

Minutes of Primrose Bank Medical Centre Patient Participation Group Meeting Held on Thursday 12th April 2018

Present

Staff – Vivienne Smith (Receptionist), Julie Bartram (secretary).

Patients – Graham Haworth (chair), Valerie Haworth, Pamela Chadwick, Kenneth Riley, Shila Chudasama and Roger Harling.

Apologies – Valerie Edge, John Chadwick, Raman Mistry, Ram Sharma, Roger Brookens and Pat Cook.

Welcome - Graham welcomed all to the meeting.

Minutes of last meeting and Matters arising

Prescriptions on demand: We are still getting fewer prescriptions being ordered and the system is working really well.

Patient Access: Due to a lot of hard work by Caroline and the other receptionist are targets were met. This was an excellent achievement.

Coffee Morning: This was a great success and raised £308.04 for MacMillan Nurses. Some of the excess cakes went to a nursing home, some to the local pharmacy and the others were eaten by the staff, and none went to waste. However it was suggested that for the next coffee morning people let us know what they are making so we can monitor the amount. The only complaint was that we had said we would serve some downstairs for patients who cannot manage the stairs but unfortunately we are unable to do this as they are clinical rooms.

Carol Service: good attendance

Nurse appointments: Both nurses have settled in nicely. This will be discussed later in the meeting.

Flu vacs: Went well, all vaccinations used.

GP Referrals: Nothing has been heard regarding GPs not being able to refer to the hospital, I, Julie confirmed that referrals are still being sent as normal.

Care.data: This has been scrapped for the moment.

Spelling mistake on message machine in reception: This has now been corrected.

Minutes were accepted, proposed by Graham and seconded by Pamela.

Staff Changes/Nurse training

Caroline Bramwell has left the practice and has been replaced by Alex, a young girl aged 19. As the practice is struggling with some admin (coding hospital letters), Alex will be learning coding and doing that in addition to being in reception.

Dr Shukla has also left the practice as she has joined Dr Mather's practice as a partner. Due to funding cuts we do not intend to replace her at the moment but have 2 female locums, Dr Qureshi and Dr Jacobs, coming in part time.

Louise, or senior nurse is on an advanced nurse practitioner's course and once completed she will be able to see patients and will be able to prescribe. This will ease pressure on the doctors. We also use the sexual health clinic at Barbara Castle Way when appropriate.

Our other nurse, Jacqui, is now training in COPD and smears. She is being mentored by Louise. Once completed she will be fully trained to do all reviews.

Both nurses do a late night till 7pm. They get on very well and have settled in to the practice nicely. The patients in at the meeting who had seen the nurses all seemed to like them.

Care Navigation

Everyone at the meeting was given an information sheet which outlined the system. When ringing the surgery for an appointment the receptionists will ask the reason for the appointment and will signpost them to the most appropriate service, be it pharmacy, dental, care network hub, minor eye care, well-being or spinal drop in, and will have telephone numbers to give patients. Posters will be put in the waiting room informing patients of the change. This is not compulsory but has been piloted and developed in Wakefield and is recommended. Most GPs in Blackburn with Darwen are implementing this.

There will be a message on the telephone when you ring, probably from Dr Mashar, to explain why the receptionists are asking the reason for their call.

All the receptionists will have to do training for this and will need to pass an on-line test. Viv and Helen are training on 1st May. We do not have any more information as yet but Viv will obviously know more after the training.

Ken said that under this system telephone calls will take longer and the phone lines will be busier and wondered whether our telephone system could cope. It was also suggested that when changing the message that we replace the message about change of opening hours as this has now been on for a long time and is no longer needed.

It also relies on patients giving the correct information. The patients were concerned about the staff welfare as there will be a lot more stress for receptionists. There was also some concern that receptionists are not clinical and sometimes the problems are only picked up when talking to the GP.

Pamela wondered whether we could have another meeting to discuss this after the training and everyone else at the meeting thought that this would be a good idea. We do not have a start date as yet for this but we cannot start this until all the receptionists have done the training. Once we know more a meeting will be arranged.

Macmillan Coffee Morning

This year's coffee morning will be on 28th September from 11.30 to 2.30. We will be grateful for raffle prizes and for baking. This will be promoted as usual with a large board in reception, and with invitations being sent out with prescriptions or handed out in reception. Shila said she would be happy to help.

Any other Business

Touch screen: although the patients at the meeting like the idea of the touch screen there was some concern about the personal information on the screen which could be seen by anyone stood around. We said we would think about this and see if there is a solution.

Ken pointed out that he had just seen nurse Jacquie and that she was not aware that we had a meeting. Viv wondered if they would like us to talk to the nurses with a view to one or both of them attending a meeting to answer some questions. The group liked that idea as they thought it would be very interesting.

Ken also said that he had read something about Primrose Bank closing down. We reassured him that this was not the case. Brookhouse has recently amalgamated with another practice and moved to Barbara Castle Way, and we have now taken on some of their patients. Perhaps that was where that had come from.

Ken asked about referrals stopping. As per matters arising from last meeting this is not the case. We are still doing just as many referrals, though they are changing so no paper referrals will be sent. The 2 week rule referrals will be electronic as from 1st May and I, Julie, and Helen are training on this on 24th April.

Ken also picked up on the fact that Viv had mentioned earlier that our funding has been cut and asked why that was. We didn't know but said we would ask.

I have spoken to Helen who said that this is not a problem with our surgery. Funding to GP practices has been cut nationally.

Viv pointed out to the meeting that we are now able to book emergency, on the day appointments at other surgeries in addition to the slots we block off. Our appointments open at 8am and 1pm. The spoke appointments open at 10am and 3pm.

Pamela wanted to point out that she has noticed that waiting room is looking shabby and could do with a lick of paint. She also commented on the horrible state at Ewood.

Pamela thanked Graham for chairing the meeting.

Next Meeting: to be chaired by Graham – date to be decided after training on care navigation. Then the following 2 meetings will be chaired by Ken

After consideration it was decided that we will be unlikely to fit in a meeting after training on care navigation before we go live. However, if it is ok with everyone, it would be better if we could wait until we have implemented this to see how it is working, when we will then have more information.