

Minutes From PPG Meeting Wednesday 20

March 2019 2.00pm

<u>Present</u>	Alison Flannery (Practice Manager), Sheree Wilson (Secretary), Lyndsey Rigby (receptionist), Barbara Shaw, Derek Hulme, Anthony Collinson, Margaret Wilson, Derek Parsons
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<u>Agenda item</u>	<u>Discussion</u>	<u>Actions</u>
1. <u>Apologies</u>	Stuart Ford	
2. <u>Minutes to be agreed from the last meeting</u>	The group all agreed the minutes from the last meeting were true and accurate.	
3. <u>Actions and matters arising from previous minutes</u>		
<u>Newsletter</u>	Draft newsletter (Spring/Summer) handed to the group.	
<u>Internet Appointments</u>	Internet GP appointments – unfortunately we cannot obtain the DNA figures for online appointment bookings. This would have to be done manually and we have not had the capacity to work on this.	
<u>Online Registration</u>	Online registration – we are promoting this to patients but currently our uptake is only 19%.	
<u>Share For You</u>	Town Hall meeting – Share For You. Information given to the group regarding “Share For You”. Explained we are making patients aware of this and this will be going live soon. Share for You will ensure that professionals involved in a patient’s care in Heywood, Middleton and Rochdale have access to the medical information they need to provide the patient with the best care possible.	

Share For You

Share for You connects together different health and social care electronic records.

This will eliminate the need for healthcare professionals ringing the surgery asking for patient information, e.g. medication lists, to be sent to them.

A member of the patient group attended a senior citizen forum and it was highlighted at this forum that some elderly patients were worried about exactly what information would be given.

We explained that we are raising awareness on our website and also texting patients and patients do have the option to opt-out of data sharing.

Wellfield Chemist

Wellfield Chemist – we do not have control over the chemist. Medicines Management had a meeting with them last week. Patients are advised to find an alternative chemist if they are not happy.

Brexit

The Group asked if Brexit would affect supplies to chemists. We are not sure what impact this will have but have been reassured there are plans in place.

Newsletter

Current Newsletter on our website – The draft newsletter will go on our website shortly. Patients can complete a section on our website which will alert them when a new newsletter has been added.

The Group stated they did not feel our website was clear and struggled to find where the newsletter was.

Flu Invite

Further to the mix up with the flu invite for a particular member of the Patient Group – we have responded to the patient privately.

Action: we will speak to the IT department

<p><u>Talk on Parkinson's Disease</u></p> <p><u>Patient Access System</u></p>	<p>Parkinson's Talk – a member of the group suggested a talk by a gentleman he knows but unfortunately no contact details have been given yet.</p> <p>Patient Access System – a member of the group said that case studies can be sent to patients via e-mail and he will send Alison an example.</p>	<p>Action: follow-up</p>
<p>4. <u>Patient Access Online Triage</u></p>	<p>This app is on our website on the front page. This is an online triage, there are various questions and the patient is signposted e.g. to go to the chemist, A&E, GP etc. Currently piloting a small number of conditions to help establish processes.</p>	<p>Action: we will speak to EMIS who run the app</p>
<p>5. <u>Appointment System</u></p>	<p>We have been struggling with our appointment system – not having the capacity and increasing demand. The appointment system allowed patients to book appointments well in advance and this resulted in patients not attending their appointments, even though text reminders are sent.</p> <p>We now have a revised appointment system in test that does not allow patients to book afternoon appointments so far in advance.</p> <p>The Group mentioned the triage questions asked by staff when patients ring to make an appointment. We explained we are mandated to ask the questions and the staff are trained to ask specific questions to signpost patients correctly. The questions have been compiled by the doctors.</p> <p>The Group asked if a nurse or medically trained staff could ask the triage questions to patients. We may look at an Advanced Nurse Practitioner or a Paramedic to triage patients.</p>	

<p><u>Appointment System</u></p>	<p>One member of the group had a personal experience where she could not get an appointment for several weeks and she felt the questions she was asked did not signpost her correctly, she felt she should have been given a sooner GP appointment.</p> <p>The Group asked how many hours our GP's work as some patients at other surgeries do not have to wait 2-3 weeks for an appointment. We explained that our GP's see 16 patients in a morning and 16 patients in an afternoon, they also do home visits.</p> <p>We have asked the CCG if we could close our patient list but were told we could not stop new patients registering with us. We also asked the CCG if we could change our boundary and were also advised this would likely be refused.</p> <p>The Group suggested the CCG need to look at this re the population in a specific area.</p> <p>The Group felt that online bookable appointments were not as available as they used to be and in some instances were only given choice of one doctor. By July we have to make 25% of our appointments bookable online, but the online appointments are not separate appointments, they are bookable online or via the telephone.</p> <p>Ratio of patients to a GP – the figures were handed out to the Group. We now have approximately 2,000 patients per GP.</p>	<p>Action: we will feed back to the GPs</p>
<p>6. <u>Repeat Prescriptions</u></p>	<p>We have looked at our current process as some prescriptions have not been ready on time etc. We have now simplified our process internally.</p> <p>We want to look at pharmacies ordering prescriptions on behalf of patients as there is a lot of over ordering being done and we want to stop this. The Pharmacies are supposed to telephone patients to check what medications they need first.</p>	

<p><u>Repeat Prescriptions</u></p>	<p>Sometimes Pharmacies have still been ordering medication even though the patient may have passed away.</p> <p>The Group asked about repeat prescription requests and how this is checked. We explained that the doctors do look at patients medication.</p> <p>We advised the Group that ordering prescriptions over the telephone is not safe and we are phasing this out and will not have a 24 hour answerphone in the near future.</p> <p>The Group asked about “ring back”. We have been looking at our telephone system regarding this function to ring a patient back, but no decision yet made.</p>	<p>Action: we will look at this function</p>
<p>7. <u>Controlled Drugs</u></p>	<p>Gabapentin is an example of a prescription that cannot be sent electronically. It would have to be printed out and needs a signature on collection.</p> <p>In April we will be able to send these electronically to the chemist.</p>	
<p>8. <u>DNA figures</u></p>	<p>The DNA figures were handed to the group. The monthly figures are static at present.</p> <p>The Group asked if we could draw attention to the DNA figures on our website, maybe in a more distinctive way with for example graphics.</p> <p>The Group also suggested removing patients from our list who DNA repeatedly. We are looking at the guidance regarding this and updating our policy accordingly.</p>	<p>Action: this will be looked at on our website</p> <p>Action: guidance being looked at</p>
<p>9. <u>Patient Group</u></p>	<p>We are looking again at the terms of reference of the group and how we can increase membership and levels of involvement.</p> <p>The Group said they were actively looking for new members and suggested “open sessions/open events” for patients.</p>	<p>Action: look at having a GP involved</p>

<p><u>Patient Group</u></p>	<p>We are looking at having more evening PPG meetings, perhaps on a Wednesday at 6pm. This is so that members of the group who work during the day can attend an evening meeting.</p>	
<p>10. <u>AOB</u></p>	<p>Locality meeting minutes from January were given to the group.</p> <p>The Group asked if they could have an e-mail address if any patients would like to contact them. The Group feel that patients may prefer to speak to a Group member if they have any issues.</p>	<p>Action: we will look at getting a generic PPG mailbox</p>
<p>16.</p>	<p>NEXT MEETING: Provisionally 26th June 2019 6pm</p>	