**Greenside Surgery Patient Participation Group**

**The Minutes of a Meeting held at Greenside Surgery**

**on Thursday 23 April 2015**

**Present:** Dr C P Myers

Sarah Caddick (Assistant Practice Manager)

David Pearson – (Chair)

John Byers

Susan Byers (Minutes)

Jennie Searle

Maureen Taylor

**Apologies:** Carole Dalling Practice Manager (on leave)

 Lee Rourke

 Ann Clough

**Welcome, Introductions and Housekeeping:**

The signing in sheet had been circulated and signed by those present.

John Byers asked if those members who had not attended meetings for some time had been contacted to ask them to confirm their membership and, if so, had any of them responded to the enquiry. He was informed that Lee Rourke had replied and said that although he was finding it difficult to attend meetings, he was still a member and asked to be emailed with all PPG documents. Ann Clough had sent her apologies for the meeting.

**ACTION:** Sarah to firm this up with Carole when she returned from holiday and to check whether everyone had received the email that had been sent out.

The Minutes of last meeting on Monday 15 January 2015 were approved.

The Practice Newsletter was circulated for information.

Dr Myers gave his update on national and local matters:

Locally, the electronic prescription service was now up and running and some patients had started to use it. Dr Myers clarified that there were some restrictions owing to the fact that controlled drugs could not be prescribed. It was noted that acute prescriptions could not be requested electronically at present. There were some complaints from patients reporting that they had not received their prescriptions when expected. However, Dr Myers pointed out that this service was still in the evolutionary stage and needed time before it was working 100%.

The new practice nurse, Donna Bradbury, had started working part-time at present but would be working full-time eventually as she is currently on a Nurse Prescribing course which will have a beneficial effect on nurse time in the future.

February and March had been difficult months as the practice was still one doctor down. However, Dr Myers was delighted to say that Dr Riddell (a former GP Registrar with the practice, and now fully qualified) would be starting work at the beginning of August, which should ease waiting times considerably.

There had been a huge strain on waiting times over the winter period. John Byers asked if the unreliability of the recent flu jabs had played a part in more visits to surgery. Dr Myers replied that there had been some cases of flu but not on epidemic proportions. Also, now that Sarah had begun working in the practice and with the awaited addition of Dr Riddell, things should be up to full strength by the summer.

It was noted that building works were going ahead with the new hospital walk-in centre, which was planned to open in 2016.

Nationally, there were doubts on the politicians’ views on the NHS. There was a national crisis, in general, of the shortage of NHS doctors.

Rotherham had become a first wave CCG. The local Group commissions GP practices and had taken over contracts. It was very fortunate that in Rotherham there was a pro-active CCG. Money was being put back into practices’ and used accordingly. The Greenside Surgery practice will eventually become funded with these new monies. Joint injections, minor surgery, phlebotomy, etc., may be reimbursed. Doctors should be paid for what they were practising instead of not receiving any funding for extra services they provided.

With regard to appointments, open access and DNA, there were now notices displayed in the waiting room about patient non-attendances for each week. These referred to patients who had booked appointments but did not attend or cancel their appointments in advance. This equated to 5% of requested appointments per week. It was proposed to contact serial offenders by letter intimating that if they continued not to turn up to their booked appointments it would be requested that they seek a new practice elsewhere as failure to attend appointments was no longer acceptable at Greenside Surgery. This was very annoying, especially when patients criticised the practice on its feedback forms for sometimes not being able to have immediate appointments when this was happening. A draft letter, which had been circulated previously for the Group’s approval, was approved but some felt that it should be worded stronger. Sarah mentioned that on one particular afternoon/evening surgery, there were 9 patients who didn’t turn up and that 2 of these were repeat offenders.

John asked about parents requesting a ‘school note’ from a GP with regard to their children going away on holiday during term time. Dr Myers replied that he didn’t issue any. However, if parents wrote to him requesting one he would ask them to contact their children’s school and ask the school to contact him directly.

Dr Myers then stayed for the rest of the meeting.

**Any Other Business:**

The NHS Friends and Family test was a basic questionnaire for feedback on services the practice offered. It gave the chance for patients to have their say of the experience they had had at the surgery. This was a national initiative from NHS England.

A test copy was handed round for members’ information. A lot of the comments focussed on the lack of readily available appointments. David asked where the DNA notice it was and Sarah replied it was at the reception window.

It was noted that, so far, there had been 28 non-attendances appointments this week. A report would come back which would be added to the newsletter. Open access was still manageable, even though the practice was 3 members of staff down. Dr Myers hoped to continue the service.

David asked if the Chantry Bridge practice was still closing down this autumn. Dr Myers replied that it was and that he was aware that letters had been sent out to all its patients, but so far no-one had applied to Greenside. However, we must wait to see what happened when the doors were actually shut and the practice closed down. It was confirmed that the Walk-in Centre would still be open; it was just the GP practice there that was closing.

A copy of the Standard Reporting Template was distributed. Sarah said it was just a copy of what had been sent in for members’ information. Dr Myers said it was an enhanced service that was initially funded, however, once activated, the money would be no longer available. More and more items were added which then became incorporated into the practice’s job.

David asked Sarah how her first month had gone. She replied that she had worked at her previous practice for 13 years but was now settling in and had been made to feel very welcome. She was making assessments and tweaking little things to work for her as she went along and was thoroughly enjoyed it.

The meeting closed at this point. Dr Myers said there was still room for new members to the PPG. It was felt by some members that the Group should be kept at a fairly low scale of around 8 members.

The dates of the next meetings were scheduled for:

* **20 August 2015**
* **15 October 2015**
* **January 2016 (date to be confirmed)**