

# Minutes

**Meeting:** Patient Participation Group (PPG) meeting

**Date:** 12<sup>th</sup> May 2017

**Attendees:** Leigh Frost (FWMC); Jackie Nightingale (FWMC); PPG - Francis Palmer; Stephen Noreiko; Judith Sluglett; Linda Hurst; Betty Morrison; Philip Blakey; Stephen Mann; Annie Lewis

**Apologies:** PPG – Bob Maggs; Sheila Woodcock; Angela Stagg; Rais Hyder; Maxine Davies

Minutes of last meeting – Read and agreed

## Matters Arising and Progress Report

Patient Topics – Comment made at last meeting by RH “the new TV screen in reception was a wonderful idea and much better than the previous system of calling patients in”. Since the last meeting a TV screen has now been installed in the waiting room of the treatment room area.

## Welcome/Apologies

LF welcomed all to the meeting and thanked them for coming.

## Practice Topics

- Staff update

### Doctors

One change to Dr team. At last PPG meeting LF informed of Dr Lucy Burnand our new trainee. Dr Burnand is now a fully qualified Dr ~~in General Practice~~ undertaking the final portion of her training to be a GP. Dr Burnand will be staying with us for another year as a Specialist Training Dr. Interestingly you will be more likely to see Dr Burnand at the surgery as she works more days/sessions than our regular GP's!

### Nursing

Emma Reid is now on maternity leave. Emma had a little boy, Oliver. Emma is being covered by a new nurse Nicola Glasson who joined the team recently.

### Reception

Becky Thomas is also now on maternity leave. Becky had a little girl, Maisie Millie. We are also going to see Nicky Puddy going on maternity leave very soon.

We have welcomed 2 new receptionists to our team to cover the above absences and they are Tatiana Champion Campuzano and Tina Anderson.

PPG said congrats to Emma and Becky!

- **Admin Building**

The admin team, including Peter Yates and Leigh Frost have now moved into the Portacabin. It is very comfortable and we are all very happy there. With this installation of this Portacabin it has enabled us to create, within the main surgery building, 2 extra consulting rooms which will be in use very soon. This will allow more scope for more clinicians to work when the patient demand is greatest rather than when there is a consulting room free.

Unfortunately however there has been some complaints from the neighbours to the back of the Portacabin who do not like the Terracotta colour. LF has been contacted by planning who asked for the Portacabin to be painted grey. LF is at the moment resisting this request; Leigh has also been in contact with the company we had the Portacabin from and they have advised against re-painting as it has been treated with special materials against the weather. ~~The practice is prepared to An-offer LF has made to~~ the neighbours ~~to addis that we have-trellis toon~~ the back of the Portacabin and grow some plants on it. In this way the colour will eventually become less obvious. One suggestion from PPG was to write to planning to ask for advice of which colour would be to ISO Standards – he felt we probably wouldn't get a response then!

All of the above now means that our surgery patient list has re-opened to new patients. We haven't however broadcast this too widely to avoid a deluge of new patients.

- **Affinity update**

**New members**

As per last meeting Fallodon Way had been working in a Cluster with Westbury on Trym Primary Care Centre, Monks Park and Greenway ~~practices~~. Since the last meeting 2 new practices have now joined our Cluster so we now have Helios Medical Centre and Seal Mills. This means that we are just a few thousand patients short of the Cluster size that the Government want us to be. We were approximately 30,000 with the previous Cluster but with the 2 additional surgeries this has taken our Cluster up to 45,000; the Government would like the Clusters to be 50,000. Plans are in place ~~to join for 2 Clusters to work~~ together, should the 50,000 be agreed.

**Saturday clinics**

It has been agreed that the Saturday Hub Clinics be open for another 6 months. The opening times for the Saturday Clinics are 9a.m. to 12p.m.

**Mental Health Nurse Pilot**

This Pilot has ended on the 31<sup>st</sup> March 2017 so Lee O'Hara no longer works here. Unfortunately this means that patients with mild depression have to be sent back to see their GP. There are plans to start another Pilot but nothing agreed as yet.

**Physio Pilot**

This Pilot also ended on the 31<sup>st</sup> March 2017 which is unfortunate as it was very popular with our patients. There is a new Physio Scheme which should have been available from April but there have been problems with the IT which have delayed its start. Nicky Bayliss (Reception Manager) has been in contact with One Care

regarding this. This new scheme will still be a triage service but generally thought is that with this new service you will be more likely to get a face to face appointment with the Physiotherapist as appropriate.

### **Audiology – Ear Microsuction**

JS (PPG) asked about the availability of ear microsuction as the waiting list for this is very long and she has been told that Greenway is no longer offering it.

LF was able to inform JS that she has just agreed this morning to extending the time of the clinics at Westbury on Trym, so not to offer more clinics but additional time which should help. The problem at Greenway is that their person who did the microsuction has left ~~and they had no one to take her place so they had to close the service. They are~~ however training of a successor is underway, another person so hopefully their clinic should be open again fairly soon.

### **Chiropodist**

A member of the PPG reported that she had used our receptionist who also offers chiropody treatment. She reported how pleased she was with the service this person offers and had indeed seen her 3 times now.

**Action: LF to pass this message on to Julie.**

- **Research update**

In order to de-risk and help the surgery income stream we have since last year taken part in some Research Studies; these are quite often carried out by the University of Bristol. The surgery doesn't make masses of money on this but it helps income.

Studies we have or are taken part in are:

Timeli – Study for Dementia

Archie – Children and flu related (winter months)

Hippo – Alzheimers and imaging techniques to identify patients with this

React – Helping families of patients with psychosis

BARAKED – Not started yet

PANDA – Whether antidepressants really work

There is an Affinity element to this in that it is felt that better results will be achieved from the cross section Affinity offers.

- **Chairing of future PPG meetings**

LF asked again if anyone would like to chair future PPG meetings. LF explained that this is a meeting that the PPG could mould into the type of meeting they would like rather than LF making it a surgery meeting.

A few ideas were suggested:

- The rotation of the Chair around the PPG members
- There could be a Chair and a Deputy Chair for absences

LF ~~suggested~~ said if it was a rotation of the Chair a pre-meeting would be advisable

**Action: Message to those PPG members absent today – if anybody would be interested in Chairing future PPG meetings please be in touch with the surgery. PPG meetings are held twice a year in May and November.**

- **Patient Topics as raised at meeting**

**Appointment availability**

Will there be any improvement in appointment availability at the surgery? Unfortunately although LF would like to say yes there isn't a way that this can be improved on as yet. LF received some stats today which said we are slightly better on average with our appointment availability compared to across the country. PPG agreed that the telephone consultations are really useful and all agreed that this should help to ease the appointment situation. PPG commented that the Express Service is 'excellent'. LF explained that this is an 8 minute appointment to discuss 1 acute problem; these appointments are booked to a 48 hour notice period. Appointments can be booked on line however our longer serving GP appointments are taken almost as soon as they're put on!

One PPG member noticed the advert in the waiting room saying last month 95 patients DNA'd their appointments and asked if this number fluctuated at all. LF said that unfortunately ~~no~~ the DNA rate stays pretty stable but we have to appreciate as well that patients can be admitted to hospital and we don't always know so as to cancel their appointment and also young people's lives are often busier that we would like so things like this get forgotten. We do have a text reminder which we send to patients who have a mobile number on their registration screen.

**Access to medical records**

Asked how to access their records on line. LF explained this won't give them access to the free text element of their records only the coding element i.e. diagnosis, results etc. LF asked patient to bring in proof of ID as this is needed before access can be given and there is also a form that needs to be completed prior to access being given. PPG advised to speak to reception to ask them for a form.

**Is there a limit to prescribing budget?**

One PPG member said she finds it frustrating when seeing a consultant at the hospital who tells her she needs to go back to see her GP to be given the meds that the consultant has prescribed her so she wondered why this was.

LF confirmed ~~yes~~ Primary and Secondary Care have a separate prescribing budgets. ~~they need to stick to so this is why sometimes patients are pushed from one Dr to another for the medication they need unfortunately~~. If however you are an inpatient in hospital, on discharge, the hospital are supposed to send you out with enough medication to last you so that you don't have to worry straight away when you get home. There is a lot of money wasted on medications sitting in patients medicine cabinets that they don't need/use.

**Date of next meeting: Friday 3<sup>rd</sup> November 2017 1.30pm**