

MINUTES OF THE LUPSET HEALTH CENTRE PATIENT PARTICIPATION GROUP
(PPG) HELD ON TUESDAY 16TH AUGUST 2011 AT 1.45pm.

Present: 13 members in attendance as listed on the formal minutes

Apologies: 6 apologies received

Item	Description	Action
1	The Chair thanked everyone for attending.	
2	<p>He asked if the minutes were a true reflection of the last meeting. Everyone confirmed they were.</p> <p>Then went onto explain that one member could not make it on Tuesdays, in light of the virtual meeting option offered to step down if someone else wanted to take her place. It was decided unanimously that she would remain in the group as she could bring a wealth of knowledge and experience to the group.</p> <p>He went onto discuss items from the minutes that Janice had mentioned:</p> <p>Member's statement that she believes telephone triage is a good system and often recommends it to friends. The operations manager explained Triage again. It is a way of prioritising and mutually agreeing whether the patient needs to see a GP or whether advice can be given over the phone. An appointment may not be needed; you can speak with a doctor over the phone to decide what line of action is required. If the call is about a prescription issue the Prescription Clerk will attempt to sort it out first. If she cannot she will make a list which is presented to the Triage GP at 1200 and a return call will be made to the patient. Triage is available from 9 – 11.30.</p> <p>A member asked if there was a similar option for obtaining advice about medication. The Chair said that there are several ways of finding information about medication (patient information that comes with the medication, advice from pharmacies etc). If a patient is in any doubt about the medication he/she should call the prescription clerk as outlined in the previous paragraph.</p> <p>Appointments can be booked on the day in question with two types; urgent – required there and then or non urgent</p>	<p>Chair to add Triage details to FAQ's list</p> <p>Chair to add to FAQs</p>

	<p>can wait a couple of days, these can be booked up to 2 weeks in advance, 4 weeks was tested, but it was found to be non viable as it produced a lot of DNA (does not attend) due to people forgetting or deciding not required anymore and forgetting to cancel.</p> <p>A member asked the best way around when a doctor states they want to see someone in 4 weeks time. Dave explained that this would be waiting 2 weeks and then books an appointment in 2 weeks time.</p> <p><u>Pre payment for prescriptions,</u></p> <p>The pharmacy member says that this can also be arranged at the pharmacy and it is something that her pharmacy offer if they become aware that it is required.</p> <p>One asked if the website was up and running yet, Dave said it was, he would talk about this more later on in the meeting</p> <p>Another asked if the suggestion box could be fastened down as when he was looking at it earlier it actually fell of the desk. The chair also stated that it was not very confidential as the suggestions could be seen from certain angles. The suggestion box would be fitted to the reception desk.</p> <p>Another also asked if 3 people could primarily deal with the suggestions left in the box, the chair explained that this would be dealt with further in item 6.</p>	
	<p><u>PPG (Patient Participation Group) leaflet</u></p> <p>A member requested further information on this.</p> <p>It was mentioned in the last meeting that members names would be added to the leaflet, the Chair requested that due to confidentiality all members him know if they are happy for their name to be added on the website and leaflet.</p> <p>A member asked who had access to the list of names and contact details which were sent with the last minutes, the Chair explained that the only people who had access is member of this group, they are held on a separate database.</p>	
3	<u>Chairs for Waiting Room</u>	

	<p>The chair explained that the chairs had been ordered but they have just been informed that they are out of stock and have to be made to measure, the price for these has been increased from £130.00 to £260.00, it has been decided that a different supplier would be sourced. The chair requested this be re-added to the ongoing items.</p> <p>Someone stated the chairs in the waiting room that are broken, perhaps moving them out of the way would be better. The operations manager explained that these had only been broken that morning; the feet have come away at either end, making them unbalanced. There were signs on them stating they are broken.</p> <p><u>FAQS (frequently asked questions)</u></p> <p>The chair explained this is still a work in progress and he has a lot of items to add.</p> <p><u>Suggestion box</u></p> <p>As previously mentioned.</p> <p>A member asked for clarification on item 6 of the last minutes where it stated if a suggestion was put forward with no details on this would not be acted upon, this should in fact have read; would be acted upon but no feedback given, due to no contact details.</p> <p><u>Process as follows:</u></p> <p>Suggestion submitted Staff discuss. If expenditure – goes to partners for decision. All suggestions brought to PPG meetings.</p> <p><u>Patient leaflet</u></p> <p>The chair thanked the volunteer for the work he has done on this, and asked for it to be documented in the minutes. 95% of the suggested amendments have been made and he asked that the member re check this, which he agreed to do.</p> <p>The leaflet has items added to it previously and tweaked; it has never actually been re written as is has now.</p> <p><u>Website</u></p>	<p>Ongoing</p> <p>Awaiting repair</p> <p>Ongoing</p> <p>Ongoing</p>
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	<p>As previously mentioned in item 2, This is a brand new website incorporating details from the old one. To view this there are two ways. Go to www.google.co.uk and type in the search field Lupset Surgery or directly to the website www.lupsetsurgery.co.uk . The chair asked everyone to view this and if they have any suggestions to let him know.</p> <p>The operations manager was told that the repeat prescriptions link was not on the website; The chair explained that this item should be there and said he would look into it.</p>	<p>Work in progress</p> <p>Chair to look into</p>
<p>4</p>	<p><u>Terms of Reference</u></p> <p>The terms of reference was issued at the meeting (see appendix 1)</p> <p>The mission statement was read by all members and agreed to be correct.</p>	
<p>5</p>	<p><u>Update on Health Centre</u></p> <p>Extension</p> <p>The extension is now in use, nurses primarily use the additional rooms 16 – 21.</p> <p>There are 6 rooms in total, all are capable of being consultation rooms but are being used at the moment as 4 consultation rooms and 2 treatment rooms.</p> <p>The two treatment rooms are capable of carry out minor treatments: i.e. smears and skin tags etc.</p> <p>There are 5 practice nurses available at the centre along with 2 Health care assistants.</p> <p>Health care assistants are trained as basic clinical assistants and can complete things such as blood pressure assessments, wounds re dressing etc.</p> <p>Practice nurses are trained with all of the above and specialise in certain areas such as Asthma, COPD, diabetes and Heart disease.</p> <p>One nurse is trained as poly-morbidity (asthma/diabetes and CHD) this was meant to save time and money, but patients prefer to see the same nurses they are used to.</p>	

	<p>Nurse Practitioner</p> <p>The new Nurse Practitioner started working at the centre last Monday and is full time</p> <p>A nurse practitioner is trained to see about 80/90% of the patients that doctors can, but usually does not see patients in the longer term. She can deal with acute (short term, “book on the day” minor injuries and illnesses such as rashes, sore throats etc .</p> <p>Nurse practitioners have been very successful in other practises and Andrea is able to deal with approximately 35 additional appointments per week, which will take the strain off GPs.</p> <p>One member asked who she is directly responsible to. The Chair explained that she comes under the same guidelines and governance as doctors in the fact of diagnosis and prescription of drugs, but primarily she will be responsible to the patient.</p> <p>Someone asked how patients are being made aware that there is a Nurse practitioner and what she is there for.</p> <p>Dave explained that at the moment, receptionists are directing patients to her, asking if she can help, the patient usually then tells them what is wrong, the receptionist can then either book an appointment with the NP if an acute problem or the doctor if long term/chronic problems. The chair to add information to FAQS and website about the Nurse Practitioner.</p> <p>Physio</p> <p>The practice has a physio therapist on site 10-6 on Thursdays. There is a leaflet available on reception which speaks about back pain.</p> <p>The physio is available to all patients but can only be done via doctor’s referral. This is to try and assist in cutting down on hospital appointments, physio may help rather than operating.</p> <p>Chair to update the website with self help options, NP and Health trainers may also be able to refer, (Dave to look into this).</p> <p>Out Reach Clinics</p> <p>The outreach clinics are NHS run and are on the principles</p>	<p>Chair to add to Website and FAQ’s</p> <p>Chair to add self help details onto website</p> <p>Chair to look into the possibility of NP and Health trainers referring patients to the physio therapist</p>
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	<p>of the 18 weeks option whereby if Pinderfields hospital is busy the patient can opt to have all pre hospital checks done at the surgery but the actual operation would be carried out at another hospital i.e. Huddersfield. This covers some major surgeries such as knee operations.</p>	
6	<p>Patient suggestions</p> <p>The chair read out the suggestions received since the last meeting.</p> <p>(See appendix 3)</p>	
7	<p>Any Other Business</p> <p>A member stated that she noticed a sign in the waiting room stating that thousands of items of medication are wasted.</p> <p>She has a monthly repeat prescription and only ticks what is required, every month she receives items from the pharmacy next door that she has not requested, upon checking this with them they stated that the error was due to the surgery adding the wrong items when the prescription was made out.</p> <p>The chair explained they had asked the same question and was told that this was down to relatives ticking all the boxes not knowing exactly what is and is not required. The patient's worry was that if this is happening throughout with all prescriptions that this is wasting money. The Chair went on to explain that the pharmacy gets a dispensing fee for each item dispensed, but the practice is charged for each item prescribed, which comes out of their budget. It is clearly not in the practice's interest therefore to tick every box and nor would be able to do this. He has recently had a meeting with the manager next door and they were working together to resolve this but it now seems like the pharmacy are using different excuses dependant on who asks the question.</p> <p>The only relationship that they have with Boots the chemist next door is it is linked via the building; they have the same landlord and nothing more. Any chemists can be used to dispense/delivery prescriptions.</p> <p>A member wondered if this was general practice throughout with all pharmacies doing the same. If this was the case this would be costing the NHS/surgeries thousands</p>	

unduly.

Another also explained that she had notified the pharmacy that she would be away on holiday but the delivery driver still delivered her prescription and left with a neighbour that she did not even know. There were DDA drugs included in the delivery.

A third asked when tablet reviews should be carried out, it was explained that this is yearly.

Another explained that she had previously had a problem with the chemist next door to the surgery and contacted Boots head office. They were quick to contact her and the matter was resolved quickly and very well.

A member asked the Chair if he had details of when the next PCT meeting was. The chair explained that he didn't, but if he was happy he would pass on his details to the PCT rep for her to contact him.

A member asked if a leaflet from Castleford and district Cancer Self Help group could be left in reception/waiting room. The chair said that this was okay. A brief overview of the leaflet for those not in attendances (see appendix 2)

Someone said he had cause to contact the surgery and request a home visit; he would like to thank everyone concerned they were excellent.

The Chair showed everyone how the automated telephone system worked, when booking a new appointment

This is done as follows;

As soon as you hear the voice press the number you require if you know this (you don't have to wait for all the options)

2 is the automated system

Press 1 for a new appointment

Press 1 for any doctor

Press 2 for any male doctor

Press 3 for any female doctor

You then have to add your date of birth in dd/mm/yy

Then your telephone number 6 digits 123456, this will then search the system and find the next relevant appointment

	available. AFTERNOTE; On the demonstration there were no available appointments, but when the operations manager checked after the meeting there was an appointment available. The Chair is to contact the software supplier to see if there is a problem with the software search facility and feed back to the group.	Chair to contact software supplier
8	Date of the next meeting Monday 19 th September 1.45pm	

APPENDIX 1

Lupset Health Centre Patient Participation Group – Mission Statement

Lupset Health Centre Patient Participation Group is designed to act as a bridge between the health care it provides, its patients and the staff.

The partnership of up to 20 willing contributors will endeavour to represent a broad spectrum of age, gender, ethnicity and interest/experience so as to provide an accountable method of input and feedback to and from practice personnel and service users in order to facilitate the smooth operation of The Health Centre and assist in transition to any future changes.

The Patient Participation Group terms of Reference (TOR)

- The total number of members within the group should be approximately 18-20.
- Should any additional patients enquire they should be informed that the list is unfortunately closed (due to physical constraints), but they can still take part by receiving minutes and commenting on items for discussion.
- Matters discussed within the room will always be assumed confidential unless otherwise stated.
- All members are equally important and all opinions should be respected.
- The meetings will normally last no more than 90 minutes unless otherwise stated.
- The meetings should not be used to air personal grievances which should be addressed using the practice complaints procedure.

- The agenda should be kept to matters of business only (due to time constraints). Any additional business should be raised under Any Other Business (AOB).
- Members should inform the Secretary or Chair of any agenda items before the meeting.
- The Secretary is to keep a record of decisions in the form of brief minutes for each meeting.
- If a decision needs to be made then this will be done by a show of hands. In order for the decision to stand there should be a minimum of 12 members present (including the Secretary and Chair).
- Initially the meetings should be held once a month. However if agreed by the members this can be reduced to no less frequent than once per quarter.
- Apologies should be sent to the Secretary or Chair prior to the meeting if any member is unable to attend.
- These Terms of Reference are to be reviewed and any changes agreed annually.

Appendix 2

Castleford and District Cancer Self Help Group

This is a registered British charity established 1985 in order to provide support for cancer patients, relatives and friends, The group is a voluntary organisation which endeavours to provide members, their families and carers with a reasonable quality of life.

Visits and Support

People can arrange to have visits within their own home or hospital before and after an operation and during treatment. The group arrange trips and social events for group members.

Meetings

These are held on the third Wednesday of each month at **Kellingley Social Centre, Knottingley at 7.30pm** Guest speakers are invited to give talks on various subjects, including **Orthodox and Complementary Therapies i.e. Homeopathy and Reflexology etc.** There is also a library holding various books and tapes for loans. Light refreshments are provided, or drinks can be obtained from the bar.

The Committee

This is run by people who have been diagnosed with cancer, relatives, carers, friends and professionals, including Dr Ian Rothwell a retired Radiotherapist Consultant and many people who have a vast amount of experience of cancer.

The group is closely linked and associated with

CRUK, MACMILLAN SUPPORT, DR JACKSON FUND, PRINCE OF WALES HOSPICE, THE NATIONAL ASSOCIATION OF CANCER SELF-HELP GROUPS AND THE NATIONAL ASSOCIATION OF CANCER PATIENTS AND CARERS AND WAKEFIELD NHS TRUST.

Further information is available from

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Honorary President - Dr Ian Rothwell
0113 2695889

Appendix 3

LUPSET HEALTH CENTRE PATIENT COMMENTS AND SUGGESTIONS

Method of capturing comments and suggestions:

- Suggestions box placed in waiting room.
- Electronic link from website to practice email account.

Each comment is:

- Logged by the General Manager.
- Reviewed where applicable by the appropriate staff.
- Fed back to the Patient Participation Group for more discussion if required.

Date received and means (Suggestion Box or I/net)	Patient (if known) and feedback requested (Y/N)	Comment or Suggestion	Action
22 Jul 11	IM (N)	Thanks for the late night surgery last night. It was great and a huge help for me. Once again THANK YOU very much for working late.	Passed to all staff.
10 Aug 11 Suggestion Box	PT (Y)	Book appt via S1 on line. Only appointments showing were for following Thursday and beyond.	Explained that only a small amount (25%) can be available for booking on line and by P/P and these are normally booked in advance. He wanted some to be available for book on the day. Will look into this. *
10 Aug 11 Suggestion Box	Not known (N)	Saw Dr this morning. So easy to talk to. This is how GPs should be. Also reception getting much friendlier.	Passed to Dr Jones.
Undated	An anonymous person	I thought the old box was superb.....	*

* Discussed within the group and decided unanimously that allocating further appointment slots to the internet side of the appointments for 'book on the day' was not viable and would be too much additional work for staff to maintain.

* Wonder who submitted this one?