

Birley Health Centre Patient Participation Group

Minutes of the Meeting Held on the 13th December 2018

Attended: NAMES REMOVED

Representing the Health Centre: Dr Charles Heatley, Kiz Haigh and Sue Breeze.

1. Introductions , Welcome and Assign Meeting Roles

Members were welcomed to the meeting, a round of introductions ensued and meeting roles were assigned as follows:

Recorder Role was given to NAME REMOVED (tracks the next steps/actions and records the minutes).

Timekeeper Role was given to NAME REMOVED (keeps the group on time and announces half time, 1 minute remaining when nearing the end).

Facilitator Role was given to NAME REMOVED (leads the group to agree how long to allocate to each agenda item, alerts the group when discussion not focused on agenda and helps to move through the agenda).

2. Apologies

Were noted as NAMES REMOVED.

3. Minutes and Matters Arising

A draft copy of the September minutes were circulated to members by email and post as requested shortly after the meeting. Paper copies were also available in the meeting.

Updates were given for the actions as follows;

Wells Pharmacy Action: Kiz/Sue to publicise process times more widely in the practice, report to group at the next meeting what action has been taken.

Posters are displayed in the waiting room.

Notification message is detailed on prescriptions.

Information was included in the November practice newsletter.

A member explained that when a repeat medication is ordered for a month, usually 28 days is given and sometimes this can cause a problem if the month is longer than 28 days.

Action: Dr Heatley to ask through CCG contacts if this can be amended.

Dr Heatley explained that providing the medication was ordered each month, supply is not affected, but it may require 13 medication requests to be made over the year.

Practice Update Action

Was it possible to have the role (GP, Nurse, HCA) listed against the name, this would make it easier to know which is the appropriate clinician for the appointment.

Action: Kiz investigate if the change to online booking system can be implemented, make the change if possible and report back to group.

Role has been added onto the online system.

Defibrillator Action: NAMES REMOVED to work together on the project and ask the practice for support if needed.

No update has been provided, Kiz agreed to offer support when emailing the draft December minutes.

The group agreed the minutes were a true and accurate record of the meeting and all actions were marked as complete, there were no matters arising.

The September minutes to be anonymised and uploaded onto the practice website.

4. Access and Appointments

Kiz explained that the practice had been reviewing the appointments system recently to identify any changes which can be made to improve access.

A proposal was made to increase the length for some of the doctor appointments from 10 to 15 minutes. This would help to ease the time pressure within consultations and reduce the occurrence and build up when doctors over run.

Two telephone appointments (known as triage slots) would be added every morning for doctors, these would be used for less complex issues such as discussing results or advice over the telephone

The on the day care process which is known as the 'On Call Duty Doctor' demand can continue to grow until near practice closing time on some days. A way to manage demand and support the 'On Call Duty Doctor' is by sharing the workload and having a shared clinic. All doctors will have some free appointments where they are able to review the 'On Call Duty Doctor Clinic' and invite patients in if they need to be seen. It is hoped this will be better for patients by supporting continuity of care, for example if a certain doctor unusually sees a patient that doctor may be able to see the patient again when on the day care is requested.

Kiz asked the group for their thoughts and ideas about piloting the change.

A member suggested it sounded complicated and asked how a patient would know which appointment slot to book. Kiz replied that from a patient's perspective there would be no change to the booking process, the receptionist would continue to care navigate on the telephone and book the patient into the most appropriate appointment slot.

A member asked if there would be less appointments. Kiz replied that yes there would be less appointments but the same number of patients would be seen/provided care for as some things can be dealt with over the phone and there will be more telephone appointments. This could be beneficial to patients, in some cases it may not be necessary for patients to come into the surgery.

A member asked if there was free time in a consultation would the doctor use the time for other work. Dr Heatley replied that there is no shortage of work.

Dr Heatley asked if we could work together to find a way of explaining the appointments system to patients in a way that can be easily understood.

Action: Kiz to provide an update to the next meeting, members to let Kiz/Sue know if they would like to be involved with helping to publicise how the appointment system works.

Members supported the pilot.

5. Practice Update

- Staff
Kiz advised that a full nursing team will be available in January 2019.
Reception recruitment is complete, a full team available from this week.
- Physician Associate (PA)
This is a new role within the practice and will commence in February 2019. The PA will work under the supervision of a doctor and have direct contact with patients, taking medical histories, carrying out physical examination, making diagnoses, analysing test results and delivering treatment.
- Registrar and F2 Doctors
The practice is fully doctored, a new registrar will join the practice in February 2019 and a new F2 Doctor has just joined as part of the new rotation in December.

6. NHS Resources

A MEMBER gave a practical example of how NHS resources are wasted within the community. The group agreed this is very frustrating when health care budgets are being squeezed and finances are tight, no one wants to waste money.

7. Out of Area Patients

The group discussed this cohort of patients and the parameters for accessing care, patients can remain on the practice list but do not receive home visits.

8. Date and Time of Next Meeting

Kiz asked if the group could meet on a different day of the week. The group suggested we could alternate between days perhaps a Wednesday next time.

Action: Kiz to schedule meeting for 3 months' time when rota is known.

9. Any other Business

Dr Heatley advised he had attended a recent meeting with the Sheffield PPG Alliance. This group has representatives from many PPGs around Sheffield. The PPG Alliance were pleasantly surprised how many members and the good attendance the PPG at BirleyHC has. It was discussed at the meeting that sometimes discussions at PPGs can be inhibited if a practice doctor is present and Dr Heatley asked if the group would prefer to meet without a doctor sometimes. The group advised they appreciate doctor insight into discussions and would like to continue having a doctor represented at the meetings. Dr Heatley advised he would be happy to leave the meeting for specific items if requested.

A MEMBER shared a card he carries on his person which details his medication requirements. He has put this information together himself and is useful if he is taken into hospital.

Dr Heatley suggested a copy of the 'summary care record' which can be accessed online by a patient is a useful print out in this scenario.

Evaluation of Meeting:

Scoring = 1 (Not Effective) |-----| 10 (Very Effective)

Actual Scores = 8/8/8/8/8/8/8/8/8/8 and 9

What worked well

- Everyone gets on
- Able to get point across
- Improvement, get more info
- Able to speak mind
- Still learning
- Doctor present

What could be improved

- Keep to time
- Stop talking (Dr Heatley suggested for himself)
- Bigger piece of paper for evaluation
- Add any other business to agenda for issues which are identified in the meeting
- Still learning

Action: Kiz include AoB on next agenda