

Abbey Medical Centre Patient Participation Group meeting

March 15,2018

Present: Mr G. Din, Richard Hepple, Thelma Hembury Chris Barnatt, Christine Tyldesley, Jean Reid, Jean Yarnell, Gerry Coppel, Sue McNab, Dr Nick Browne, Debs Smith.

Apologies for absence: Joy Stevenson

Minutes of last meeting: Agreed

Matters arising: None

Golden Years Funds: Debs said there was £143.70 left in the fund, as a result of a donation and raffle. We agreed we would look into how we can use the money by having a session for a different group, perhaps the lonely and frail.

PPG Patient Survey: In view of all the changes taking place in the clinical commissioning groups in Greater Nottingham, it has been decided to postpone the annual patient survey at least until after the summer. Dr Browne said the surgery might think about doing one of its own later in the year. Debs explained that each surgery is performance monitored and one of the factors they are judged on is the patient survey results. She felt the surgery might carry out its own dignity and respect survey as in previous years and it has also taken part in a patient safety survey.

PRG report: Both representatives for Abbey, Richard Hepple and Sue McNab, are questioning whether their time is well spent going to the monthly Patient Reference Group meetings and they were thanked by the PPG for the time they give. Richard had previously presented a detailed report about how the role of the PRG has changed over the years and what will happen in the future when the four CCGs in and around Nottingham combine to form a Greater Nottingham commissioning body. The question of how patient representation will be achieved is very much up in the air.

News from other Nottm West CCG practices: Two Eastwood practices are merging but will still operate from two buildings, one of which will be for routine appointments and one for urgent care. The computer systems will merge.

Hickings Lane surgery in Bramcote/Stapleford has become a site for a public access defibrillator. Dr Browne said the Abbey surgery has a defibrillator but it is not open to use by the community.

The PRG had had a presentation on the NHS England primary care quality dashboard. This uses information extracted from medical systems re screening etc but not personal details of patients. Debs said some of this information was not particularly up to date, on immunisation etc and some information is not as accurate as it might be.

Richard Hepple said there was a time when allowances were made for GP surgeries in deprived areas, where there were more health problems, but no longer. Debs said deprivation was taken into account for some of the areas. Dr Browne said the surgery's NG9 postcode does not take into account the areas of the city where between 25 and 30 per cent of the Abbey patients live.

The Care Quality Commissioners will be making random visits in future, even to surgeries who scored good or outstanding, but will be focussing on whether surgeries are well-led and effective.

Online Access: Debs said surgeries are under pressure to reach a target of 25% of patients booking appointments and repeat prescriptions online. It presently has 14.5% of patients using online services. Next year the target is increasing to 50% and there may be some financial penalty if this is not achieved. PPG members were asked if they could come in to some morning surgeries to encourage patients to register online. Chris Barnatt said this was linked to the government's aim of making everything digital. Mr Din pointed out that this is very difficult for people for whom English is a second language.

Debs said one idea was to register people without asking them and then deregister them if they object, but Gerry felt it would be very wrong to do that. Chris Barnatt said it could also be a worry where data protection is concerned.

Another problem regarding online services is where patients change their mobile phone numbers without advising the surgery. Text reminders of appointments will then go to the wrong number. All patients are asked to advise the surgery if they change their numbers.

Children's Corner: The practice is very disappointed that the area keeps being trashed. It was the fund-raising efforts of the patient group which paid for the revamp of the children's area but she wondered if it was worth investing more money in replacing things that have been damaged or taken away. Sue wondered if it was a lack of toys to play with that made the little ones pick off the wall stickers and is to look into this.

Recruitment of new members: Although there was a good turnout at the meeting, there is always room for new members. Sue is to approach a possible younger member and Dr Browne said he would give some thought to approaching patients who may be interested.

Any other business: Christine Tyldesley, who is allergic to micropore, was disappointed the surgery could not find a plaster when she had a blood test. She had to go home with micropore over a swab and had a red mark as a result. Debs said she would take this up. NB A review found that plasters were available in the nurses' rooms and also in the first aid box in reception. Plasters are also usually kept on the phlebotomy trolley and this will be checked up on.

Mr Din raised a concern about elderly people getting appointments for two weeks hence and, having no-one to remind them when the time comes, missing their appointment. Apparently they then get a text telling them they have missed an appointment but not one to remind them. Debs will look into this. Sue was concerned that people are waiting two weeks for an appointment but accepted it might be if the patient wants to see a specific GP. The surgery has been a GP short but Debs said she felt a two-week wait is not the norm.

Concern was also raised about people being shunted round in out-of-hours visits to the care centres, where a doctor sends a patient to the QMC and then a nurse tells them to go back to the care centre.

Date of next two meetings: Wednesday, May 16, 6.30pm, and Thursday, July 12, 1pm.