

Hessle Grange Medical Practice

Minutes from the Patient Representative Group Meeting held on Tuesday 16th January 2018 at 4.00 pm in the Large Meeting Room, Hessle Grange Medical Practice

Present: (PH) (Chairman)
(EB) (Patient Group)
(BH) (Patient Group)
(SN) (Patient Group/Minute Taker)
(RW) (Patient Group)

(JP) (Office Supervisor)
(LS) (Administrator)
(AS) (Practice Manager)

1. Welcome and Happy New Year

AS welcomed group members and wished all a Happy New Year.

2. Apologies

Apologies had been received from the following members:

(BH) (Patient Group)
(AP) (Patient Group)
(SP) (Patient Group)
(SSG) (ERY CCG)
(CS) (Patient Group)
(LW) (Patient Group)

3. Minutes and Actions from previous meeting

The minutes from the previous meeting were not available, but PH would send these to AS for publication on the website. PH raised the following matters which had been discussed:

- The car park barrier was still not working.
- One of the screens in the reception was still not working.
AS advised that this is to be replaced as it cannot be repaired.
- Notes not minutes were to be produced following each meeting.
It was subsequently agreed, following discussion, that they would be called minutes.

- There is no blood pressure machine at Ferriby.
JP advised that it was not cost effective to provide one there and that patients can ask their GP to take blood pressure.
- A doctor and/or nurse should attend the PRG meetings.
AS advised that Dr B or the lead nurse would attend.
- There was no practice pharmacist.
AS confirmed that the pharmacist had left in the Summer but would be replaced.
- When using the automated telephone system, the music was distorted when the caller was on hold. Also, sometimes when the caller was being transferred, they went back to the beginning of the system.
JP would look into this.
- Whether it was the responsibility of the patient or the GP practice to chase up hospital results.
EB had experienced this and gave permission to AS to find out what had happened. It was confirmed that all hospital results are scanned into the patient's practice records.
- There was a poor uptake by PRG members to attend the flu clinics.
It was suggested this may have been because the meeting at which this was discussed was too far in advance of the clinics. It was agreed that a debrief of what PRG members should do at the clinics would take place before this year's flu clinics. AS reported that fundraising at the flu clinic had been successful and the money raised would be split between Macmillan and Tickled Pink.
- There was a backlog of access to medical records.
AS advised these had to be undertaken by a doctor but as far as she was aware, these were now up to date. Discussion took place on third party information being redacted from medical records and PH would look into this.

4. Patient Feedback

- Patient Comment Book
PH looked at the comment book and no action was required.
- Annual General Meeting
PH advised that, if elected, he would only chair the group for one more year. It was agreed, due to the low number of patient representatives at the meeting, that the next meeting would be the AGM. AS would send out an email asking for nominations for Chair, Vice-Chair and Secretary. It was also agreed that practice staff could not be

nominated as Chair of the group but could be nominated as Vice-Chair. The Terms of Reference would need to be amended to reflect this.

5. Practice Update

- **Change of GP for some patients**
AS advised that there were now nine doctors at the practice and new patients were being accepted. It was, therefore, necessary to re-distribute patients between doctors which would result in some patients being under a different doctor. As it was too costly to advise each patient, they would be informed when they rang the practice or if they were written to by the practice. This change was also on the website. If a patient was not happy they could ask to go back to their original doctor.
- **SMS messaging.**
The group agreed this was a good way reminding patients of their appointments. AS advised that new patients registering with the practice would need to opt out of this service.

6. Any Other Business

- **On-Line Consultations**
AS circulated paperwork in relation to on-line consultations. She advised that the practice was not considering this at present, as feedback from other practices identified it created more work.
- **Email Communications**
AS had received a request from a patient for direct email access to their doctor. The group discussed this and it was agreed there were other ways of patients communicating with doctors. PH agreed to advise the patient of the group's decision.
- **GP Extended Access - Patient Survey**
AS circulated a copy of the above survey being undertaken by the ERY CCG, for members to complete if they wished. This survey can also be completed on-line.
- **Learning Disability Event - 9th February 2018**
AS circulated details of this event. PH, BH, AS, JP and LS would be attending.
- **Plans for 2018**
PH advised that at the last meeting a PRG member had suggested better communication on all levels. It was suggested that group members could hold open days at morning surgery to raise awareness of the PRG in the hope of attracting new members. They could also promote services at the practice such as the use of the electronic booking-in system, SMS messaging and the on-line options available for patients. AS suggested

information about the PRG could also be put on the B-side of prescriptions. A who's who poster had been suggested at the last meeting. AS advised that this had been considered but was not felt appropriate as staff may be approached by patients away from the practice.

- **New Telephone System**
AS asked the group for feedback on the new telephone system in addition to comments already discussed. It was suggested by the group that information on the number of patients ringing for appointments should be compared, for example between Summer and Winter. AS would look into this.
- **Missed Appointments**
AS reported that the number of missed appointments can be broken down by staff group. A DNA letter is sent to patients who miss appointments and after three DNAs, the practice can refuse to see the patient.
- **Dementia Talk**
The group requested that SSG be asked to give another talk on dementia. AS to follow this up.
- **East Riding GP Patient Engagement Group**
SN asked if feedback was given from these meetings. AS advised that information is emailed to the group. No-one regularly attends these meetings but any group member can attend, though the number from each GP practice is limited. It was pointed out that the AGM is quite informative and this is open to all members. ID, Chair of the group, puts information about the meetings on Facebook.
- **Date for AGM and Elections**
The AGM would be held on Tuesday 20th February 2018 at 4.00 pm.

7. Date of Next Meetings

The following dates were agreed:

- Thursday 3rd May 2018 at 4.00 pm
- Thursday 28th June 2018 at 4.00 pm
- Thursday 6th September 2018 at 4.00 pm - flu clinics to be discussed
- Tuesday 13th November 2018 at 4.00 pm
- Thursday 24th January 2019 - AGM

AS would email all group members with these dates and also, as previously discussed, ask for nominations for election at the 2018 AGM.

At the last meeting it was suggested that patient members meet at 4.00 pm and staff members join them at 4.30 pm so that a more open discussion could be held between patient members.

As previously discussed, AS would invite Dr B or the lead nurse to attend meetings. The group also asked if it would be possible for SA to attend a meeting.

It was agreed that in future the agenda and minutes would be sent out to members a week before the meeting.

Summary of Actions from October Meeting

PH to send the notes of the last meeting to AS for publication.

AS to arrange for Dr B or the lead nurse to attend future meetings.

JP to look into issues raised in relation to the automated telephone system.

AS to look into issues raised by EB in relation to results.

PH to look into issues in relation to third party information in records.

Summary of Actions from January Meeting

AS to email to group members asking for nominations for Chair, Vice-Chair and Secretary.

PH to advise patient of the group's decision regarding email contact with doctor.

AS to look into putting PRG information on the B side of prescriptions.

AS to look into comparing telephone appointment information.

AS to contact SSG regarding another dementia talk.

AS to email the dates of future meetings to all PRG members.

AS to ask SA to attend a future meeting.