BEECHWOOD MEDICAL CENTRE (BMC)

Minutes of Patient Reference Group (PRG) Meeting held on Monday 1st February 2016 at the BMC.

Present: Elliott Summers (BMC, Chair), Alan Machin, Brian Richardson, David Llewellyn, Julie Rawson, Sally Harrop, Doreen Donnelly, Pat Tighe, Pauline Luniw, Patricia Bamford, Michael Walker, Ian Smith.

Dr Mark Rastall, BMC GP Partner, joined the meeting around 1140.

Apologies: Bev Quinn

1. Introductions

The chair welcomed all attendees and thanked them for their time and effort.

1. Beechwood Update

The chair proceeded to inform those present of the current service delivery status and also worked through the minutes of the last meeting. Attendees were provided with a copy of the 2015 complaints review document, due to the high attendance this was also emailed out to requesting members as enough hard copies were not available for every member. The complaints review indicated that despite a growing list the number of formal complaints had remained stagnant, and the number of fully upheld had reduced to the value of three in 2015.

* 1. List growth – The list has grown from 8385 at the last meeting (November 2015) to 8405 on the day of the meeting, therefore growth of 20 in three months.
	2. GP Waiting times – For the past 3 months the average waiting time for an unspecified GP for the first callers at 0800 each weekday had been less than 7 days. Access in general had been good from December onwards due to extra funding being made available from CCG, in relation to Beechwood this had a financial value of £8,000 and all of this money had been spent on extra GPs. With the funding now exhausted it is inevitable that waiting times will suffer. Now that patients have become very familiar with triage this service is being over utilised to the detriment of routine appointments. Patients failing to attend was discussed. It was highlighted that text reminders had reduced non-attendance and also that people tended to non-attend more often the longer they had waited for the appointment. The BMC understand that good access and short waiting times will reduce non-attendances and make the whole operation more efficient. There is a large internal meeting planned for 10th February 2016 when staffing and access will be fully reviewed and a subsequent plan of action documented.
	3. Seven day opening – The BMC remains committed to seven day opening. Item closed.
	4. Internal doors – It is accepted that the internal access doors would benefit from automation. If/when the business can afford to do this then the doors will be upgraded again to automation.
	5. Appointments explanation leaflet – The chair thanked those responsible for their feedback. The item has been on hold due to workload and a potential amendment to appointment protocols as a result of the planned meeting highlighted in 2.2. Those present felt that any appointment information leaflet should also go onto the website, this was accepted.
	6. GPs booking follow up appointments- This had been fed back to the Partners at the last meeting. Some members present confirmed that this doe happen but not every time.Item closed.
	7. Flu clinic –The chair will ask the organising staff to attend the mid-Summer 2016 PRG meeting to agree the methodology prior to the 2016 flu season.
	8. Wi-fi- This has now been installed in the building but is not for public use as its core function is to support the recording of the telephone system. Item closed.
	9. E-mail appointments – This project is still ongoing as several concerns re security and information governance which need to be addressed before it can be progressed. This will be considered at the internal meeting referred to in item 2.2.
	10. Disabled car park signage – This has now been erected, thanks to Brian for finding a supplier for us, your help much appreciated. Item closed.
	11. Fold-up wheelchair – There is now one available for public use stored behind reception. Item closed.
	12. Call screens – The screens have now been amended to keep the information on the screen for an extra 20 seconds as requested by the PRG. As yet we have been unable to address the glare issue. Item closed.
	13. Wires on illuminated signage – The chair has discussed with the pharmacy owner who has given assurances that this will be rectified.
	14. Statin colours and changes – The chair apologised yet again for making no progress in this area and will do so before reporting back at the next meeting.
	15. The chair at the previous meeting had asked for questions for the next patient survey. These mostly centred around appointments and access. As the annual survey is no longer a contractual requirement, and a full access/staffing meeting had already been planned, the BMC decided not to conduct the survey this year. The internal audit of complaints and significant events along with feedback from the PRG has reassured the GP Partners that they understand with some clarity what the opinions of the patients with some clarity. Access is always a concern for patients, together with a need for good quality clinical care. Pharmacy interface and prescribing issues appear to be a growing concern as can be seen from the item 2.17
	16. Alan has previously asked about patient information, education, and communication and whether it would be worth setting up a sub-group to work on these issues. The Chair agreed and will discuss directly with Alan in due course how best to deal with this once the access/staffing meeting had been completed and any proposed changes to policy were known or ready to be referred back to the PRG.
	17. Education/advice for the disposing of usage drugs following on from another meeting – the Chair had done a little work on this, he was aware of a telephone number that patients could call but had also been told that pharmacies were not keen to take back drugs for processing. A long discussion ensued whereby many PRG members gave personal evidence of drug over subscription and dispensing, resulting in large supplies of unused/unusable drugs ending up in circulation with no clinical use and ultimately wasting lots of NHS money. The Chair undertook to ask the owner of Ovenden Pharmacy to attend the next meeting to explain how the processes work, and if he cannot attend, as a minimum to request a paper detailing how the situation should be managed and what is going wrong when these situations occur.
	18. The chair had previously been asked to investigate if cancellations could be sent by text. It transpires our new texting system does allow replies but only to specific questions, it should not be used to cancel appointments as only a few necessary staff have access to the texting system.
1. AOB
	1. The chair briefed those present on plans to convert the existing meeting room into another consulting room with a storage area in the back, and to create a new training/meeting room on the first floor I the current space between Rooms 9 and 10. The BMC had already won 66% funding and were hoping the landlord would fund the other 33%. Negotiations are ongoing, but if funded the works are due to commence on 08/02/16. Any noisy/disruptive work will be conducted at weekends to minimise customer impact.
	2. The chair also informed those present that the BMC would closed on a number of afternoons throughout the year for training, the dates can be found on website, the first being Wednesday 10/02/16. Those present asked that notices be put up in the surgery soonest. This has been done.
	3. Dr Rastall attended to take questions. A discussion took place on the political landscape and the general future of the NHS. Dr Rastall informed those present that he would be retiring as a GP Partner in December 2016 but hoped to continue to practice at the BMC as a regular locum.
	4. A question was also asked about the shortage of GPs and nurses generally and this was discussed by the Group.
	5. Michael asked as to whether the BMC/PRG could write to TJ Walsh to see if they would drop off to the BMC closer than the existing bus stop. Whilst the Chair thinks it unlikely to be agreed formally, he undertook to write said letter and report back.

 4.4

Next meeting: \*Monday 9th May 2016

\*At the meeting Monday 9th June 2016 had been agreed but it transpires no such date/day exists in 2016 and so I have rescheduled for 9th May 2016. I will send out reminders 2 weeks prior.