed about the possibility of a leaflet to advise patients of the services available and when to use the right service.

JB advised that some patient's symptoms could be due to not drinking enough water and suggested that staff could be trained to do dehydration tests/muscle reflex testing. MW advised that dehydration would be considered by GP/ANP and probably not feasible to train reception staff.

JB had overheard patients in the waiting room stating that they had, had their tablets changed and had caused diarrhoea/constipation suggested that patients be allergy tested before commencing on medication. MW advised that this wouldn't be possible as we have to refer to Dermatology for testing and with the amount of patients given medications etc again this wouldn't really be feasible. It would be impossible to check every patient.

IG asked how many practices there were in Barnsley, MW 38 in total. IG wondered about the possibility of centralising the calls like 111 and triaging so that only the ones needing an appointment got one and perhaps shared capacity across the borough, so if no appointments at one surgery but had some further up the road, would travel.

MW advised would feed this back to the CCG patient group.

CD asked if this had been thought of already, MW advised that she wasn't sure but would feedback anyway.

Discussed about the budget, MW advised not held by practices individually but as members of the CCG.

JB asked if the computer systems were compatible. MW advised they are however the suppliers were not allowing communication between the systems at the moment.

Repeat Prescriptions

AG asked about repeat medications and wastage and if the patients had medication reviews. MW advised that they are reviewed and have maximum issues so that staff can't continually issue scripts. MW advised that the practice holds Medicines Management meetings every quarter and audits medicines usage.

AG advised that family member has a stock pile of medication and feels it is being wasted, discussion about capacity and confidentiality. MW advised this individual case should be tasked to the GP.

MW advised the group that the practice would be going electronic for prescriptions in January.

Summary of AOP

On line booking – continue to promote, posters etc Leaflets – regarding services available and when to use DNA – CC advised that patients should be made aware of how much it costs for a DNA, IG patients should be fined, MW advised still not able to do this I'm afraid however the same views as other groups Poster – drinking enough water to be considered.

Younger members – AG asked if any younger members, MW advised some e-members however don't seem to get a response from them. AG advised could try and gain interest from younger members.

MW advised that SH had asked her to pass on regarding a request for name badges for the staff, MW advised that staff happy to have first name but not surname and also that younger staff were greeting patients with "Hi" and would prefer to hear "Good Morning or Good Afternoon" agreed would be more professional.

Patient Survey

We discussed the survey from last year and agreed that we would keep the same survey so that we could see a like for like comparison to last year. The group agreed that as the list size had remained almost the same that 400 surveys would be appropriate for return.

CCG Patient Group (OPEN – Our Patient Engagement Network)

Michelle advised the group of the OPEN patient group that meet to discuss and influence decisions regarding health services provisions in Barnsley. Leaflet given out at meeting.

Any Other Business

AG asked about the shingles vaccination and if it would be the same as flu. MW advised department of health decision on age group and they supply the stock not the practice so have to follow guidelines. MW wondered if it stated something in the guidelines if individual circumstances could be considered. Will find out.

Date of Next Meeting

Michelle proposed that the next meeting would be in the new year and would forward a date closer to the time to which the group agreed.