

## **Ashville Medical Practice Patient Reference Group Meeting Minutes 27<sup>th</sup> July 2017**

Location: Ashville Medical Practice Conference Room

Attendees: Melanie Jones (Practice Manager)  
Kathryn Turton (Administration)  
Patient Reference Group Members (12)

### **1. Actions Update:**

It had been agreed to invite Lisa Baugh, who is linked with the practice from “My Best Life” to the meeting. However, she was unable to attend due to annual leave, and Mel undertook to invite her to the next meeting.

She would explain the function of the service, which has been commissioned by the CCG for those patients who may currently request an appointment with a doctor, but who have non medical needs.

### **2. New Members:**

There were no new members in attendance.

### **3. Practice News:**

- Dr Leary and Dr Okpe will take up GP registrar posts on August 2<sup>nd</sup> for 12 months.
- Dr Bessant leaves the practice to take up a GP post at the end of July, having completed his training.
- The café has ceased functioning and is closed for the time being, leading Mel to apologise for the lack of refreshments at the meeting.
- Dr. Scargill will not be at the practice for 8 weeks, and Dr. Allen will be working in her place as a locum.
- The “I Heart” service tendered successfully for the out of hours service following Care UK terminating their contract on July 21<sup>st</sup>, 2017. It is now known as “I Heart 365” with a contact number of **01226 242419**. (The previous number will re-direct to the new number.) The administration is based in Oaks Park Primary Care Centre. The procedure for patients seeking out of hours care remains unchanged.

### **4. Terms of Reference:**

This document is revised annually as appropriate, the following points being discussed:

- 3 – Reporting: The requirement to publish an annual report by 31<sup>st</sup> March was deleted
- 4 – Meetings: A member requested a longer period of time than the current seven days in which to comment or make amendments about the minutes. This was not agreed.

- 4 – Meetings: The section referring to those who were absent from three consecutive meetings was deleted as members are able to participate on line.

Mel will circulate the revised draft to members.

### **5. Patient Survey:**

Mel explained that it was twelve months since the new appointment system was put into operation, and the questions on the survey for September 2017 needed to reflect this.

Several amendments to suit the change were discussed such as “see or speak” instead of “see”, more emphasis on the word “any” and the questions being enumerated differently to make them clearer. A suggestion regarding receptionists interaction with patients, both on the front desk and on the telephone was agreed.

Mel will circulate the amended patient survey form, and they will be made available in September, until 275 have been completed and returned.

### **6. Medication Ordering:**

The CCG are to introduce changes to help to avoid money being wasted by medications being stockpiled, and diverting the savings for better use. Mel referred to the changes outlined at the last meeting regarding medications being supplied by different companies, and possibly with a different name, but stressed there would be no detriment to the health of patients.

One of the main causes of stockpiling is automatic re-ordering by pharmacies, and more responsibility is to be channelled to patients who are able to request their own new supplies. Changes would be checked by a pharmacist and vulnerable patients who were unable to order their own medication, would be dealt with by an alternative system, yet to be determined.

Mel outlined a report which had been presented to the Patient Council by the CCG Medical Director about the new initiative, in which the safety aspects to avoid mistakes and confusion were stressed. Additional resources would be needed at practices if this is to be rolled out successfully. Methods of re-ordering medication are:

- 1, Internet
2. Mobile app
3. Repeat prescription box
4. By post enclosing SAE.

(Ashville do not encourage telephone requests for prescriptions as it is not considered safe due to the complexity of medications and possible errors, and it is imperative to operate a robust prescribing system.)

The proposed new system will be phased in gradually; it is in the early stages at the moment, and the CCG is examining its operation in other locations where it is currently running.

Members raised individual issues which Kathryn offered to pursue privately; it was confirmed that certain drugs cannot be ordered as repeat prescriptions for various professional medical reasons.

Much discussion took place around the proposed new ordering system, but Mel informed the group that more information was required from the CCG before she was in a position to clarify some of the issues raised.

### **7. Patient Council:**

The next meeting is on September 27<sup>th</sup> at 6.00 pm at Hilder House. The representative who has regularly represented Ashville is currently having difficulty in attending. She asked for anyone else to attend who was available, stressing that the meetings are open to anyone who wishes to participate.

### **8. Any Other Business:**

(a) The flu clinics will be held on September 20<sup>th</sup> and October 14<sup>th</sup>.

(b) A member raised the issue of continuity with a GP; it was stressed that a patient could ask for a GP of their choice when being triaged. It did not always follow that this GP would be available due to holidays and other commitments, but the patient would be told this when they asked.

(c) In response to an issue raised by a member regarding booking appointments ahead, Mel explained why the current appointment system was in operation and the reasons why it worked so well for the benefit of patients. It is not in the best interests of the practice or the patients to make any alterations to provide appointments in advance. The majority of the group totally supported Mel in this matter, stressing how well managed and efficient the system of appointments the same day was operating.

(d) The logistics of the building were discussed and Mel explained that people visiting the building and others who worked in it were under the impression that Ashville Medical Practice was a reception for the whole building. This is not the case and at times is problematic. A member of the group made a suggestion of a directional board and was asked to write to SJM Developments who are the Landlords. (Patient member JC)

### **9. Next Meeting:**

This will take place on Thursday, October 26<sup>th</sup>, 2017 at 1.00pm at Ashville Medical Practice in the Conference Room.