

Beechwood Medical Practice Patient Group Meeting

Wed 6th December 2017 - 6pm

Attendees: Cheryl Benson, Rowena Sutcliffe, Pat Foster, Subash Widge, Barbara Davies, Sylvia Rae, John Lawrence, Monica Grizzle, Denise Williams, Sarah McKay and Sarah Monteith

Apologies: Alan Pound, Roland Jempson, Sue Thomas

3. Matters arising from closed session

- No toilet rolls or paper towels in waiting room toilets. SMon explained the cleaning company takes care of ordering for all the paper consumables in the building. A new order has been placed and is due in on Friday. Last week's order has gone missing - CCTV being looked at to see what happened to it.

- Flu vaccination letters - queried why letters are still sent even after have had flu vaccine. (raised by a pt not in the group meeting - SMc will investigate after meeting if happy to give pt's name). SMon also explained that the letter and text sending works from codes in each patient record and if the flu vaccination had been coded incorrectly in the patient's record it may mean a letter would still generate as it would think patient has not had the vaccine yet. This can sometimes happen if there is a delay in information reaching us for example when a patient has a flu vaccination with a chemist provider.

SMon also advised the chronic disease letters work the same way and we contact patients up to 3 times before we code the patient as having given "informed dissent" for this year. It helps us tremendously if you do not want your review to tell us so we can code that and stop reminder letters being sent unnecessarily.

4. Notes of meeting held 6th September and any matters arising

- Pharmacy 4 U leaflets. SMon contacted Pharmacy 4U and apparently we can't stop them adding practice names to leaflets as they do also state, albeit in very small type, that the practice does not necessarily endorse their services
- Shingles invite letters have now been rectified to include some text that was missing.
- Patient survey - results have just come back and will be circulated with these minutes with a view to discussing in more detail at the March PPG meeting.

8. Flu Campaign (agenda items taken out of order due to SR needing to leave meeting early)

- SMon reported we have given nearly 2000 flu vaccines so far this year. We have been made aware of the performance of practices in Bristol for this service to date this year and we appear to have performed well, currently our achievements are as follows:-

- 2nd out of 48 practices for percentage of 2 yr olds vaccinated
- 13th out of 48 practices for percentage of 3 yr olds vaccinated
- 2nd out of 48 practices for percentage of under 65s with a chronic disease (i.e. asthma)
- 6th out of 48 practices for percentage of over 65's (nearly 70% of our over 65s vaccinated)
- 18th out of 48 practices for percentage of pregnant women vaccinated
- 2nd out of 48 practices for carers who have been vaccinated

The practice thanked those PPG members who had given their time to help at the Saturday flu clinics.

Sylvia Rae, the PPG treasurer, gave an update on the group's finances.

-£78.81 had been donated at Saturday flu clinics (£30 from the raffle and the rest teas and coffees). This gives us a total of £94.27 in bank account. The group agreed that SR should donate £85.00 to charity and leave the remainder in the bank to keep the account open. Gift aid was also discussed as this would bolster the donation amount, SR to explore whether this might be possible to register for.

Suggested charities put forward were :-

SENSE - children's charity for deaf and blind children

Hop skip and jump - provides rest bite care for kids and adults with special needs

Headway - supporting brain injury patients.

A vote was taken at the meeting and it was decided to support Headway and Hop, Skip and Jump this year as they were both local charities with one being a service for adults and one a service for children.

ACTION for September 18 meeting was to decide on charities to support - one of which to be SENSE as we could not support this year. It was agreed that it would be useful to have agreed the charities to be supported before Saturday flu clinics commence as we could then tell patients where any donations would be going.

5. Repeat Prescriptions - reminder of process

SMc advised that the practice is dealing with an increasing number of repeat prescriptions requests that are deemed as urgent. This is where the patient or chemist has not allowed enough time to give us the requested 48 hrs processing time and they want done at short notice. This has been identified as a risk because the doctor being asked to provide these prescriptions is being constantly interrupted to do this work and it is not being managed in a planned manner as other repeat prescriptions are.

In order to reinforce our repeat prescription process we are re-advertising the practice policy regarding this service - (there are posters around the waiting room and surgery corridors, on the website, on the TV screen and in Winter newsletter) These messages remind patients to order 1 week before they run out, that we will deal with the request within 48 working hours and how to order repeat prescriptions.

Part of this reminder advert is also advising patients that from 1st January we will not be processing urgent prescriptions (i.e. same day) unless the medication falls into a small number of categories where it is imperative that the patient does not stop taking their medication. This might be angina preventers, insulin, epilepsy medication, anticoagulants etc. This has been adopted by many local practices and it is not a decision we have taken lightly, we have decided to enforce this to help ensure we are prescribing safely. Anyone who does have an urgent prescription processed will receive a letter reminding them to plan ahead next time to avoid this happening again.

6. Update from Denise Williams - Patient Champion

- Locality PPG Meeting - report and actions. A meeting was held in September with representatives attending from several PPGs including our own.

The meeting was facilitated by James Picardo who works at the Care Forum. He initially broke the group up into smaller groups to discuss:-

- Motivation to joining a patient group
- What each PPG does
- Ideas for future PPG activities

See attached notes from meeting showing items raised under each of these categories

Suggested actions for individual PPGs to follow up were discussed at length in our meeting. Denise talked about her experiences of what a successful PPG does. It was suggested that we might be able to send a member to observe another local PPG group to see how we compare. ACTION - Denise to liaise with other PPG group and arrange for a visit if possible.

We also talked about encouraging other patients to take an active part in the group. It was suggested that it might be useful to put an advert on the PPG notice board for more members and carry out a skills assessment to identify areas where patients might be able to take more control themselves, ie organising the meetings, taking minutes etc.

-Ways to Wellbeing – A support session is run in our practice once a month to see patients face to face for up to one hour. We are lucky to have this resource and if not used we will lose it. Please raise awareness to other patients who may be lonely or isolated.

Action: SMon will also ask if a Ways 2 Wellbeing support worker may be able to attend a PPG meeting in 2018 to give more information.

- Carers Review - Mary Bennett from the Carers Support Centre, comes in to see patients once a month too. She can provide valuable support and information to carers who may be feeling isolated and can also sometimes provide some very practical solutions to problems. She can also be a helpful person to talk to if a carer has been bereaved.

7. Update from Healthwatch representatives

-Pat Foster advised that her Healthwatch role has changed and now is representative for South Gloucestershire and Bath and North East Somerset. She will check if Nicola wishes to remain as our representative. Pat is no longer involved in attending the One Care meetings, so if anyone else would like to attend please let her know. It was felt some are put off attending as meetings are other side of town, but there is potential to move the meetings to this side of town if they can find a venue.

Action: SMon will contact one care to let them know they can use this room at FPCC.

Our three local CCGs are merging to form one new BNSSG CCG. (previously were Bristol; South Gloucestershire & Bath and North East Somerset)

Improving access to psychological therapies (IAPT) is currently being recommissioned and will also now be provided across this wider BNSSG area.

Accessible Information Standards – new regulations regarding this came into force in July 16 - and is about how we make adjustments for patients who have particular communication needs, this might be for patients with hearing or sight impairments or for patients who want information in simpler to understand formats. SMon advised that part of our registration form asks how patients would like to be communicated with.

8. Any other business

Practice news:

-Dr Layla Guscoth, a Foundation year 2 (F2) doctor, has joined the practice for her GP rotation placement. Dr Guscoth will be with us from December until April 2018 and is mentored by Dr Dodoo and Dr Gwilliam.

-Dr Hannah McIntosh will be away from the practice next year whilst she takes extended maternity leave and plans to return in February 2018. We have arranged for Dr Rosie Campbell to cover her absence from January 18 until June 18 and then Dr Rachel Bate will be working with us from July 18 until January 19.

RS asked if the practice had considered having any open access appointments - i.e. sit and wait to be seen appointments at the end of surgery. SMc advised the practices she knows that do this do not have a duty GP available all day. In this practice we allocate a duty doctor each day who is responsible for managing any patients who medically need to be seen but for whom we cannot provide a suitable routine appt. We believe that this model has worked well for our patient demographic and we do not have any current plans to change.

RS also raised a concern about autism support services – her experience has been that they are not working as well and are being reduced. Pat Foster advised this is something Healthwatch would be interested in knowing and that she may be able to help.

JL asked about the balance of male/female GP's. SMon advised we have a relatively equal balance in the practice with 3 male doctors working 25 sessions and 4 female doctors working 25 sessions. It does seem that there are fewer doctors looking for full time (8 session) posts nowadays and there has been a significant increase in the ratio of female to male doctors training to be GPs in the last twenty years. There are increasing reports of practices who are struggling to attract enough GPs, to partnership positions or as salaried GPs however we have been lucky enough to not have any unfilled vacancies and we have a relatively young partnership with succession planning in place for the coming years. The reduction in the availability of traditional GPs to fill posts has prompted many practices to look at new approaches to delivery of care such as emergency care practitioners, pharmacists and nurse practitioners.

Suggested dates for next years PPG's - Wed 7th March; Wed 6th June; Wed 5th September; Wed 5th December.