



Sherwood Medical Partnership

Clipstone | Farnsfield | Rainworth

CROWN MEDICAL CENTRE

Minutes from PPG Meeting

2nd June 2016

Attendees: Pat, Jacqueline, Angela, David, Kevan, Julie Moyes and Sam Summers.

Apologies: Ian, Theresa and Rachel.

	Actions
MERGER	
<ul style="list-style-type: none">A full merger between SMP and Rainworth will not be going ahead. GP Partners had decided that as there are a few differences between the 2 sites it would be more beneficial to become a Federation and still help each other out but also work independently in ways each practice is used to. The LMC were invited to meet with Partners and this agreement is entirely amicable on both sides.	
<ul style="list-style-type: none">PPG felt overall the experience had been a good thing as we have learnt things from each other moving forward.	
<ul style="list-style-type: none">PPG group are still interested in maybe running a joint meeting in the future for the 3 sites, or across the Sherwood practices.	
STAFFING	
<ul style="list-style-type: none">Julie Moyes will be moving back to Rainworth to work from there. Date not yet confirmed but possibly as of 1st July.	
<ul style="list-style-type: none">When Julie had her meeting she was told Crown would be advertising for a New Practice/ Business Manager.	
<ul style="list-style-type: none">Emily Denny from IT has left and been replaced by Ryan Tarry	
<ul style="list-style-type: none">Nathan Bird has left prescriptions and Tanya and Abbie have now moved into prescriptions and are being trained up.	
<ul style="list-style-type: none">Dr Thurland coming back as a salaried GP in August	
<ul style="list-style-type: none">Dr Bryant also coming back in August for 12 months	
<ul style="list-style-type: none">The ANP position has been advertised but no decision has been made to take one on	
MATTERS ARISING	
<ul style="list-style-type: none">It had been suggested that when we had been in the building for 6-months we carried out a survey for feedback of the building ie what were	

the benefits of the new building? It is now 6-months so we could do this.	
<ul style="list-style-type: none"> Smoking signs – there are no smoking signs all around the building, however, patients are still smoking on site just outside the building. 	
SATURDAY CLINICS	
<ul style="list-style-type: none"> Patients are confused as to when these take place at each Practice. Pat suggested having a poster/folder at reception so that staff and patients had the information to hand and could look at it. Also that the dates could be advertised on the message board and the web site. 	Helen
SURVEYS	
<ul style="list-style-type: none"> These don't generally get a great response unless they are handed out to patients. Discussed should we devise our own survey with our own questions? We thought questions regarding the new building could be included in this. 	
<ul style="list-style-type: none"> Friends and Family questionnaires – don't get much response. There were 4 completed last month (May) – 3 likely to recommend the practice and 1 unlikely, some very nice comments were included. 	
APPOINTMENTS	
<ul style="list-style-type: none"> Discussed patients not attending for appointments (DNA's), was this any better? The number of DNA appointments was requested – Pat said across the NHS it was around 5%. Julie will check Crown. 	Julie
<ul style="list-style-type: none"> Telephone bookings – an instance of being on hold with 7 people in front of you and having a lengthy wait was relayed, it was agreed you can be on hold a long time before you manage to speak to a receptionist. The PPG recognised some calls take longer than others and it was suggested that if this happened at the front desk, with a queue of people waiting, perhaps the call could be transferred to the back office and another member of staff come through to the front counter, or alternatively transfer the call to the reception office for another member of staff so there is a receptionist available to help patients at the front desk? 	Helen
<ul style="list-style-type: none"> Asked what could be done to improve waiting times for appointments, if you want to book to see a particular GP patients have to wait over a month? It was hard, and is hard across the NHS there is a general shortage of GP appointments. Appointments are finite numbers and there are templates for when appointments are available to book, some ahead, some several days and some on the day. 	
<ul style="list-style-type: none"> Are all GPs available to book with online? Kevan said Dr Das did not have any available appointments to book online. Sam will task Helen about this to look into. 	Sam / Helen
<ul style="list-style-type: none"> Slips to have in GP's rooms for repeat visits in say, 2-weeks so that patient can hand to receptionist to book appointment. 	Helen
HYGIENE	

<ul style="list-style-type: none"> Jacqueline mentioned that the toilets don't always smell great and asked if it were possible to have some form of air freshener in them? This was discussed as to whether it would affect patients with health issues such as asthma; this does cause problems for some patients? 	
GP's	
<ul style="list-style-type: none"> It was mentioned that a lot of patients don't know who the GP's are? Could we have a board in the practice with a photograph alongside GP name? The information is available on the website but not all patient have access to/or access the internet. One suggestion was to have a photo on the GP door. 	Julie/ Sarah
TELEPHONE CALLS	
<ul style="list-style-type: none"> As our number is now withheld patients don't always answer when we call so this could result in more calls being made and time and money spent on trying to get hold of patients. Not something that we have decided at Crown but Pat said this was across the NHS. 	
<ul style="list-style-type: none"> How many phone lines do we have coming into the practice? Explained that it is just 1 but then diverts to various phones and we have overflow phones upstairs for if the reception lines get too busy. 	
FRONT DESK	
<ul style="list-style-type: none"> Saying it's too open and people can hear what is being said. Ryan will look into getting the radio coming through the sound bar again. 	Ryan
<ul style="list-style-type: none"> Always very busy at front desk so if you are not able to log in at the self-check in you can be queuing and then late for your appointment. Sam to Task Helen re this to see if there is anything we can change. 	Sam / Helen
PRESCRIBING TEAM	
<ul style="list-style-type: none"> Post Discharge Medications: it can take a very long time to get medications amended post discharge, how long does it take for practice to get letters / how long then to action and issue prescriptions? Patients should be discharged with enough tablets to last until GP practice is able to issue prescription. 	
<ul style="list-style-type: none"> Received a letter and poster from Mansfield and Ashfield and Newark and Sherwood CCG's that Paracetamol is very expensive to prescribe on the NHS but not to buy over the counter. Long term users will still be able to have this on prescription but GP's should no longer prescribe for short term use, patients will be encouraged to buy over the counter and educated to voluntarily self-manage short term pain and illness themselves. Main concern from PPG is that GP's will not know what or how much patients are taking. 	
<ul style="list-style-type: none"> Information to be put up in the waiting room. 	

AOB	
<ul style="list-style-type: none"> Do we have any specialist GP's at all? The idea of holding group chats for patients with certain conditions was mentioned again and Pat is looking into this. 	
<ul style="list-style-type: none"> CQC visit – we had the LMC (Local Medical Committee) visit the practice to do a mock visit recently but unfortunately no members of the group were available for them to speak to. Once we have been notified of the date of a CQC inspection an email will be sent to PPG members asking if anyone is available, this is expected within the next few months. They do like to meet with the PPG group. Pat and Jacqueline are happy to speak with them if available at the time. 	
SAD – Sudden Adult Death Trust – Long QT Syndrome	
<ul style="list-style-type: none"> David and Angela Hosking joined us today to talk about this charity and the work they do for them after sadly losing their daughter Joanne to this 8 years ago at the age of 31. The charity was set up 12 years ago by the parents of Ashley Jolly who died of this. Symptoms of this disease are very similar to that of epilepsy and SADS UK are trying to raise awareness around the country as to the symptoms that can lead to this (had a few more tests been done at the time Joanne's condition may have been diagnosed as her condition started to develop in her teenage years) and also raise money to buy defibrillators for various places. They can buy these for £1200 which includes training. They want to get them into schools as it is a disease which affects young people; however, the government will only allow them to be put into new schools at the moment. This is what James Taylor, the England and Nottinghamshire cricketer has been diagnosed with and has caused his retirement from cricket. 	
<ul style="list-style-type: none"> David will be doing a charity cycle ride from London to Paris from 20-24th July and they would very much appreciate our help in raising sponsorship. They have left some information and donation boxes with us at the surgery. Angela spoke about how helpful Dr Smith was and the support he gave the family after Joanne's passing. With the money raised they wish to donate one of the defibrillators to the practice. 	
<ul style="list-style-type: none"> Leaflets have been left with details about the charity and how to donate; we can also put information on the call screen, website and twitter. Sam to task Ryan to update call screen and Twitter. Sarah Bailey to update the website. We can contact Angela or David for more leaflets if needed. 	Sam / Ryan Sarah
No date selected for next meeting.	
CLOSE OF MEETING	