

Patient Reference Group Meeting

Date: 19th February 2016

Time: 13:00 -

Venue: Hunts Cross Avenue Branch

Attendees: JC, CM, EG, JT, JH, AK,VH, SM,MR, RE, JM, YMc, TH, DH, CT, JT

Apologies: FO, JJ, CM, SC

- Agenda:
1. Minutes of last meeting
 2. CQC report feedback
 3. Winter pressures appointments
 4. Prescription / Pharmacy issues
 5. Woolton Life

No	Minutes	Action
1	<ul style="list-style-type: none">• The minutes of the last meeting were discussed.• Light tubes – MR advised that he didn't think installing these at GB to improve light in the waiting room would require planning permission as they wouldn't alter the look of the building. • MR asked if patients of the practice would have any influence in future applications for new building/land. • Patients asked for an updated practice leaflet to show all the new doctors.	<ul style="list-style-type: none">• JC disagreed and advised that we would need planning permission as any alteration to the building has to be approved. JC also discussed the latest problems with obtaining land in the area for a new building (discussed at previous meeting at length).• JC advised that patients could write to the planning authority in support and suggest possible appropriate sites. • EG advised this has been done and is updated each time an alteration is made to the practice.

	<ul style="list-style-type: none"> Patients reported that if they ring in the afternoon they still get the same message as the morning, i.e. ring after 9 if not ringing for an appointment etc. Also the person on the message sounds rather “sad”. 	<ul style="list-style-type: none"> EG advised that this is a standard message and is the same throughout the day. EG also reported that the message is now more factual and the recording is done from the Health Authority. We are not allowed to record our own message.
2.	<ul style="list-style-type: none"> CQC Report The practice had a recent inspection which happily we passed with an overall rating of “Good”. The full report is available to view on the CQC website. In summary they were very happy with the quality of service we offer and with the leadership in the practice. CQC were also very impressed with the input from the PRG on the day and the practice would like to thank everyone involved. 	<ul style="list-style-type: none"> SM and the other members present congratulated the practice on the report.
3.	<ul style="list-style-type: none"> Winter Pressures Appointments CT reported that he is very happy with these extra appointments and suggested we continue to offer these as “Spring Pressures”. Patients reported being happy with ZA and enquired about Dr Sprakes’ role. 	<ul style="list-style-type: none"> The practice has noticed that these appointments have made a difference with access and we usually offer 20 extra appointments per day. The winter pressures currently run to the end of March. Chances are this will be rolled out throughout the year but we won’t have a definite answer until the new contracts come out at the end of March. The practice would like to see these appointments continue and will do their best to maintain them, but as always is dependent on funding GPs explained that ZA is now a partner and Dr Sprakes is a Registrar who will be with us ‘til August.

4.	<ul style="list-style-type: none"> MR wanted to discuss a specific issue he had recently had. JC had said he would authorize 2 items on his prescription and send electronically to the pharmacy. When he went to the pharmacy the script hadn't been sent. The pharmacy rang the surgery and was told the prescription would be sent that day (Friday). MR went back to the pharmacy on Monday and it was still not there. The pharmacy couldn't get through to the surgery so MR went to GB where he was told it was still waiting to be authorized by the GP. MR then had to have a telephone consultation with another GP who authorized the items. He requested that there be better communication between practice and pharmacies. Patients asked about medication changes made by the hospital and how these are actioned. YMc asked about review dates and who polices these. She discussed a patient who she knows whose review date was over a year overdue but was still being prescribed. She suggested if the GP issuing the prescription notices the review is overdue then perhaps a note could be put on the prescription asking for them to book in for a review. 	<ul style="list-style-type: none"> JC apologized to MR as he had not authorized the items when he said he would. This was simply an oversight. It was not a technical problem and sometimes things can go wrong. The process normally works very well but even though the prescription request is put through by reception, it is still not authorized until a GP looks at it. Another patient present reported that it works well for them, i.e. a request was put in on Monday morning and was in the pharmacy by Monday afternoon. The process was explained. We receive the clinic letter into the practice and this is then reviewed by one of the doctors and medication changes made. Sometimes these letters are scanty or delayed which can delay the changes being made. In normal circumstances if the patient has not had a review then they should be called in for a review. Sometimes this does not happen. The medication can be stopped until the patient has booked a review. It is the responsibility of the GP issuing the prescription. Although everyone has a named GP, all GPs are responsible for patients.
5.	<ul style="list-style-type: none"> Woolton Life This is a charity based in Woolton. It is trying to identify people in the community who are socially isolated and offer them support. 	<ul style="list-style-type: none"> Patients were all given a booklet with all the information for this service.

	<p>Patients can be referred by the practice if they want to be. There is a lot of positive feedback from people already using this service. It is a volunteer scheme and we are trying to raise awareness in the community for this initiative.</p>	
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Meeting ended at 14:00.