

## MINUTES OF PATIENT PARTICIPATION GROUP MEETING

16 DECEMBER 2014

Present:        Dr H D Godley        GP  
                     Mrs Lynne Neal        Practice Manager  
                     Debbie Wright        Senior Practice Nurse (Care-Coordinator)  
                     Bev Lati                Reception Supervisor  
                     Jackie Embley        Hollybush Senior Receptionist  
  
Patients:- MH, RH, PG, JS, JS, SR, HH, SB, JB, CB, JT.

Note Taker:- Lynne Neal & Debbie Wright

Bev welcomed everyone to the meeting, thanked them for coming and invited everyone to partake of the Christmas buffet lunch.

**Friends & Family** – Lynne explained to the group that we had recently started taking part in a national “Friends and Family” campaign. This involves registered patients being able to feedback how likely they would be to recommend our practice, or the service they have received in our practice, to a member of their family or a friend. Lynne explained that the forms are available at both sites and once completed, just need to be handed in to reception. She also explained that these responses were anonymous, but if someone wished to receive feedback, they should put their contact details on the form. The group had not heard of this campaign and were sure that the practice would get positive feedback from this.

**Living Streets Stand** – Bev explained that a gentleman called Jim Shaw has contacted the surgery. He works for a charity that stands up for pedestrians called Living Streets. He is currently working in the Edenthorpe area delivering an older people’s project which aims to tackle barriers to walking for older people, promote short utility walking journeys and help reduce social isolation. He wondered whether it would be useful to our patients to have an information stand in the lobby at Hollybush Health Centre and talk to patients and residents about their walking habits. He would have a free walking handbook, especially created for older people that he would be able to give out along with lots of advice and tips. This would only be at the Hollybush centre as he was focusing on the Edenthorpe area. He assured us that he would not be “hassling” patients, but would engage with those who showed interest. The group all felt this was a very good idea and Bev will be looking into this as soon as possible. Some members of the group suggested he contacts a local chemist and/or local library. Bev will pass this suggestion onto him.

**Care Plan Reviews** – Debbie explained to the group that the practice is now involved in Care Plan Reviews for patients who are at risk of unplanned admissions to hospital and A&E attendances. Debbie asked if any of the group had received a letter from the practice regarding a review and

nobody had. She explained that she was also monitoring the A&E discharge letters and was writing to any patient where it was felt their problem could have been dealt with, as effectively, in a more appropriate way than attending A&E. This instigated a discussion with group who felt quite strongly that A&E should be used ONLY for emergencies. Debbie went through the alternative care services available for patients if they were unwell when the practice was closed. Most of the group were not aware of the Minor Injuries Unit at Mexborough and found the information useful.

**Electronic Prescribing (Going Live)** – The practice went live with this service in September. Bev and the group discussed some minor teething problems which appear to be mainly due to the chemists not being fully aware of how the system works. We explained that the practice CANNOT sign you up for this service, it has to be done at a chemist of patient choice, but that many patients were confused about this and were not fully aware of what they had actually signed up for. The group felt it would be useful to have an information notice board regarding this. We agreed this would be a good idea and we would arrange for this a display to be done. We also have information on the website and will put more information in the next patient newsletter.

**Christmas Opening Hours** – Bev asked everyone if they were all aware of what to do when the practice was closed. Everyone said they were. She explained that the opening hours were displayed at both sites and also on the website.

**DNA's** – Debbie had done some investigations into how many appointments were wasted due to patients not attending. We had 434 DID NOT ATTENDS over the previous four weeks. We have discussed this as a group before and once again, everyone was horrified at this complete waste of valuable appointments. A group member suggested we text reminders to patients and we explained we were in the process of gaining patient consent to do this. We explained to the group the restrictions we have to adhere to with regard to this and they were very interested to hear this and understood why we have to follow protocols.

**Group Presentations for future meetings** – We asked the group if they would find it useful and informative to have a guest speaker talking about male and female health, in particular, breast awareness and testicular awareness. The group were very interested in this and we will ensure we get a speaker for a future meeting.

**Any other business – (Interpreters)** – A group member thought it would be useful, and also a saving for the NHS, if a non-English speaking patient used a friend or family member to act as an interpreter. We explained that the interpretation service has changed over recent years and is now mainly telephone based using the Big Word. We also explained that some patients do not feel comfortable using a family member or friend. We also explained that the doctor, nurse and patient must be happy with the accuracy of interpretation during a consultation and this is not always possible with someone who is not registered.

**(Frail patients/patients who live alone)** – A group member wondered whether it would be possible for a doctor or nurse to follow up a patient who is frail and lives alone, who has been given medication to see if they have improved after a couple of days. Dr Godley explained that the doctors or nurses always stress to the patient that if they do not feel any better (or indeed they feel any worse) to contact the surgery. She also explained that it would not be possible to follow up every one of these patients. The group accepted this.

**Next meeting** – it was agreed this would be in March, when the nights had started to lighten. We thanked everyone for coming and for their valued contribution to the group. We wished everyone a happy and healthy Christmas and all the very best for the New Year.