<u>Heathgate Medical Practice</u> <u>Patient Reference Group Meeting</u> <u>Minutes of a meeting – 15th March 2016 at 6.30pm</u>

This was a pre-arranged meeting for both existing and new members of the group. A mailer was sent to 400 patients on the Practice electronic mailing register promoting the meeting.

An attendance sheet was completed with 21 people present including Practice representatives, Dr Daniel Wallace and Mr Garry Whiting.

This meeting was Chaired by Mr Henry Gowman, who had met with Mr Whiting ahead of the meeting to brief on some of the matters on the agenda.

Welcome and apologies

Mr Gowman welcomed attendees to this the third PRG meeting of the NHS year!

Those attending for the first time were welcomed.

The agenda and supporting papers were available to all. The results of the latest patient survey had been shared with members when invitations to the meeting were circulated.

Minutes from the last meeting on 24th November 2015

The minutes were deemed to be a true reflection of the meeting and there were no matters arising that were not covered on the agenda.

Matters arising

Mr Whiting and Dr Wallace were asked to update on the four clinical areas discussed with the group last time.

- IVF consultation. Members were made aware of the CCG Governing Body decision to limit IVF treatment from 1st April to certain patient groups. The Practice had responded to the CCG consultation and included comments from the PRG.
- Hearing Aid consultation. Members were made aware of the decision by the CCG to withdraw their original consultation on limitations around the provision of hearing aids. Again, the original plans had been shared with PRG members last time and their views included in the response the Practice had made.
- Ear Syringing. Dr Wallace updated members on the introduction of the new Practice policy on Ear Syringing. He reported that patients seemed to have accepted the new policy around using ear drops regularly to clear wax. Mr Whiting directed members to the main clinical article in the March Practice newsletter which features the new policy.
- Physiotherapy. Members were very vocal last time around the potential risk of losing the service from the Practice. Mr Whiting

explained that PRG views had been fed back to the provider and that for the time being, the plan to relocate the service to a hub in Long Stratton had been shelved. A further discussion followed about the current CCG market tender out for the provision of this service from 1st October 2016. Mr Whiting confirmed that the Practice had been approached by at least two potential providers of the service that had been in touch to see if successful, they could operate out of the Practice. He had confirmed the Partners were keen to see the service remain local.

One other matter arising; prescribing changes. Mr Whiting explained that the changes around some inhalers, insulin needles, diabetic testing strips and anti-depressant medication which were discussed last time had been introduced successfully with little patient objection. Members again commented that they could see why when there were savings for the NHS, these changes were appropriate.

Patient survey results

PRG members were key to the creation of the latest patient survey undertaken at Christmas. The 'Send us a Christmas Card' survey results and analysis was circulated prior to the meeting.

Three of the areas were discussed briefly:

- 1. Obtaining urgent medical care out of hours the results showed a greater awareness of 111.
- 2. Members discussed the slight deterioration in the response to how near to booked appointment times patients were seen. Members acknowledged with Dr Wallace how difficult this was, as some patients will naturally take a little longer or may have the need to stay with the Doctor longer, potentially delaying subsequent patients. Members did not see the deterioration as a major issue with one member clearly vocalising that we should not look at the result as a problem area.
- 3. Overall patient satisfaction saw an increase, which the Practice welcomed.

The fourth area was around the number of patients that were not keeping their appointment (DNA or did not arrive). Last time members were both frustrated and horrified at the number of patients that were simply not keeping their appointments and not ringing to cancel them. It was for this reason that the DNA question was introduced into the survey, seeking the views of patients on how we should handle this. A discussion followed on the comments received in the responses.

Mr Whiting confirmed we had acted directly on two areas;

- 1. Since February, where we hold a mobile number, we have been sending a reminder text to patients 24 hours before booked appointments.
- 2. During March we have been writing to all patients that do not keep their appointments (after a manual review exercise).

We will review the effect of these two changes over the weeks ahead and feedback on DNA rates again next time.

Mr Whiting suggested writing an article for the local parish newsletters which was recognised as a good idea and one of the members associated with one of the local publications was keen to see this happen.

Healthwatch Norfolk Patient Survey

PRG members were also given a copy of the results from the Healthwatch Norfolk waiting room patient survey.

The Chair had been in attendance at the surgery the day that this independent survey was undertaken by volunteers from Healthwatch.

The overall satisfaction responses were positive with 100% of respondent rating the surgery overall as either good or excellent.

Members were reminded about the brief of Healthwatch Norfolk.

On-line access to medical records

This was a wide ranging debate about the change in contractual obligation for the Practice to make available certain aspects of medical records to patients on-line.

We currently provide on-line services to around 15% of our patients that enables them to book appointments and order repeat medication. Patients also have access to their 'Emergency Care Record' which (unless they have opted out) is the record of their medications, allergies and sensitivities on the national spine.

From 1st April, patients will be able to view on-line 'coded' entries from their medical record.

Mr Whiting explained with examples what this meant and how consultations recorded by clinicians would appear on-line with coded entries but not include any free text entry made by clinicians.

Members also discussed and agreed with the Practice recommendation the age at which parental access to young people's records should end. Various scenarios were discussed with clinical comment from Dr Wallace.

PRG members agreed the proposed age of 14 years is appropriate.

Volunteers were sought from members who already have on-line access, to add access to their coded record to gauge feedback on what they see and how this is presented. 5 volunteers came forward. Mr Whiting will make the necessary adjustments to their on-line access and advise them when this is done.

PRG educational event

Mr Gowman sought member support again for an educational event to be arranged for patients of the Practice.

Several members had offered their support last time but for one reason or another, the event had not got off the ground.

One member suggested that our PRG could work with the Old Mill and Millgates Surgery PRG, which already arrange such events to create a joint approach. This suggestion was well received and Mr Whiting agreed to obtain the PRG Chair contact details from the Practice Manager at Old Mill and Millgates Surgery to pass to Mr Gowman.

Mr Whiting and Dr Wallace committed to supporting the first joint event in the hire of a community location such as The Nightingale Centre or The Community Centre.

A suggestion was made of approaching South Norfolk Council which is keen to support this type of activity/event.

CCG area wide PRG event

Members were made aware of the date of the next CCG wide PRG event in Cringleford. Details were circulated and members were asked to let Mr Whiting know of their intention to attend and he would provide the CCG E Mail address to confirm attendance at this event which will be focusing on medication wastage.

The event is on 14th April at The Willow Centre in Cringleford between 9.30am and 2.15pm with lunch provided.

7 day opening

Mr Whiting explained that at this time we were no further forward understanding the requirements of this Government commitment although there were several pilots around the Country where evaluation was still to be published. These pilots included federated working of Practices and standalone Practice provision. Time was limited and so Mr Gowman sought agreement to defer the main discussion to next time.

Of the brief discussion, there was a general view that demand for services at some times during the seven day, 12 hour, 8am to 8pm service would be minimal.

The meeting closed at 8.25pm and Mr Gowman thanked all for their attendance and contribution.

Minutes prepared by Mr Whiting, Managing Partner.