**Minutes of Patient Group Meeting held on Monday 5th March 2018 @ Rockwell 4.30 – 6.30 pm**

**Present: 8 patients**

**Practice Team: Rachel Thompson, Donna Ford, Jeanette, Dr Gavin**

**Review of Last Meeting:** Rachel did a brief overview of the last meeting held in December 2017.

**Carers Resource:** Melanie Evans came out to give a talk on what Carers Resource Service and explained what it could offer to carers. Melanie said the biggest issue was that carers didn’t actually recognise themselves as carers. Group said they would like a Carer’s workshop – we will try and tie this up with Carers Week which is w/c 12th June 2018 .

 *Wednesday 13th June 2018 is pencilled in with morning workshop at Wrose and Afternoon workshop at Rockwell PLEASE PUT THIS DATE IN YOUR DIARIES*

**Public Consultation:** NHS England as running a public consultation on “Over the Counter” medications, the prescribing of medications for self-limiting illnesses (colds/flu/d&v etc).

Anyone who would like to take part should use the following link

<https://www.engage.england.nhs.uk/consultation/over-the-counter-items-not-routinely-prescribed>.

There was also supposed to be a CCG event. Also they will be looking into procedures such as ear syringing that have been done historically but are of little value. Mrs Moss had also heard that some of the gluten free products may be going back on prescription – AG said we had heard nothing but was very unlikely.

**Practice News:**

**Pain Group - forthcoming event**

 **Time to take control and not be alone with our pain anymore!**

To be held at **THE YORKSHIRE CLINIC, BRADFORD ROAD, BINGLEY,**

**BD16 1TW**

Thursday **15th March 2018 @ 6.30pm** (speaker at 7pm)

Refreshments available, Free Car Parking, Bus numbers: 60, 622, 624, 662, 675

For more information contact Suzy on **07748877785** or

Facebook '**Pain In The ….......!**', or email '**suzyorrell@hotmail.com**' **–**

**Extended Access –** From September 2018 the plans for Monday to Friday late night appointments will be almost complete. Rockwell and Wrose practice will be included into Bradford North Hub which will be located at Shipley H/C. Pre bookable appointments will be available Monday – Friday up until 8.30pm . Emergency appointments will continue to be dealt with in the same way ( NHS 111). The details are not yet available so we are not sure how patients can book these appointments but there will be a “fair share” allocation to ensure that all the practices get an equitable number of appointments . From Apirl 2019, this may impact upon our own the late night Mondays evening which may have to finish to make way for the new regime.

**Federation News –** Extended Access project is being managed by Bradford Care Alliance, who are also working on Integrated care project, working with primary care, secondary care & voluntary sectors. Trust Primary Care which is our own federation has won the bid to run the extended access administration.

We continue to run the remote pharmacy pilot, and physio 1st pilots and both of these are very successful and ensure that patients get a more efficient choice of services.

**Registrar** – We have a new registrar Dr Paul Markey and he is with us until Feb 2019.

**Community Connector –** James Howgego has moved on so we have a new worker called Rachel Greene. We will invite her out to the group at some point.

**First Aid Courses** – These were successful and we are hoping to repeat them. Mrs BC felt that the training could have been more effective for younger patients and suggested that we can this time look at different age ranges.

MR GS suggested we run the next course of BLS nearer flu vaccine season

**Practice Nurse Vacancy –** Julie Mathers is retiring in May so we have advertised for a new nurse.

**Wrose H/C Development –** There is positive talk of a refurbishment at the Wrose branch. There is NHS England money available but the paperwork involved is far too complicated so they are sending someone out to help us with it. We would like to change some of the wasted space in the waiting are and office, into another couple of consulting rooms.

**Becoming a Constituted Group – Sue Hodgson ( Engaging communities)**

This is a simple process – the group just has to decide it wants to do it. The positives are that the group can they apply for small pots of money/grants. The group becomes a legal entity and has to have a constitution setting out the who, the why, the purpose, how the money will be spent, and what would happen if the group ended. The group would need a treasurer, secretary and chairperson. It may also need a bank account but not all groups do. The idea is that the group will have structure and members will all have a role to play. The negatives are that it is a legal responsibility, you will be asked to offer feedback/proof of how the money is used. The feeling was that the group we had was not really big enough to fulfil all of this.

**Action** – to either get a patient group that is constituted to come to our meeting or some of us to go to theirs.

**Access Plan Review –**

Mrs BC asked if it would be possible to have advanced copy of documents that are going to be discussed at the PPG . RT said she would try however as sole organiser of the PPG and being Time Poor, this task frequently gets put on the back seat and is rarely planned ( except for speakers) more than 48 hours ahead of the event. RT said it would be helpful if patients could put forward any agenda items and she will endeavour flag the agenda in advance of the meeting.

Newsletter (still working on this), Top Tips up and running, Revised DNA policy, Wellbeing Worker (still in place just at Rockwell now), Medicines Management (virtual pharmacist), and Working Party for projects.

**Comments Box–** We had none at all in the box for the last meeting this time just one.

In R/W box – ‘more respect for patients when answering calls’ – have left telephone number. RT to contact .

**Complaints –** One complaint received since last meeting. A patient contacted the surgery on 29th December 2017 late in the afternoon and requested an appointment and was offered the next available routine appt after New Year break. They then rang NHS 111 who sent to A & E to exclude a Stroke . The complaint suggested that the patient should have been offered an immediate appointment. We have found it impossible to verify scenario this as none of the staff recall this cal. The outcome and learning points is that we are now looking at Recording all incoming and outgoing calls which would have made this really easy to deal with. RT said that this is an expensive outlay but would improve our governance and be worthwhile investment. It would also be useful for proof of abusive calls to staff. Group thought it was a good idea to look into this.

**Care Navigation –** This is a term being frequently heard in NHS circles at the moment at the moment. Care Navigation is simply a way of positive signposting patients to relevant services by defined pathways. Training is being offered for this but our staff already do this most days .

**Open Floor:**

1. Mrs Spiwak raised the issue that when she is entering her log on details to order online and then miss enters password – it makes her start all over again. We said that we thought that this is a security feature to stop people hacking information.
2. Mrs Spiwak had a problem with on line medication. When an item that isn’t on repeat prescription she free texts in bottom box however sometimes this doesn’t get done which is quite frustrating . Donna explained that sometimes it gets added at the end of a very long list of requests and just gets missed. These are not done by virtual pharmacist.
3. Mr Shores revisited patient survey from the last meeting as he wasn’t there. He congratulated the practice for improving in several areas against the previous survey results.

**Action Points:**

1. Be more driven as a group
2. Get agenda items – well ahead of time (all to contribute.)
3. Try to send any documents out before meeting
4. Look into recording calls

**Next Meeting Monday 25th June 2018 @ Wrose H/C 4.30 – 6.30**