**Minutes of PPG held on Monday 25th March 2019 @ Rockwell Medical Centre**

***Easter Closing: Just a reminder to the group that the surgery will be closed on Friday 19th & Monday 22nd April for Easter.***

**Previous Minutes:** Rachel reviewed the minutes from the last meeting in December. We discussed physio, the sub-group, DNA’s as a regular feature, and the voluntary sector attending monthly at Wrose.

**Sub-Group Meeting:**

DNA’S – still being monitored on month by month basis , poster to be put up in the waiting room, perhaps put figures on the scroll around screen. Patients asked if the poster could be prominently displayed and not cluttered or surrounded by other notices ( if possible on a notice board on its own to make a prominent feature).. RT said she would try to sort this out.

Membership of PPG – BC asked the group how to increase membership noting we have tried many things and often people only attend once. Everyone has busy lives so not wanting to engage. It was suggested that we could contact people that have attended before and get feedback. \* JA invites everyone who has ever attended a meeting each time

Fans – RT has got a quote for these and is also looking at awnings. Also group mentioned watercooler, or look at jugs. RT said the practice would reconsider this – it was declined in the past due to plastic waste.

Gardening centrepiece at Rockwell forecourt– Still ongoing – RT has placed a bid for some funding with the voluntary sector, for mums & tots to do something with the patch. Action RT to chase up to see if this has been successful. BC suggested that the thorny bushes may be suitable alternative if the funding does not come through.

Community Partnership – RT explained concept of the Communnity partnership ( which is basically health and social care providers working as one) this what it was trying to achieve. Example of the COPD project were shown again. Could we help with this, get a basket to collect wool? Another project being worked up is for some proactive work with frail elderly patients to encourage advance care planning for the future when they may become too frail or lose capacity.

Problems with Chemists – Rockwell pharmacy is just changing hands on 28 3 2019 , so there will be difficulties with prescriptions while exchange takes please . GS said that there was still issues with Wrose Pharmacy, members asking how to put in a complaint. GS said that he had found out where to send a complaint and he is doing this on behalf of patients.

**Diabetic Talk –** Practice Nurses Natalie & Brooke were kind enough to do this talk for the group. They provided the group with a lot of information mainly on Type 2 Diabetes, how it could present, the tests we do, how it is treated and how the patient themselves can help. Group would like it if we could possibly get one of the diabetic dieticians to come and do a talk.

**Practice News:**

Cervical Screening – Bradford has a low uptake of ladies attending for– so all practices are being asked to promote – mainly amongst the ladies who have not been screened before. Cervical Cancer is 100 % preventable if a lady chooses to be tested and it is caught early.

New Staff – We have 3 new receptionists – 2 have already started Amy at Wrose and Fiona at Rockwell. Leah is due to start at Wrose in April.

First Aid Courses – We will be running these again in May one at each site, leaflets to follow (7th & 14th May).

**Patient Feedback :**

BC has emptied the suggestions boxes. Nothing from Wrose, one to say that Rachel H is very helpful. Another slip saying that the appointment system should be explained better – possibly put something on the website.

**NHS Website Review:** Patients are able to put views on NHS website .. Until recently we only had one comment but we have had a couple of negative comments which the practice are looking into - sadly both anonymous.. (It is something that CQC will always look at). The group discussed the comments and felt it was unfair that the practice could not respond directly , and also had contradicting view.

The first negative comments said that standards had slipped and the patient had to wait 20 minutes to be seen. The patient group reflected and felt 20 minutes was not unreasonable time.

The second negative comment was that the doors were not opened in a timely fashion in the mornings eg the doors were opened exactly at 8.30 and the patient had an 8.30 am appointment. The group discussed this and felt this comment was constructive and the doors should be opened at least 5 minutes before opening time. DR AG said that sometimes being short staffed had an impact on door opening time and this had been a particular problem this week. DF went on to say that as a reception staff member, the telephones didn’t switch until exactly 8.30 and the practice was trying to be fair in ensuring those patients who queued were not gaining and advantage . Discussed and agreed to open the doors a bit sooner where possible.

**Questions:**

District Nurses – How do they work? We have to do referrals to them via S1. Could look at getting a D/N out to talk to them. Action – RT to invite DN to attend next meeting

Home Visits – We don’t get many- often doctor will speak to them first.

Organ Donors – Had a talk about what the new system means to patients ( opt out rather than opt in) . Probably won’t make a great deal of difference as you basically have to be on life support for your organs to be harvested. Only corneas and heart valves can be taken once dead.

**From April:**

NHS Digital – From 1st April 2019 the department of health has specified that general practice should embark on e-consultations with their patients (not skype). This would work whereby a question could be sent electronically (probably via website). This would not turn into a dialogue but a one way traffic message . We are still waiting for this software to be implemented, and then we can feedback with more in-depth information.

NHS111 – Is the out of hours GP service and in the coming months they want to have access to practices appointments (3 a day in our case) to book for patients that they have assessed overnight and they decree should be seen the following day. We piloted this before so are happy to go ahead

Extended Access – This is the evening GP service and it is going well and the appointments are being used. Lots of stuff ( smear tests, asthma , physio, mental health etc) available over 3 sites.

Support Staff – In the new GP contract we will be given money to fund physios & pharmacists – to help with the GP workload.

 Website – Look at this to see if there is away for this to encourage more patient contact / interaction.

**Next Meeting Monday 8th July 2019 @ Wrose.**