

Minutes of Patient Participation Group Meeting held on 13/11/18

Gladstone House Surgery

Patients invited: Kath Threlfall, Ian Threlfall, Pamela Frake, Brenda Loynes, Denice O'Rourke, Catherine Armes, Dennis Armes, Shirazun Khatun, Glynis Dixon, John Foster,

Present: Kath Threlfall, Ian Threlfall, Pamela Frake, Brenda Loynes, Denice O'Rourke, John Foster,

Staff: Ruby Ray (Practice Manager) , Lesley Giddy (Practice Administrator)

Apologies: Catherine and Dennis Armes, Glynis Dixon, Shirazun Khatun,

Minutes taken by Lesley Giddy

Action

Introduction	RR welcomed everyone to the meeting including LG informing the group that the admin supervisor who usually attends the PPG meetings is currently on maternity leave of absence.	.
Funding for Mental Health from the Local authority	<p>BL to shared information relating to mental health services available in our locality funded by the local authority. BL advised of a new scheme to be piloted for a year and commissioned by the CCG. The service would rise to the challenge of reducing the prevalence of mental health problems by supporting people through times of difficulty and stopping mental health problems developing in the first place. The service will be available to people of all ages from children to teens, teens to working adults and older people.</p> <p>BL advised that very small amount of funding is available and enquired whether we had received any leaflets or information on this initiative. RR advised that at present our patients use both MIND and Alliance Psychological counselling services.</p> <p>RR stated both services provide talking therapies such as counselling and Cognitive Behavioural Therapy (CBT) and that services are advertised in the practice encouraging patients to self-refer to these services.</p> <p>DO advised that there was a long wait for MIND counselling service LG advised current appointment wait was approximately 1 week for initial</p>	

	<p>assessment.</p> <p>BL advised that patients should be seen sooner rather than later for brief mental health assessments in order to receive appropriate timely interventions from these services. BL mentioned STARFISH counselling service was another option available to patients.</p>	
Patient Satisfaction Surveys	<p>RR informed that currently GP and Nurse satisfaction surveys are being undertaken at the practice. The results will be discussed and compared with the national survey results in the PPG meeting in March. It will also be available on our website. KT mentioned we currently have an excellent clinical team and patient satisfaction level is much greater than before.</p> <p>RR stated Dr Muirhead joined our clinical team on 1st of August 2018. She is a full time GP who works four days in our practice.</p>	
Medication reviews/ Queries	<p>JF asked how often medication reviews were done and what was involved in the process. RR advised that majority of patients require annual medication reviews. However, many patients depending on their medical conditions and medications prescribed are monitored more closely and reviewed on a three to six monthly basis. Our new Practice Clinical pharmacist is undertaking majority of our medication reviews and annual bloods and BP checks are done as part of review. LG advised we are trying to bring annual bloods and BP in line with patients' birthdays where possible and informing patients to use their birthday date as reminder to have them taken.</p>	
Patients General Concerns	<p>1. Both BL and PF advised that neither of them had been offered a healthy heart check or well woman check-up from our surgery. RR stated healthy heart checks were introduced to practices many years back to target patients who do not have a long term condition such as diabetes or hypertension. The criteria's for both appointments were discussed and it was agreed that the Jayex advertising system in the waiting area would be updated with</p>	

	<p>services provided in the practice to encourage people to book in for these appointments on their own accord.</p> <p>2. JF enquired about what system we used for informing patients of results. RR advised we ring patients to inform of abnormal results, normal results are actioned and filed by GP. Both LG and RR discussed that patients are aware when they have had bloods taken that they would need to ring for their own results 3 to 5 days later. RR stated she would ask nursing team to start giving out the slips again when taking bloods from patients as a reminder for them to call the practice for their results.</p>	
<p>Any Other Business</p>	<ol style="list-style-type: none"> 1. RR briefly stated that the podiatry department accepts referrals for patients only with significant foot problems. The threshold has now been reduced and many patients have been discharged from the service having to self-fund their podiatry treatment. 2. RR mentioned practices are encouraged to collaborate in order offer new services to patients. 3. Positive feedback was given to our admin apprentices on how well they had progressed and how patients could see a difference in them from when they first started, LG agreed feedback would be passed to both Rhian and Megan. 4. PF praised staff after the last PPG meeting on improvement around maintaining privacy at the front desk. The difference in what the office staff had been doing hadn't gone unnoticed. LG informed how we now have signs up asking people to ask if they wished to speak to us in private, also, how we now ask before giving any results out if they are happy to have them given at the front desk. <p>Next meeting Scheduled for March 2019</p>	

