

PATIENT REFERENCE GROUP (PRG) MEETING MINUTES

Wednesday 10 February 2016

Present

Thecla D'arcy, Sean Hall, Andrew Hogg, Janet Munro, Carol Palfrey, Philip Rawlings, William Rusdell, Robin Simmonds, Michael Simms and Kathleen Warnes.

Staff

Linda Marquis:	Practice Manager
Lynsey Wayte:	Assistant Practice Manager
Helen High:	Medical Secretary (minutes)
Amy Reynolds:	Admin Assistant (minutes)

Guest Speakers

Rosalind Brown:	Student Doctor
Bijan Yazdanian:	Student Doctor

Apologies: *Pat Dawson, Elisabeth Dewhurst, Maureen Joy, Steve Lunniss, Val Tompkins*

Resignation: *William Burgess*

Previous minutes

The previous minutes were agreed.

Disabled parking and car park signage: Linda advised that she would put in a bid for funding for these to be carried out.

Larger chairs with arms for waiting room: Linda advised that we are still having trouble trying to source these types of chairs. Mrs Warnes kindly suggested a company called HSL, which Linda will follow up.

Fold down chair for reception desk: Linda advised the group that a chair had been ordered but unfortunately when it arrived it was too small and flimsy and was therefore returned. We will continue to try and find something more suitable.

Mundesley Hospital: Linda advised that they have passed their CQC inspection and are now open for business, although the practice is unable to refer patients to them directly. It was agreed that Linda will invite a representative from there to give a presentation at the next PRG meeting.

Outstanding Action: Linda to ask a representative from Mundesley Hospital to attend next PRG meeting

Previous minutes (contd)

Lynsey advised the group that the old music system has now been upgraded to include a larger playlist, with more variety and namely classical and softer styles of music. This will hopefully be more acceptable to a wider range of patients.

Staff Update

Linda advised that due to the practice funding not being increased, a review was undertaken about staffing at the practice. After review, the practice made a member of the dispensary staff redundant. This will have no impact upon the service provided to patients.

A discussion took place about medication and Linda confirmed that it would be our preference for patients who are eligible to have their medication dispensed by the practice to do this, as we receive funding for this service, which subsidises other patient services.

Linda advised that both of our health care assistants have been accepted onto a foundation nursing degree course at City College, one day per week. Lucy has just started and Jess will start in September.

Patient Feedback

Complaints

Linda advised that the practice had received some complaints but as these related to individual cases, they could not be discussed due to confidentiality issues.

Patient Suggestion Box

One suggestion was discussed, which related to the same song being repeated continually in the waiting room over the course of a day. Lynsey advised that we had contacted the patient to apologise and thanked them for bringing it to our attention. Unfortunately on a new CD player, the "repeat" button had been selected, repeating the single track and not the CD.

Friends & Family Test

Since the last PRG meeting, we have had one Friends & Family Test card completed. The patient was extremely likely to recommend the practice and praised the friendly and helpful staff.

Miss Palfrey asked if we were surprised that not more patients completed the cards. Lynsey advised that the cards were prominently displayed at the front desk and also in the waiting room.

Compliments

Linda read a comment from a patient, praising the medical centre as being 'Norfolk's number one surgery.'

Compliments (contd)

We have also had another positive review on the NHS Choices website. Link can be found here:

<http://www.nhs.uk/Services/GP/ReviewsAndRatings/DefaultView.aspx?id=43816&SortType=1#cmnt1120039>

Student Doctors

Linda introduced Bijan Yazdanian and Rosalind Brown who are 4th year medical students from Cambridge University on a 2 week attachment with Mundesley Medical Centre. They explained that although they have been in training for 4 years, this is their first year of actually seeing patients. They are sitting in on consultations with doctors and nurses and are attending some home visit requests and visits to care homes.

Miss Palfrey asked what their most interesting experience had been at Mundesley. They both said that they were surprised by the wide range of different conditions that they had seen at a relatively small practice.

Mrs Warnes asked if they knew where their future lay but they explained they still have 4 more years training before reaching that decision.

Mr Rusdell asked them about the recent junior doctors' strike. Rosalind said that she thought that the junior doctors were trying to ensure that their working hours did not increase, to ensure patient safety. However it was agreed by all that we did not know all the details.

A general discussion took place about the strikes. Mr Simmonds spoke of how he had recently supported the striking junior doctors.

CQC Visit

Linda advised that the CQC carried out an inspection of the practice on 02.12.15 and the practice was given 2 weeks' notice of this. She explained to the group that we had to provide them with evidence information regarding several topics prior to their visit and a 1000 word report on services. Linda explained that all of this is quite time consuming for staff.

On the day of the inspection they interviewed staff, patients and also spoke to PRG members. Linda thanked those members who gave their time to help with this. Mr Hall had kindly spoken to the CQC and also spoke to them on their previous visit. He felt that this time it was almost like an 'interrogation' and Mrs Warnes who had also spoken to them previously concurred with this.

On the day of the inspection Linda, Dr Maggio and nurse Iain also had to give a 30 minute presentation to provide more information.

CQC Visit (contd)

Linda advised that at the end of their visit, they gave the practice a debriefing which was extremely positive.

However when the preview report was received by us, there were several areas that we were unhappy with and challenged several points. All but one were amended.

The report is then published on the CQC website. At this point the practice can request a review, which we have done as there are several areas that the practice would like to challenge. Linda explained that the practice felt that comparison between us and other practices was unbalanced and that there were areas where she felt we should have achieved 'outstanding' based on the evidence and service provided. At present we are awaiting a response to our review request. We were also challenging the 'requires improvement' for safety in the dispensary.

A discussion took place regarding the frequency of CQC visits, as some practices in North Norfolk have not had one at all, whilst others have had more than one.

Mrs Warnes showed Linda an article from the North Norfolk News regarding the CQC inspection and a copy is appended to the minutes.

The full CQC report can be found here:

http://www.cqc.org.uk/sites/default/files/new_reports/AAAE6743.pdf

Healthwatch

Linda advised that 2 weeks prior to the CQC inspection, the practice had volunteered to take part in an audit for Healthwatch. They visited the practice and spoke to staff and patients. Linda read some examples from their findings. A copy is appended to the minutes.

How Patients Can Help the Surgery

Linda explained that the practice receives numerous enquiries from patients regarding matters that unfortunately the practice are unable to help with. The main issues include: hospital transport and other transport services, dental problems, queries about community nursing, hospital test results and waiting times/lack of response regarding hospital appointments. Unfortunately dealing with these issues, many of which the practice are unable to help with, take considerable time to deal with and take staff away from dealing with other matters. Linda asked the group how they felt the practice could make patients more aware of this.

A discussion took place regarding transport problems. Lynsey explained that many patients who do not meet the criteria for hospital transport then contact the surgery to see if we can help sort it out. Unfortunately if patients do not meet the criteria set, the practice cannot have any influence upon changing this. We do advertise and give out details of organisations that provide hospital transport and a discussion took place regarding the cost of this.

How Patients Can Help the Surgery (contd)

Linda advised that the practice is not contracted to treat patients with dental problems and patients are advised to contact their dentist or 111. Mr Rawlings asked if the 111 service was advertised anywhere in the surgery. Lynsey stated that there was a slide on the slideshow in the waiting room but we will look at this and review whether further information should be added.

The issue of calling the practice to obtain test results carried out in hospital was discussed. As stated at previous meetings it is the responsibility of the clinician who has requested the test, to arrange the test, review the results and relay the results to the patient.

Miss Palfrey asked if the website could include information that would help patients with regards to these issues. Linda explained that the website is under review but we would look at this.

The group agreed that the best way to make patients more aware of who they should contact with regards to the above issues should be included on a regular basis in the patient newsletter as this reaches a large number of patients.

Outstanding Action: Linda/Lynsey to add information for patients regarding the above issues to the TV screen in waiting room, website and patient newsletter.

Online Access

Linda advised that the practice has been contracted by the end of the year to allow patients online access to their readcoded entries. A readcode is a summary code that is added to a patient record for specific conditions and entries, eg: asthma, heart failure, has a carer.

Linda explained that the computer software SystemOne currently advises that patient can request full online access to their medical records but this is not correct.

Before patients can access their readcodes, a GP will need to review their record to check that there is nothing that may cause them harm. This can be quite time consuming and it has been agreed that if patients wish to view their readcodes, they will go on a waiting list and approximately 2 records will be reviewed per week. The practice has received no extra funding for this.

Mrs Warnes asked if patients can come into the surgery and view their medical records. Linda advised that this is possible, via a formal process and there is a charge for doing this.

A discussion took place regarding which medical facilities and staff can view patient records. Linda advised that all staff at the practice can view patient's records but are bound by very strict guidelines and contracts about confidentiality.

Online Access (contd)

Linda advised the group that she had recently been in discussion with the doctors regarding sharing patient information with other community healthcare providers, eg district nurses. At present other community healthcare providers cannot view GP records unless the patient has agreed to sharing. The GPs feel strongly that this might have an impact upon their care. The doctors had suggested that all patients over 75 should have their full medical records made available to other community healthcare providers, unless the patient opts out of this.

Linda asked the group if they felt that this option should be implemented and the consensus was that the more information clinicians have the better, particularly as people get older.

Outstanding Action: Linda to report back to doctors that the group were in favour of patients over 75 automatically opting to share information with other community healthcare providers unless they express a preference to opt out.

GP Survey

Linda advised the group that a recent survey had been done of GP practices in North Norfolk and read some of the statistics to the group. Mundesley compared very favourably to other practices and scored higher than average in all areas.

To view the survey in full, click on the link below and select 'North Norfolk'

<https://gp-patient.co.uk/slidepacks/January2016#N>

Newsletter

Amy advised that an article was required for the May edition of the patient newsletter and Mr Hall has kindly offered to write this.

Venue

Helen advised the group that the Church Rooms was damaged in a recent storm and has been closed until further notice. The cost of hiring the meeting room in the Coronation Hall is almost double the cost of the Church Rooms and the group were asked if they had any alternative suggestions for a suitable venue. Mr Hogg suggested the Scout Hut and Mrs Munro suggested the Methodist Chapel. Helen will look into both of these suggestions.

Outstanding Action: Helen to look at alternative venues for holding future meetings.

Date of Next Meeting

Linda advised the group that the funding for the practice to have a PRG had been withdrawn. It was therefore suggested that meetings should now only be held twice yearly; in the spring and autumn.

The group agreed this and it was agreed the next meeting will be in September or October. Members will be advised of the date nearer the time.