

**WOODHOUSE HEALTH CENTRE
5-7 SKELTON LANE, WOODHOUSE, SHEFFIELD, S13 7LY**

**MINUTES OF PATIENT FORUM
HELD
MONDAY 10th OCTOBER 2016**

Present:

Mr R Webb	Ms D Mackman
Mr. R Chisholm	Mrs M Constable
Ms B Lee	Mr J Glaves
Mrs P Kilner	Mrs J Longstone-Hull
Ms A Kennedy	Ms J Parker
Mr H Constable	Mrs L Randell

Apologies, Mrs C Hodkin

Mrs G Siddons, Assistant Manager/Pharmacy Technician - Chair,
Dr P O'Neill (GP registrar)

Agenda items	Notes	Action
Welcome	Gill welcomed everyone to the meeting and thanked everyone for attending.	
Care Homes	Gill reminded the group that care homes are a valuable part of our practice population and are always invited to the forum meeting .All the care homes were phoned to remind them of this meeting and to invite their representatives to attend.	
Review of notes from last meeting	<ul style="list-style-type: none"> • The TV contract has expired. We are looking to extend the contract until the New Year but have another company waiting to take over the contract when the extension is completed • Care planning is ongoing. The practice is working with medicines management on a project whereby a pharmacist and a pharmacy technician are going to Balmoral and looking at the ordering of medication and completing medication reviews. The practice is also going to be working with a dietician as part of the project who will look at nutritional supplements in the care home and with our patients in the community. This is a trial that we hope will continue. • The satellite unit now only has a GP at the evening Monday to Friday as there is no longer a nurse practitioner. This will change in the next few weeks so that a practice nurse will be available in the evening as well as at weekends. The nurse will be to do BP checks, ear syringing, blood tests and asthma reviews. These appointments are only bookable via your GP practice. • Extension. At the last meeting the forum asked to be involved in the plans for the dentist. During the last week the practice had been notified that some funds may be available to enable us to start work but that plans had to be finalised quickly. The forum had seen the plans previously and Gill explained that there had been very little changes to these. The plans were now with the architect and hopefully work will start in the new year. 	

CQC	<p>CQC had visited the practice on 30th August. The report had been corrected and should be published in the next couple of weeks. The practice was rated Good for every category and had a comment praising the team for the work they do with the community. Gill thanked the forum members who came to talk to the inspectors and gave up their time.</p> <p>The forum wanted to formally congratulate the practice on the result of the CQC inspection and for their hard work and care looking after the patients in Woodhouse.</p>	
Tannoy	<p>The Tannoy system has not been working for some time. The practice had received a quote from the telephone company to repair it. The quote was £300. The new TV will ping and show the patient when they are called. The forum suggested the practice save the money for now and look at this as part of the refurbishment. Gill explained that for now we would be updating the check-in screens so it shows which waiting room patients are to wait in as they check in.</p>	
Loss of income to the practice	<p>With the funding cuts to the NHS, the practice is set to lose approximately £130K from its current budget. We are trying to find better ways of working that don't impact on patients however we cannot always do this. It may mean longer waiting times for appointments but we do offer as many appointments as we can. The forum discussed this and appreciated the dilemma and pressures we face. They also said that sadly this was not unique to this practice and was the same in most practices in the city. They felt the care and service was good with the resources we have.</p>	
Prescriptions	<p>One way to use receptionists' time more efficiently is by promoting the repeat dispensed scheme.</p> <p>Repeat dispensing is suitable for patients whose medication has been reviewed and who do not be seen at the practice for the next 6 or 12 months. A batch of prescriptions is sent to the pharmacy for the patient to pick up at any time. That means they do not order the prescriptions each month and the reception team only process one prescription every 6 months instead of 6. All items are sent on the batch of the prescription, however if the patient does not need them all, they tell the pharmacy before leaving so that the NHS does not get charged for them.</p> <p>Christmas is coming so the forum discussed the arrangements for ordering prescriptions for the holiday period. It was agreed for posters to be made and put up in the practice, the library and other public places. The poster would remind patients to order their repeat prescriptions in plenty of time before Christmas. The practice would issue repeats 2 weeks in advance.</p>	
Review of patient survey	<p>The practice felt that as it was 2 years since our last in house survey, it was a good time to redo this. The survey was</p>	

July 2016

completed. In this meeting the group discussed some of the negative comments.

- The telephone system. This cannot be changed for a few years as we are tied into a contract. The company charges for every change to the system we want to make. This applies to the Tannoy system already discussed.
- Consistency of seeing same GP. The practice tries to do this when a patient is seeing a GP for an ongoing problem. If the clinician wants to see them again, they will either book the appointment for the patient or send the patient to the reception with a slip. The slip will allow the receptionist to override the usual appointment system.
- More early and late appointments. We already have as many early morning appointments as we can and now have the satellite service for late night and weekend urgent appointments.
- Not being able to leave messages on phones. This is mainly due to patient confidentiality. Also people tend to change their mobile phone number and not let the practice know.
- Checking on old sick people. If a patient has had an emergency admission to hospital and has a care plan then the practice does phone them when they are discharged to ensure they know where to get help and that they have enough medication. Hospitals should give 2 weeks medication on discharge.
- Doors opening early so that patients are not kept out in the cold and potentially miss their appointments if there is a big queue at reception. The doors in a morning are sometimes opened however this is when the reception team are arriving to set up for the day and patients don't seem to understand that they cannot be served as soon as they are in the building to the point that some patients were being verbally aggressive towards the team. In a morning the appointments are released at the same time for the front desk as they are when the phone lines open so it would be unfair to serve face to face patients first. At lunchtime the doors are now opened early. Dr O'Neill stated that as clinicians starting afternoon surgery they always shout both waiting rooms just in case someone is in the queue.
- Car park. Gill reported that there had been further incidents in the car park where patients had parked inappropriately not letting ambulances in. The sign clearly states that it is not a public car park. The forum wanted an advert on the TV screen and notices in both waiting rooms

	<p>to this effect.</p> <ul style="list-style-type: none"> • Priority for emergency prescriptions when patients have run out of medication. <p>Whilst the practice understand that sometimes patients forget to order medication and they will not deny any patient medication they think is appropriate, they do think it is reasonable to ask patients to call back later in the day for the prescription so as not to interrupt a GP to sign it. The forum was totally in agreement with this and said that it was the patient's responsibility to ensure medication was ordered in time. Gill emphasised that repeat dispensing is a good way to help with this.</p>	
Newsletter	<p>A newsletter is in the process of being compiled. The forum asked if a few members could look over it before it went public. Gill agreed. The forum wanted including;</p> <ul style="list-style-type: none"> • Funding pressures • Satellite service and how to get an appointment • Christmas opening times of practice and satellite • Prescription ordering for Christmas • Repeat dispensing • Use of mobile phones in the practice • How to get results • Car park • Flu clinics • CQC result and forum feedback 	
Junior GP	<p>The forum discussed with Dr O'Neill the junior GPs we have at the moment. They wanted to express how polite, understanding and caring our junior doctors are. Dr O'Neill thanked them for their compliments.</p>	
Summary of meeting	<p>This was a very positive meeting. The forum appreciate that the practice does the best of its ability with the resources it has. They congratulated the team on the CQC report and praised the trainee GPs. The forum feel the practice should promote the good service and work it does for the patients more by using the newsletter and putting up posters in the local community.</p>	
Next meeting	<p>Monday 16th January 2017</p> <p>Gill wished the entire forum a healthy and happy Christmas and New Year!</p>	