

Beauchamp House Surgery

Patient Participation Group

Meeting Minutes

Tuesday 05 April 2016

Present:

Staff: Dr Simon Schultz, Katie Francis.

Patients: BF (minutes), CP, DW (Acting Chairman), YA, PO, FW.

Apologies: JB, TB.

Matters arising from Minutes of meeting 26 January 2016:

PO asked about the review of Beauchamp House website. He said there are still some outstanding matters such as the Walk In Centre that was still being shown. KF said that her Deputy (who had recently returned from maternity leave) would be updating the website.

The minutes were then agreed as correct.

Membership:

All agreed to put this item on hold to await feedback on "Meet & Greet"

Communication from Surgery:

KF reported that Dr SD was happy with the surgery's contribution to the April News Letter. Discussion followed on the PPG contribution to include issues raised from surveys carried out and highlighted by the PPG. All pieces to be sent to KF. Next edition would be June 2016.

Forthcoming NHS and Practice changes:

KF reported on the new Online Services Records Access Patient Information. She said the Service came in to operation on 01 April 2016. She said that all patients wanting to access their records will need to register in person at the surgery producing appropriate ID. KF said that any patients not registering would continue to be able to order prescriptions on line but would not see their records. She said information given to registered patients would include test results but at this time letters of referrals and some other information will not be accessible. She said it would probably take a year or two before such information would be accessible.

KF reported that some specialist clinics were experiencing a lot of DNA's. Dr SS said that recently they had 3 DNA's in one afternoon. He said each appointment was for 45 minutes so a total of 2hours 15 minutes of doctor/nurse time was wasted. KF said this was particularly upsetting as (A) the surgery had received 'phone calls from these patients the following day to demand another appointment and (B) some patients had not been able to make appointments on the day of DNA's as the clinic was booked. She said they had no appointments to offer until May.

KF reported that the funding for the Dementia Clinic had been withdrawn but that the surgery would continue with the clinic.

FW asked if the surgery had a petition re junior doctors action. KF said no but they can signpost patients to the BMA.

KF reported that her Deputy had returned to work and was tasked with the job of tidying the website. This would enable the surgery to set up its Facebook and Twitter accounts.

PO said that the information on the electronic board was wrong regarding test results. KF said she would get it changed.

DW said she was very happy with the notice board suggestion. She said they would put pamphlets/leaflets on a table in the corner that was unused at the moment.

KF reported that the PMS (Personal Medical Services) funding was still available but Practices have to bid for it. She said it was a recurring funding. The Practice would have to fulfil a criteria in order to be successful. She said Beauchamp House was optimistic.

KF reported that with support from DW & CP interviews had taken place recently to appoint another doctor. She said candidates were of an excellent standard and difficult choices had been made. She said the surgery was very happy with the outcome.

KF reported that major changes to the appointment system were being made. she said extensive reception staff training was taking place to introduce telephone appointments. Dr SS said that many routine appointments can be settled on the 'phone. These included medicine reviews as patients can have blood pressure checked with the nurse or even give their own readings as some patients have the equipment to do this.

KF said that patients would be given a 15 minute slot in which to expect to receive a call from the GP. The GP would attempt 3 calls. If the patient does not answer it will be classed as a DNA. The patient would then have to make another appointment. Patients who need a physical examination would be seen at the surgery as normal. Advantages to this system is:

That it frees up time for acute patients.

More convenient for patients who work.

Easy to do.

Stops the spread of infection.

At the moment telephone appointments can only be arranged by a call to the receptionist. online telephone appointments are not possible at the moment.

Self- check Screen:

KF reported that a couple of changes to the screen will be carried out by her Deputy.

Friends & Family Test:

KF reported that the response in March was low. FW asked if reception staff were promoting it. KF said one member of staff was very good but some did not always offer the questionnaire. She said that when the telephone appointments increased, another system for promoting it would need to be put in to place.

NAPP:

DW handed out awareness week packs. She said that most of the recommendations to increase awareness of PPGs was already being carried out by the group. She said she is working on the leaflet and hopes to have it ready for Monday's Meet & Greet. FW and CP will attend the surgery on 11 April from 9.00am to talk to patients about the PPG. YA and FW will attend on Wednesday 13 April from 1.00pm to meet with new mums to give them information. Any feedback and/or questions will be given to KF.

MECCG:

PO reported that MECCG are highlighting the importance of attending an urgent referral appointment. He said if a diagnosis of cancer is detected in the early stage there is a 95% chance of recovery. If it is diagnosed in the later stage there is only a 7% chance of recovery. He said if a patient gets an urgent referral they should turn up for that appointment.

PO reported that the CCG is attempting to solve the financial crisis. He said it is one of 3 schemes in the country considering centralising more treatments. PO said this would mean patients maybe travelling further afield for the specialised treatment required. He reported that there had been a rethink re hearing aid service. PO said he would be attending a meeting to evaluate system support aid. This was to evaluate the software.

FW said she would be chasing up from pharmaceutical groups.

Carers:

PO reported that he had written to David Geddes sometime ago to ask when he was going to get GPs to implement the Carers Protocol. He said he had finally received a response saying it was not good practice.

PO reported that CCGs are to be given powers to influence GPs more strongly than previously. He had asked MECCG who responded saying "It was news to them".

PO reported that he had attended a Health Watch Meeting the previous Friday that went well. He said the National Charity for Carers are to ask all carers to complete a survey to see what support carers get. He said Beauchamp House protocol doesn't say it gives Flu jabs to carers. KF noted this and would rectify. PO said he was surprised to see a notice on electric board re Flu jabs. KF said they offer them from 01 October - 31 March.

A.O.B.:

CP re carpark asked if patients should be asked for their registration numbers to stop 'overstay' parking. KF said they do look out for offenders and put notices on the cars. She said not all are patients and some patients consider they have a right to park at any time because they are patients of the surgery.

Next Meeting:

A discussion took place re the Spring bank holiday. The decision was to leave the meeting as set on the calendar:

**31 May 2016 at 7.00pm
Beauchamp House Surgery**