

PATIENT PARTICIPATION MEETING

Wednesday 20th June 2014

Attended by: George Connolly, Mary Ratcliffe, Mike Skidmore, Katie Power, Dr Hyde, Dr Clarke, Graham Palmer, Kerri Jones, John Walsh.

Apologies: Eric Smith, Philip Ashton.

Chair welcomed the group and apologies were noted. The minutes of the previous meeting were agreed as a true account.

Health Education Day – Mental wellbeing

Mary is in the process of completing a full report for the website/newsletter. Dr Hyde and Kerri agreed the day was valuable and after a quiet start conversation began to flow with stories told and questions asked.

The group discussed the next HED and it was agreed this would focus on Cancer and its effects on sufferers, family members and carers. In addition we will discuss support and resources available. Mary to contact her Macmillan rep and see which of the two dates, 1st October or 8th October, are better suited at which point the date will be confirmed.

Other suggestions for potential HED were smoking cessation and carers.

Avoiding Unplanned Admissions

Katie outlined the new national initiative rolled out in general practice as below:

- To identify top 2% of practice list who are most vulnerable to an emergency hospital admission.
- To assign a lead GP to that patient and arrange a face to face consultation.
- To agree a care plan with that patients for their care going forward in a bid to avoid an unplanned hospital stay.

Katie confirmed that we had completed the early stages of this project and were now working through the care plans with the patients. Clinical feedback so far has been positive as has patient feedback.

Named GP for patients 75 years old or older

Katie informed the group of this new contractual initiative to give all patients 75 or over a named GP for the co-ordination of their care. In actual fact the named GP they have been given may well have no bearing on the GP they prefer to see and this is fine as this remains unchanged. Clinical feedback is less positive about this incentive as they feel it could potentially confuse patients about who to see and feels like a paper exercise. No patient feedback has come through as of yet. The practice has now completed this piece of work and letters have been sent to the group of patients in question.

Back General Practice and Put Patients First

This RCGP campaign is to gain support to have funding for primary care increased from 8% to 11% of the NHS budget. This is because the demands on primary care are already outstripping supply and with more and more services to be moved from

other areas in to primary care this is only set to get worse. We need more funding in order to offer proper care/access to a GP.

The group have been asked to read up and support the campaign and do their best to influence other patients to do the same.

The DNA board will temporarily be used as a campaign board and a paper copy of the petition is to be hung there with supporting information. Katie is to email the information to the group.

Electronic prescribing

The group discusses some potential teething problems with the new service. This is around certain medication not being sent electronically due to a technical hitch and the pharmacies not downloading the electronic scripts in a timely manner. Both these issues are currently being looked in to by the EPS team and Katie will feed back to the group the findings.

This service is set to improve further as patients will soon be able to access their repeat medication via the clinical system (not the Spinney website) which will mean they will see what their repeat medication is, when it was last ordered and how many were issued. This request will go straight to the practice so no need to come in. When authorised this will then go straight to the pharmacy. A huge improvement!

However we need everyone to register for Patient Access in order to deliver on this.

Facebook/Twitter

The group discussed reaching a wider variety of our registered patients. Kerri suggested developing Facebook and Twitter to this effect. Kerri kindly offered to do this. She will configure the Facebook page to link to twitter and we will be able to share information quickly around our patients, other services and the wider health environment also.

Date of next meeting: 3rd September 2014