**PATIENT GROUP MEETING AT THROSTON MEDICAL CENTRE**

**WEDNESDAY 2nd DECEMBER 2015**

**12.30 – 2.00pm**

**PRESENT:** Ann Heppenstall Business Manager, Hellen McKenzie Receptionist, Mr & Mrs Jo, Mrs Sm, Mr Do, Mrs Ri, Mr Ch, Mrs Ha, Mr Sh.

**APOLOGIES:**  Dr C Parker,Mrs Rh,Mrs Be,Mr & Mrs To,& Mrs Ca

Ann welcomed and thanked everyone for attending the patient group meeting and for all their help throughout the year; it has been much appreciated by the practice

**ITEM 3: Feedback on Minutes from previous meeting**

Everyone received the previous minutes and confirmed they were accurate

Patient survey results, feedback from copies given at last meeting:

Mrs Ha commented that there was some positive feedback

Ann suggested from one comment that we publicise an organisation chart and explain who does what e.g. nurse practitioner – agreed to look at implementation of this in the new year to use usual advertising methods e.g. posters, website, notes on prescriptions etc.

Mrs Ri commented that it was a shame that not a lot of people completed these forms; it was felt that as a practice we had exhausted all the avenues to get more forms completed.

Text messaging – practice now offers sms text messaging service, currently being used for flu reminders and annual review’s. Issue around consent to text will feedback at next meeting.

CQC report was sent to the group with the minutes of the last meeting all confirmed they had received these – no comments from this report to discuss group happy with outcome.

Mr Do said that he wanted to know if there was any line of communication between the management and the Committee other than the formal meetings. He said that before the September meeting he had heard a conversation about an incident of a doctor becoming unwell at work and was concerned that this was the first he had heard of it. It led him to wonder if other lines of communication existed. Ann confirmed the only methods were paper minutes sent to group members and displayed on the practice website. Mr Doherty said he was concerned that matters such as the one he had mentioned should not be discussed outside the official meeting. He said that gossip, whilst very hard to eradicate, should have no place in the group’s proceedings. There was no way of knowing who had heard the conversation nor the mischief that might have been caused.

**ITEM 4: Patient group practice requirements**

Feedback provided on the 3 chosen priority areas:

1. **Access to both sites** – Dr Parker and Ann have had a meeting with the landlords and were not able to secure any funds for replacement of any electric doors, whilst the practice appreciates this is important to the group they will place this on an improvement list for the practice should finances become available, priority this year is to replace all the clinical rooms with vinyl flooring to meet CQC standards. Mrs Ha suggested the possibility of having a bell for patients to ring for staff to go out and assist them if they were having problems accession the building – will take to partners and feedback
2. **Review of Complaints** – Complaints received by the practice from September 2015 to date:

One – regarding a staff member – been addressed

1. **Comments box –**

2 comments have been received – 1 positive & 1 negative

4 comments available on NHS choices – 2 negative & 2 positive – the practice will reply to these comments on NHS choices

Mr Sh commented that the box was out of sight, it was explained that the box has been located near the front door of both buildings and the other box available was for the friends and family surveys.

**Outcome from 3 key priority areas**

Feedback from these areas will continue to be provided at each meeting.

**ITEM 5: Surgery Updates**

Following the last meeting the practice was given the opportunity to employ a practice pharmacist via a partially funded scheme. The practice was required to submit an application for this and it was required that we obtained the backing of our patient group for this, due to the short time frame Ann contacted as many people from the group and explained the process and would like to thank all we spoke to for their support in this application. Unfortunately we were not successful in this application but the practice has decided to employ a practice pharmacist themselves, her name is Micheala Connolly and she commenced with us on 1st December – her role involves dealing with medication reviews, hospital discharge letters, you can access micheala the same way as a gp phone on the day and she will call you back- please try the service and feedback at the next meeting.

Specialist Respiratory Nurse

We have a specialist respiratory nurse joining us on 1st January Dorothy Wood, who will deal will our respiratory patients.

Suggestions on how to promote new staff was asked, usual methods, word of mouth, TV in waiting rooms, message on prescriptions.

Mr Do checked if the Nurse Practitioners can refer patients- yes they can

The practice still aims to look at recruitment of doctors

The group were asked regarding uniform for Nurse practitioners – it was a majority vote that a uniform looks professional, different colour to other nurses to identify role.

Did the doctors have a dress code – yes

The group was informed that all telephone calls at McKenzie are now recorded and the only member of staff who had access to them was Ann the business manager, this will take place at throston in January when the new telephone system is in place.

Mr Do aske was there a reason we had an engaged tone rather than a queue system. It was explained from patient feedback and patient group it was agreed there was a preference to an engaged tone rather than being placed in a queue, this was due to being charged once connect to queue system and could be no appointments left.

**Item 6: Commissioning**

No update

**Item 7: AOB**

Mrs Ri had previously requested could a copy of the template letter that we send out to patients be seen by the group – Ann provided these templates and suggestion were made around the wording on these templates – Ann will speak to senior receptionist regarding this and feedback

The process around patients receiving results were discussed both written and over the phone, one particular incident regarding abnormal results was discussed the correct process was explained, Ann would feed this back to the senior receptionist to review.

Currently have BP and weight machines at both sites in waiting room, unfortunately had these for a while and no longer print out results, there is a notice advising patients of this, group asked if they felt we should remove these or keep them – agreed to keep

Mrs Sm asked what the protocol was for a consultant to give medication or to write a letter to the gp, Ann explained this process.

**ITEM 8 – Date and time of next meetings**

**Wednesday 2nd March 2016 – 12.30 – 2.00pm at throston medical centre**