

**Hessle Grange Medical Practice  
Patient Representative Group**

held on Thursday 11th April 2019 at 4.00 pm  
in the Large Meeting Room

Present:	(SN)	(PRG Member/Secretary)
	(AP)	(PRG Member)
	(CR)	(PRG Member)
	(RW)	(PRG Member)
	(AS)	(PRG Deputy Chair/Practice Manager)
	(JP)	(PRG Member/Office Supervisor)
	(LS)	(PRG Member/Administrator)
Apologies:	(PH)	(PRG Chairman)
	(EB)	(PRG Member)
	(SSG)	(PRG Member)

**ACTION**

**1. Welcome**

AS welcomed group members to the meeting.

**2. Minutes of the Annual General Meeting held on 24th January 2019**

These were agreed as a correct record.

**3. Actions from the Annual General Meeting held on 24th January 2019**

**3.1 U3A**

CR reported that a committee member from U3A had taken information into the surgery and CR had also brought leaflets to the meeting. She confirmed that this was in respect of the Hessle branch, as there are other branches in the area.

**3.2 Did Not Attend Information**

JP circulated information for the first quarter of the year, which had been broken down by staff group. AP asked if there is a policy for wording in respect of DNAs and JP advised this could be done by way of an appointment reminder. CR thought the breakdown to be useful and that the group should wait until the next meeting to compare this information with the next quarter. JP advised it is hard to include the total number of appointments. CR asked if it was possible to compare this with other practices, AS advised there may be some national information. She reported that patients with chronic conditions and those with appointments for smears were reminded by phone, but there was not enough time to chase up patients with appointments for bloods. Practice staff thought that getting patients signed up to SMS message reminders would improve attendance.

**3.3 Extension to List Closure**

AS advised that the practice had been given an extension to the list closure and that all of the practices in Hessle are now closed to new patients. As NHS England will have to allocate a doctor to new patients, a set number of new patients each month has been agreed. The practice would refuse requests from patients who already have a doctor in Hessle.

At the last meeting, the issue of GP provision in relation to new housing developments was raised and CR circulated information on this. Planners do not have to take this into account and it is up to each developer to collaborate with the NHS and find money. Discussion took place on this issue.

### **3.4 Telephone System**

AS reported that the problem identified with the telephone system could not be resolved easily. AP requested that if changes can be made in the future, that this be considered.

### **3.5 Terms of Reference**

SN pointed out that currently only the role of Chairman is limited to three years. CR also thought that there should be mention of grounds rules for the committee, including respect for other members. As changes could not be made until the next review, it was suggested that this be included in the agreement signed by members. A sentence on this could also be included on each agenda and AS would send SN a form of words. AS

## **4. Workplan**

In the absence of PH, this item was deferred to the next meeting.

## **5. Patient Update**

### **5.1 Doubling up on Admin Tasks**

RW had missed a call from the surgery, been advised to ring the Ferriby surgery, which was closed and the message advised callers to ring the Hessle surgery. He was then sent a letter as he had not made contact. AS advised that there had been a technical problem with the telephone system which had now been resolved. The issue of getting more patients to sign up to SMS messaging was again discussed. Patients had to agree to the practice using their mobile phone number. SN pointed out that patients without a smart phone could not “click” to give permission for this and gave permission for AS to send her a test text. AS

## **6. Practice Update**

### **6.1 Primary Care Networks**

A short video was shown. AS explained that as part of the GP contract, practices had to amalgamate. This would mean enhanced appointments, extra funding and integrating community services with effect from 1st July 2019. More staff will be employed - pharmacists (year 1), physiotherapists (year 2) and paramedics (year 3). Hessle Grange has signed up to be in a network with The Ridings, which covers Brough and South Cave. This will give a patient list of 40,000. It is thought that the other Hessle practices will network with practices in the Anlaby/Cottingham areas.

AP raised the issue of patients not being able to travel to other practices. She also asked about Warfarin testing at home. AS advised that this has been looked at previously but not agreed. CR asked if the network will include complementary therapies, AS replied these will not be covered.

## **6.2 Update on Practice Staff/Providers**

AS advised the group that a new salaried doctor, working four days a week, will start in June. A Nurse Practitioner was leaving and the post was being advertised. The new practice Pharmacist joined the meeting and introduced himself to the group. He explained his role, including medication reviews and answering patient queries about medication issues. He is also setting up a hypertension/blood pressure clinic. He is having an impact at the practice and has received a good response from patients. He works two days a week, Tuesday and Thursday. The group thanked him for attending.

AS advised that the practice no longer has an in-house physiotherapist, but was trying to employ someone. This service will be provided by the community physiotherapy service.

## **6.3 Proposed Change to Did Not Attend Policy**

AS explained that patients who did not attend an appointment are sent a warning letter each time. After three missed appointments over a 12 month period, they could be asked to leave. If no apology is received from the patient, a letter is sent. In the case of a child (under 12), the letter is sent to the parent. Discussion took place on safeguarding issues. AS confirmed that other agencies are informed if children regularly miss appointments.

## **6.4 NHS App**

AS reported that the NHS App is now live for the practice. This gives patients shortcuts to services and information. RW had tried to use this, but had been asked for lots of information. AS also advised that there is now free wi-fi in the large patient waiting area.

Practice staff are pushing for more patients to get on-line access. In respect of patient records, letters are not available but may be in future. Discussion took place on the issue of patients not being allowed full access to records.

RW raised an issue in respect of inaccurate information in a letter from Hull Royal Infirmary which could have affected an operation. He had raised this with the hospital and been informed that although national policy was for a consultant letter to be sent direct to a patient, they did not follow this due to cost issues. SN asked if this could be raised via the CCG.

## **7. Any Other Business**

### **7.1 Flu Clinics**

AS advised that the flu vaccine will be available the second week in September. This would be discussed further at the next meeting.

### **7.2 On-line Appointments**

AS advised that 25% of appointments are to be offered on-line. These were for GP appointments but the practice is also looking at offering nursing appointments on-line.

### **7.3 Minor Ailments**

AP asked where a patient should go with a particular minor ailment. AS advised the best place would be a Minor Injuries Unit.

#### **7.4 CQC**

AS reported that if a practice is rated good or outstanding, a telephone review will take place instead of an inspection. If any concerns were raised, the CQC would inspect.

#### **7.5 Apologies**

It was requested that when the agenda is sent out, the email should request members to advise if they are unable to attend the meeting.

**SN**

#### **8. Date and Time of Next Meetings**

Thursday 11th July 2019 - agenda items to SN by 4th July 2019

Thursday 10th October 2019

Thursday 12th December 2019 - Christmas Buffet

15.4.2019 (SN)

*Signed off by all present at the 11.7.19 meeting.*