**The Porch**

**Minutes of the Patient Participation Group Meeting**

**Tuesday 25th June 2019**

**Attendees:**

**Practice**: Dr Margaret Hatherell

 Susanne E Salen, Deputy Practice Manager

 Sarah Smith, Reception Supervisor

**PPG Committee:**

 Yvonne Le Grys (YLG)

Terry O’Brien (TO)

Steve Lumb (SL)

David Wilson (DW)

Caroline Usher (CU)

Terry Simm (TS)

**Apologies**: Pat Sharp (PS)

Jane Dunn (JD)

**1 Matters arising from minutes of last meeting:**

**LED Timings** – SES advised the timings showing patients details and the room they are in on the LED Jayex board has been increased to five seconds. This will be monitored as potentially it may cause a blockage if several clinicians call a patient at the same time. SES reassured everyone that if the LED call screen fails the clinician will come to the waiting room to call the patient directly.

**2.** **Medication**

YLG discussed the following medication issues:

* Residue medication and how important it is to order only the medication required, and not to stock pile at home. SES/MH agreed with this and advised the prescription clerks are only able to issue up to four weeks in advance, unless in exceptional circumstances e.g going on holiday. Unfortunately the surgery can not monitor whether the patient is actually taking the medication.
* Prescriptions not received when ordering due to a short fall at the pharmacy, this is often due to low stock levels throughout the country, however the pharmacies should be able to suggest an alternative. SES advised she has spoken to Cathy at Shaunaks regarding this and several other issues and she feedback the following:
	+ If stock levels fall low, the pharmacy should be making the effort to find more stock or suggest an alternative to the GP
	+ Shortages are not related to Brexit
	+ A Glaxosmithklein machine recently burst into flames – this machine was used for putting creams into tubes and was commonly used for creams used for exzema and this had a knock effect on supplies
	+ A specified quantity of some medication is given to pharmacies and once this quota is used it is very difficult for the pharmacies to obtain more medication. This can be overcome by taking a screen shot of the medication they have exceeding the quota for and then sending this to the manufacturer to re-authorise a further supply
	+ Within the next twelve months all medication will be in blister packs with individual bar codes which will help trace the medication and prevent fraud

**3. Staffing**

Receptionist – Wendy Bray is due to start 8th July 2019

HCA – Julia Benham has left the practice to pursue her foot health business, her role has been advertised.

Practice Manager has been recruited - Rhonda Jenkins, she will be starting with us on 1st November 2019, unfortunately she couldn’t start before this date because she had already committed to a contract for 6 months. Rhonda previously worked as Head of Learning difficulties for Wiltshire council.

**4. Primary Care Networks**

Primary Care Networks are groups of GP practices working more closely together, with other primary care staff and health and care organisations, providing integrated services to their local populations. A lot of funding is moving to the PCN and the NHS is encouraging working at scale and the care to be community based. Dr Davies and Helen Paish attend two Primary Care network meetings a month.

The first service to be shared within the PCN was the first contact physio (FCP) and MH advised a mental health worker is due to start at the beginning of July. She will work in a similar way to the FCP and will be dealing with on the day demand for mental health issues, she will be based in a different surgery each day working at the Porch on Fridays. The next target for the PCN is a pharmacist.

**5. Feedback from YLS – Devizes meeting 26/04/2019**

YLS attended a meeting Devizes and fed back the following points:

* Discussion was mainly based on developing Primary Care Networks.
* YLS raised concerns regarding attending an appointment within the network if you don’t have access to a car. MH reassured YLS that patients won’t be forced to attend a different surgery.

**6. MIDOS**

SES advised that the surgery have signed up to MIDOS**.** MIDOS is an online resource funded by the CCG until April 2020 with a view to continue funding for a further 3 to 5 years. MIDOS work with a range of health partners to provide wider access to information about NHS, local authority and voluntary sector services.  The aim of the service is to signpost patients to their nearest facility relevant to their needs – GP, pharmacist, hospital, etc.

MIDOS are attending a reception meeting mid-July to provide training and once this is completed more information will be displayed in the surgery on notice boards, in the newsletter and on the website.

**7. Mjog Update**

Mjog is a new SMS messaging service that can be used to remind patients of appointments and send out a campaign messages. It was recently used to send out a message to over 600 patients who are eligible for the pneumonia vaccination. Patients are able to respond decline if they are declining the vaccination and this message comes back to the patient’s record and updates it accordingly.

Family and friends survey are sent out to patient’s to rate the service they have received. The information is collated every month.

**8. Our Health Our Future**

SES advised that Health and Care organisations across Bath and North East Somerset and Wiltshire are working together to improve health outcomes and ensure services are cost effective and sustainable.  They are running a public faced campaign from now until 31st July to inform the development of our joint five year plan in line with the NHS Long Term Plan.  They will be finding out what people think using a survey (available online and in paper form), social media and face to face engagement.  The survey is asking three simple questions:

1. What’s the one thing you wish you’d known sooner to help you be as healthy as possible?

2. What’s the one thing that would help you to find and use health and care services more easily?

3. What’s the one thing that would help to make a difference to your health and care in the future?

More information is displayed on our website and in the surgery on ‘this month in focus’ notice board.

**9. Flu clinic dates**

Flu clinic dates have been scheduled for:

Saturday 28th September and Saturday 26th October.

The vaccine was ordered Dec 18 and should be arriving week ending 13th September.

**10. AOB**

**Foodbank Vouchers**

SL advised he is the treasurer for foodbank in Corsham. He asked if we still have a supply of the foodbank forms. SL advised the process is for the patient to collect a form and a clinician completes this and then this is then taken to the foodbank. MH advised it was agreed at a recent practice meeting that we wouldn’t be giving them out and we would just provide the patient with the foodbank contact details. MH suggested SL discusses with the chairman and feeds back at the next meeting.

**Letters from hospital**

It was asked when you are seen at the hospital why isn’t the letter addressed to your GP. MH advised the hospitals generically pick a GP and it doesn’t matter who the letter is addressed to because the reception team review all the letters and send them to the patient’s regular GP.

**Registrars**

Do registrars have their own patient list?

MH advised they don’t but if letters need to be forwarded to the registrar the patient’s allocated GP will do this.

MH advised we have a full time male registrar staring with us in August called Jo Witney.

Discussion led on to sticking to one GP for continuity, SES suggested forming relationships with two GP’s which will create a greater choice of appointments.

**Demand on surgery due to new housing developments**

Has the housing developments impacted on demands in the surgery?

SES advised that surprisingly demand hasn’t increased due to the new housing developments we currently have approximately 11,400 patients registered and at the maximum it has been 12,000 patients. The registration figures are measured quarterly and the number of patients registering compare to the patients deregistering is surprisingly static.

**Reports from hospital**

DW raised an issue re difficulty obtaining the result of an MRI scan. As this was an individual matter, MH agreed to look into it and write to DW separately.

**DATE OF NEXT MEETING:**

Tuesday 24th September 10.30am