

**PATIENT REFERENCE GROUP (PRG)  
MEETING MINUTES**

**Wednesday 30<sup>th</sup> January 2019**

**Present:** Margaret D'arcy, Elisabeth Dewhurst, Margaret Gaze, Sean Hall, Paula Holmes, Maureen Marr, Hilary McFarlane, Wendy Mower, Janet Munro, Elaine Parsons, Michael Simms, Val Tompkins, Barbara Worsley

**Staff**

Linda Marquis:	Managing Partner
Lynsey Wayte:	Operations Manager
Helen High:	Medical Secretary (minutes)
Jos Stares:	Admin Assistant (minutes)

**Apologies:** *Jane Bourne, Bruce Hogg, Carol Palfrey, Susan Piper, Dawn Rundle, Julie Weston, Kathleen Warnes*

**Resignations:** *Maureen Joy*

**Previous minutes**

The previous minutes were agreed.

**Dementia Signs:** Linda advised that these have been selected and are currently on order.

**Staff Update:** Linda advised that we have taken on 2 new apprentices; one for reception and one for admin.

Linda advised that since the last meeting, Dr Kemp has been awarded RCGP Eastern Region, GP Of The Year 2018.

**New Appointment System Update**

Lynsey confirmed that the new appointment system had come into effect from the 01.10.18. The vast majority of feedback that we have had from patients has been positive and the system has been working well. Doctors are reporting that they find the new system very beneficial, as it allows them to have longer appointment times with patients with more complex health issues. Some nurses specialise in specific medical conditions and patients have reported benefits from seeing the nurse.

Linda advised that as this is a new system, we are continually making small adjustments for optimum results.

### **New Appointment System Update (cont'd)**

Linda asked the group for their feedback with regards to the new appointment system. The response was very favourable and members reported hearing only good things from other patients.

One member reported being signposted by the reception team to the Minor Eye Condition Service and receiving an appointment with an optician, within 40 minutes.

### **Mental Health Nurse Pilot**

Linda advised that on 01.10.18, we took on Shelley Nelson, a mental health nurse on a 6 month pilot scheme, after Linda secured some funding from NHS England. Linda reported that has been an extremely successful pilot.

Shelley sees patients all for mental health issues, including dementia reviews. She has initial consultations of a 40 minute appointment, which is very beneficial for the patient, as previously they would have been seen by a doctor in a 5 to 10 minute appointment. Follow up appointments are 20 minutes and same day appointments are often available.

As this has been working so well, Shelley has been offered a permanent role at the practice.

As Shelley has more time with patients, she has set up several new processes, such as seeing patients for their dementia care review with their carer and the healthcare assistant at the same time. Shelley has also been able to build up relationships with secondary care organisations. She also works closely with the Social Prescribing team and refers patients onto them.

Mrs Holmes asked whether Shelley is able to prescribe medication and although this is something that she cannot do at the moment, Linda is hopeful that she will be able to do so in the future.

Mr Hall asked whether patients are happy to see a mental health nurse. Lynsey advised that due to mental health being more openly discussed now, patients will often ring up and specifically ask to see the mental health nurse.

Mr Hall asked whether Shelley is able to see children and Linda confirmed that she can.

### **Open Day/Evening Feedback**

Linda reported that the open day/evening we held last September had been a great success. The purpose of this was to mainly promote the new appointment system. Linda and Lynsey reported that some patients had come along purely for this reason and whilst some were initially unhappy about the proposed changes, once the new system had been explained, they left feeling reassured and informed.

## **Open Day/Evening Feedback (cont'd)**

Linda reported that several other health-related agencies also attended and received good feedback from patients.

Linda advised that we would most probably hold an open day/evening every other year.

Mrs Worsely asked whether the PRG could help with the organisation of the next event and Linda welcomed this input.

Linda read out some feedback that we had received from patients at the open evening.

One comment reported a concern that the midwife only attends the medical centre fortnightly. Linda advised that unfortunately this is beyond our control but reported that the midwife now has a full day of clinics, whereas previously it was only a morning.

Other comments praised Dr Kemp and the reception team. Another patient reported how much they enjoyed the patient newsletter and the PRG articles.

## **Patient Feedback**

### **Friends & Family Test collected via the SMS service**

92% recommended September 2018

93 % recommended October 2018

92% recommended November 2018

94% recommended December 2018

The Friends and Family Test was discussed and a print out of comments received was circulated among the group. The scoring system was discussed; as some patients leave a favourable comment but then we believe leave a low score in error.

A discussion took place regarding the wording of the questions and how answers could be misinterpreted.

### **Healthwatch**

Reviews from Healthwatch were passed around the group for review.

### **NHS Choices**

Linda advised the group that patients can leave reviews on the NHS Choices website. Some of the comments we have received have not been favourable and Linda advised that the practice has taken the decision not to reply to individual comments due to patient confidentiality.

Mrs Worsley felt that the current score was not a true reflection of the practice and felt that if members were happy to leave a favourable review, they should be encouraged to do so.

## NHS Choices (cont'd)

An online review can be made at NHS Choices at:

<https://www.nhs.uk/Services/GP/ReviewsAndRatings/DefaultView.aspx?id=43816&SortType=1#cmnt2396935>

## Patient Suggestions

The following suggestions made by patients were discussed.

- Praise for Shelley, mental health nurse and new appointment system to see doctor \*
- Confusion over whether appointments booked by reception were a face to face appointment or a telephone
- Patient unhappy about new appointment system and would prefer to see a doctor rather than a nurse\*
- Patient unhappy about being kept waiting 20 minutes for an appointment
- Patients (X2) asking if they can be kept informed if clinicians are running late \*
- Patient did not feel that having to wait outside in the garden for their flu clinic appointment was a good idea
- Request for magazines, books and a toy corner in waiting room
- Two requests for water fountain in waiting room \*
- Request for more seating in the waiting room
- Patient suggested that we should save electricity by switching off 4 large spotlights in waiting room
- Patient requested that the practice provide additional parking \*

*\*Indicates that patient left their named and their suggestion was responded to in writing*

These suggestions were discussed. Lynsey reported that with regards to the flu clinic, sometimes a small group can build up if patients do not attend at their allotted appointment time.

Linda advised that receptionists should inform patients if clinicians are running late and the display screen also reports if there is a delay and how many patients are ahead of you.

The issues regarding drinks has been discussed before and will not be considered due to the safety risk of spillages.

Linda advised that we may consider further seating in the future.

We have reviewed the situation regarding the spotlights in the waiting room and these are not used on a bright day.

## **CQC (Care & Quality Commission) Inspection**

Linda reported that the practice had a planned CQC inspection on 11.12.18. The practice is given 2 weeks' notice that the CQC will be inspecting and has one week to produce and submit various evidence and reports as requested by the CQC. On the day of inspection, the CQC can speak to any staff member or patient.

The areas that they look at are safety, effectiveness, caring, responsiveness and whether we are well led. They also look at different demographic populations within these categories, to ensure that patient's needs are being met.

Linda reported that overall, the practice received a rating of "good."

However, we did receive a "requires improvement" for safety. This related to issues with the fire risk assessment not being in date, an audit had not been done regarding infection control for non-clinical rooms and a doctor had not signed a form regarding injections.

Linda reported that all of these issues had been reviewed and corrected by 10am the following day.

Mr Hall reported that he had been contacted by the CQC as a member of the PRG and found the questions that they asked rather lengthy and in depth.

Mrs Worsely congratulated Linda and Mrs Parsons stated that she did not feel the report reflects the care and compassion in the practice. A discussion took place and the group felt that the inspection is a "tick box" exercise and does not necessarily portray a realistic picture of the practice.

Mrs Marr asked how often the CQC make an inspection.

Linda reported that they can inspect at any time, without warning. They will come back to review the things that required improvement and will return for a full inspection any time within the next 5 years.

## **Improved Access Appointments**

Lynsey informed the group that patients can now pre-book out of hours appointments at the weekend and evenings. Patients will be seen at a hub based at Cromer Practice, Birchwood Surgery, in North Walsham, or at Fakenham Practice. These appointments will not be with one of our GPs, although Senior Nurse Practitioner Iain does cover some of these appointments.

Lynsey advised that there are 7 pre-bookable appointments available per week, however if there are any free appointments left on the day, we can also offer these to our patients.

### **Samples At Reception Cut Off Times**

Mr Simmonds had requested that the issue of cut off times for samples being received at reception be discussed.

Lynsey advised that the lab where we send the samples has made some changes and this has affected the cut off time that patients can drop their samples off.

Lynsey confirmed that the deadline time for urine samples to be left with reception is 15.30. However, all other samples must be left at reception by 12.00. Information regarding how to take samples and the cut off times is enclosed in the sample kits.

### **Norman Lamb Visit**

Linda advised the group that a patient had complained to Norman Lamb regarding the new appointment system.

Linda suggested that he came along to the practice so that the new appointment system can be explained in detail to him and he has confirmed he is happy to do this.

He will be attending the practice on 01.03.19 between 14.30 and 15.30.

If any PRG members would like to be present and speak to Norman Lamb regarding this or any other health related concerns, please contact Helen or Jos.

### **Learn and Share Event**

Mrs Worsley had recently attended a Learn and Share Event and gave very useful feedback to the group regarding this.

One of the major topics covered was dementia awareness and Mrs Worsley reported how a member of the PRG at Sheringham had a very good insight into this and was willing to help support other PRGs. She reported that some things which had been found to be very helpful for dementia patients were toilet signs with a picture of a toilet, coloured pink or blue to distinguish between male and female. Some dementia patients also experience issues with spatial awareness. Some dementia patients cannot perceive where toilet seats are if they are coloured white and find the use of coloured toilet seats more helpful. In addition, they may also perceive a mat on the floor to be a 'hole,' if it is a different colour to the rest of the floor and be fearful to step on it.

Another topic was mental health and how a mental health event had recently taken place at a school.

One of the other items for discussion was how PRG members could support the practice by assisting them with administration tasks for example.

## **Learn and Share Event (cont'd)**

Rebecca Champion, Communications and Engagement Manager at NHS Norfolk advised that the CCG have previously set up websites to help support PRG members. One of these is a toolkit to help PRGs structure their activities. It was agreed that this toolkit needs updating.

<http://www.northnorfolkccg.nhs.uk/patient-participation-groups-ppgs>

Another website is the PPG Campaign toolkit, which demonstrates tools and resources available to help PRGs support their practice and local healthcare services during the winter months.

<http://www.northnorfolkccg.nhs.uk/ppg-campaigns-toolkit>

Mrs Worsley reported that members asked for help from the CCG to train members to help with fundraising for practices and the CCG are hoping to add this information to the website.

The overall aim was to make PRGs more proactive and supportive.

A summary of the event is appended to these minutes.

## **Any Other Business**

**Article for Patient Newsletter:** Linda asked the group if someone would be willing to write an article for the patient newsletter. If any member is happy to do this, please contact Charlotte Hall at the practice.

**Staff photos:** Mrs Worsley asked whether the practice displays photos of staff and their job titles. Lynsey advised that we do have some on the TV screen in the waiting room but that these need updating.

**OUTSTANDING ACTION: LYNSEY TO ARRANGE FOR UP TO DATE STAFF PHOTOS AND THEIR JOB TITLES TO BE DISPLAYED ON TV SCREEN**

**Missed appointments:** Mrs Worsley asked whether we still have a large number of patients missing their appointments.

Lynsey confirmed that this is unfortunately still an issue. Lynsey advised that when patients are booked in for longer appointments of 30 minutes or more, we do telephone them the day before to check they are still attending. We also send out text message reminders to all patients who are registered for this service. Lynsey confirmed that there is also a poster on the front entrance noticeboard stating how many appointments have been missed for the previous month.

Lynsey also advised that if children miss appointments, we also follow all of these up to ensure that there is no possibility of appointments being missed due to potential safeguarding issues.

### **Any Other Business cont'd)**

**Missed appointments (cont'd):** Linda advised that if a patient does not attend for an appointment with Shelley, Shelley will telephone them to check that they are ok.

Mrs Holmes suggested that an article be put in the patient newsletter regarding missed appointments and it was agreed that this would be a good idea.

### **OUTSTANDING ACTION: LINDA/LYNSEY TO ARRANGE FOR AN ARTICLE IN THE PATIENT NEWSLETTER REGARDING MISSED APPOINTMENTS**

**Pharmacy2U:** A discussion took place regarding Pharmacy2U and how the practice does not recommend them as they are not NHS affiliated, although they seem to imply that they are.

**Private Prescriptions:** A discussion took place regarding why certain medications are available on private prescription but not on the NHS. Linda confirmed that the practice must adhere to the guidelines set up by the CCG. Mr Hall felt that it was unfair that patients may not be able afford private prescriptions and that doctors should have more say in the matter.

**Prescription Fees and Medication Wastage:** A discussion took place regarding prescription fees. Some members felt that making prescriptions free to all over 60s was unnecessary when some patients could afford to pay for them. Another idea was to make a small charge for all prescriptions, regardless of age or means. Linda invited members to make their views known to Norman Lamb when he visits.

The issue of the cost relating to wasted medication was discussed. Mrs Parsons advised that patients should always check their medication before leaving the building as any medication issued in error or not required, can be passed back to the pharmacy to be reused. Once a patient has left the premises, any returned items cannot be reused.

Linda advised that there is a new process coming into place for all pharmacies where medication will be scanned in and out with a barcode.

**Hospital Referrals from Opticians:** Mr Hall asked why opticians see patients and then write to their GP to ask them to refer them to the hospital, when they could perhaps make the referral directly.

Helen advised that for some urgent referrals, opticians can refer patients directly to the hospital, along with other conditions such as glaucoma and cataracts. However for most routine referrals, the CCG policy is for opticians to request GPs to make the referral.

**Hospital Appointments at Other Sites, eg James Paget:** Mrs Dewhurst enquired why patients may be offered an appointment at James Paget Hospital, when an appointment more locally would have been more convenient.

Helen advised that the CCG commission the services locally and unfortunately we are unable to refer patients to specific hospitals of their choice. The Norfolk & Norwich and Cromer Hospital have very long waiting lists for some procedures and to reduce some of the pressure from them, the CCG have made the decision to defer these to other providers, such as the James Paget Hospital or the Queen Elizabeth.

**Any Other Business cont'd)**

**Fundraising and General PRG Support:** Mrs Worsley is keen to set up a fundraising group with other PRG members and look at other ways the group can support the practice. She would like to arrange a meeting to discuss this prior to the next full PRG Meeting.

**OUTSTANDING ACTION: MRS WORSLEY AND LINDA TO ARRANGE A MEETING WITH OTHER PRG MEMBERS TO DISCUSS FUNDRAISING AND GENERAL SUPPORT OF THE PRACTICE**

**Date of Next Meeting**

The next meeting will be held on Wednesday 5<sup>th</sup> June 2019.