

## **SOUTH HOLDERNESS MEDICAL PRACTICE**

### **MINUTES OF THE PATIENT REFERENCE GROUP (PRG) CORE MEETING HELD ON 8<sup>th</sup> October 2014**

<b>PRESENT</b>	GK (CHAIR)	Julie Withey (JCAW) Business Manager
	RW	JM MM
	MB	CW

#### **1. Apologies GMP/EH/SW/GP Dr H**

#### **2. Minutes of Meeting held on 25.6.2014 and matters arising from last meeting not covered on agenda**

- Item 4 from Feb - Confidentiality statement – Agreed new form circulated by GK and GMP needs to action get signed by all – still outstanding as GMP not at the meeting
- Patient Champion update – some have now been trained and the plan is for some work to commence , early days at present. Ellie has moved onto pastures new.
- New Appointment system – several weeks in now and constantly being fine-tuned. Full review pending by year end.
- Telephone system up and running teething problems sorted . Dr H gives opening message generally well received.

#### **3. Health Forum Feedback – GK**

GK gave feedback from the forum which she had attended on behalf of the group. There had been some concern over how the First responders role had been put into question due to the Fire service taking on part of the responsibility . General discussion over Yorkshire Ambulance Service

#### **4. Primary Care Development – GK**

GK explained she is now the a public representative for the Primary Care Development Group. She told the meeting that the group was very positive and had 5 lay people (previously they were health or charity work involved) Now working in sub groups . Areas covered include GP staffing which is at crisis level with one-third of training courses unfilled. This has a knock on effect in our area as trainees with the Practice often remain with them on completion of their training. Many GP's are now retiring (11% are over 50 in this area) and not returning to do part-time work or locum cover, as they have in the past.

They are looking at development and integration of services, self-help, recruitment and retention, nurses training to take some pressure of the GP's, quality of service, streamlining, A & E admissions and hospital deaths. There is a budget of £1m for a small pilot for a way of working that will relieve the pressure on GP's on whom the demand for care often falls. They are also looking at nurse development. GK told the meeting she was on a skills mix group. She will update the group again on how the work progresses.

## 5. Flu Clinics – JCAW

Been well received. We have had several clinics now and initial feedback is that patients feel the clinics have been well run with quick flow through and little waiting . RW confirmed his experience had been very positive. We have low uptake compared to national figures and therefore we are doing everything possible to encourage uptake. We have had a full page ad which ran in the Gazette last week and have posters around town. We will be mailing all eligible patients in due course . Script messages will be put on as additional reminders. Please spread the word.

Fluenz the nasal vaccine for all 2/3/ and 4 year olds is also moving slowly.

Differences in old and new vaccines. This vaccine is a dead virus and therefore cannot give you any 'flu'

## 6. Staffing JW

An update on recruitment was given. We are recruiting a Nurse practitioner and looking for an Admin team member and potentially a further receptionist. We have an ad out for another apprentice.

RW told the meeting he had seen our new partner and felt he had a good service

## 7. Feedback on the New Telephone System

CW asked about the online availability for booking appointments and the timing of these JW agree to get further information on this topic and report back

The feedback was given that the reception booking system was 'marvellous ' In particular our youngest member of the team Maisie who was our previous apprentice was highlighted as giving great friendly greeting

## 8. AOB

**Van driver** – recruited and started in the last week . Softly softly approach .. Doing 3 x 3hours weekly. Will be reviewed and how to use service will be completed after initial weeks.

**Dispensary at Roos.** We have had the dispensary extended and have moved repeat dispensing for all sites to this location. This wil improve our efficiency and timescales will not be affected. We will maintain exactly the same service for patients. The working environment will be better for staff as there is more space.

**Friends and Family Test..** part of contract from 1<sup>st</sup> Dec that the FFT question is up and running to provide feedback . This replaces the patient survey from previous years and has been used and still is in hospitals. Update at next meeting.

**Productive General Practice** – this is the change management programme we are piloting. It is a slow roll out but initial data which is the key starting point have just been done. We have yet to analyse and a full team meeting will then be required.

## 9. Date of next meeting 4<sup>th</sup> December 6pm