

BRANNAM MEDICAL CENTRE



PATIENT REFERENCE GROUP

MINUTES OF PATIENT REFERENCE GROUP MEETING HELD ON WEDNESDAY 11th JUNE AT 18:00HRS

PRESENT: Desmond Kendryna (PRG), Bridget Kettle (PRG), Di Wogden (PRG), Sylvia Hindley (PRG), Robert Kelso (PRG), Linda Antell (PRG), Jeanette Kemlo (chair PRG), Roger Watts (PRG), Linda Sanders (PRG), Tim Chesworth (GP), Ed Matthews (GP), Dee Brown (PM), Amanda MacFarlane (Receptionist), Rebecca Prosser (Receptionist).

APOLOGIES: Patricia Leach (Practise Secretary).

Minutes of the previous meeting:

Previous minutes were agreed as a true and accurate record and signed off by Jeanette.

Rapid Access Clinic – Still some anxiety re being able to book on line. It was discussed at IMT (IT meeting) who worried about the appropriateness of bookings if there was no element of ‘triage’. At the moment this clinic has a 70-80% uptake on most days, we never close it as ‘full’, we would just pull in additional help by the other GP’s working.

The Group felt that it functioned very well as it does at the moment and allowing ‘self-booking’ might in fact mean that something urgent (such as chest pains) might not be dealt with as competently as it is by our current ‘triage’ system.

Wheel chair access: Dee has approached the company who fitted the doors and who have the service contract, they are looking into what can be done to remove the ‘trip hazard’.

Infection control Audit: Was undertaken by Di and Linda and fed back to Dee. Overall a good report with a few areas highlighted. Dee and Rebecca have been overhauling our Cleaning Protocol and have discussed the enhancements with the cleaning company. It was agreed that this would be revisited in 6 months’ time, perhaps looking at another area to check on how things have improved. Di and Linda said they would be happy to do it again. Thank you to Di and Linda from the Practice.

Telephones: Pat is away so will look at this at the next meeting.

Practice Handbook: Doctors qualifications and year of qualification have been added back in.

Member’s profile: Dee will send out the reminders via Email.

Patients First Campaign: Posters and a Petition have arrived which highlight the problem of a decrease in funding to Primary care. It also highlights the void in new GP coming into the system to replace the large numbers who are retiring or due to retire soon. The Petition was signed by the PRG group and it was suggested that it could be put onto the reception desk for patients to sign. It needs to be returned by 15.8.14, Dee will look into 'on line' signing.

Online Access to Medical Records: – (Tim Chesworth) The GP contract requires practices to enable patients to view their medical records on line by April 2015. This already happens in the USA and has not lead to any increase in litigation.

The group discussed possible benefits to patients, and concerns that it might increase phone contact to surgeries as patient might not understand medical terms. It was suggested that a glossary of medical terms attached to the record might help, Tim pointed out that Emis also runs 'Patient.co.uk' which could be linked to the problems. The access would be to via a secure password protected system, it is yet to be decided which parts and how much of the patients records will be openly accessible, but it is suggested that the system will probably start small and expand over time.

3rd Part Mailing: This is proposed as a cheaper alternative to mailshots by ourselves, (eg invite to attend flu clinics) and would also save a substantial amount of time. It was felt that although obviously data protection restrictions would apply to the 3rd party companies, that patients should be informed as and when this method is proposed to be used and that patients should have the right to opt out of this method. Information could be spread via our website, our newsletter and on the patient information screen.

Extended Hours: Covering early mornings and late evening opening, this has now extended to our blood clinic, Nurse and HCA appointments, and will cover such things as health checks, smoking cessation clinics, blood pressure clinics and a new weight management clinic.

Prescriptions: - (Rebecca) A discussion, revolving around prescribing and prescription ordering, following on from the 'repeat ordering leaflet' shown at a previous meeting. This leaflet has now come back in a final draft form and it is unlikely that any additional alterations will be made; we have however been given permission by its author to use the information and adapt it to best suit our surgery. The life cycle of a prescription pie chart was shown and amendments were noted and are being actioned. The A6 size patient ordering slip was also passed around and will be adjusted to show the majority choice. We will use this information when updated to produce a display in the surgery, to mailshot the pharmacies that we work with and also other agencies such as nursing homes. We also proposed to show a power point style display on our patient information screens and to put a supply of the A6 sized patient ordering at the front desk and attach to any 'emergency' prescriptions we are asked to do.

Transforming Community Services: A pilot study between ourselves, Boutport MC and Queens MC, were an Emergency Care Practitioner (1st responder paramedic, with the ability

to prescribe and undertake certain medical procedures) will be based for 3 months at each practise. They will not be under the 999 response so resources are not being taken from the emergency services, but they will be available for rapid deployment to patient homes for urgent visits, and will hopefully enable, due to prompt action, to maintain patients at home and keep them out of hospital; they will of course should the need arise be able to arrange for prompt admission to hospital. It is hoped that with them being able to visit our patients earlier in the day, that late and emergency admissions will be reduced. These Emergency Care Practitioners will be employed by and managed by SWAST (South West Ambulance Service Trust). Contracts are in the process of being drawn up. Litchdon MC and Fremington MC are being used as 'control' practises so that an evaluation can take place at the end to monitor the effect that they are having on admission rates.

Patient Comments: The patient comments box has been up for a while, and although it does not require patients to put their personal details on the note, we have had one or two unpleasant anonymous comments, as well as a rather unflattering comment on our 'Face book' page.

A discussion took place on how best to respond, the group felt that initially the comment should go to the Doctors Friday Meeting, so that all would be aware and be free to make a response back. This would also enable the comment to be recorded in the minutes of the meeting, so that in such time, if the person came forward we would be able to show that the comment was addressed. Then this should go back to the PRG group as a standing agenda item.

It was felt that anonymous comments should not be treated as any less valid than those given by a named person. It was also suggested that perhaps we could re-name the box – Compliments, Comments and Complaints, in the hope of also attracting some positive feedback.

Any Other Business: Saturday Flu clinics are proposed and an invite was given for anyone who would be free to come along and give support on those days.

The next meeting is planned for Wednesday 13th August at 18.00 hrs
At Brannam Medical Centre.