



**TRINITY MEDICAL CENTRE
Patient Reference Group**

Tuesday 8 December 2015 at 6:00

Present:

Dorothy Richardson (chair)
Bob Wilson
Dorothy Robertson
Vera Skipper
Pat Brown
Ann Marshall
Robert Paterson
Heather Pearce
Dr Pattekar
Carol Craggs Practice Manager
Margaret McPherson Business Manager

Apologies:

Emma Kitching Trainee Practice Manager
Jacqueline Foster Nurse
Sheila & Jack McConnell

Heather was introduced to everyone and welcomed, this being her first meeting.

1. Minutes of Last Meeting

Matters Arising

Update on Key Priority Areas :

Margaret advised that everyone could see that the front desk has now been altered as agreed. It was agreed to lower it slightly for those “less” tall patients and an area for disabled patients. Everyone agreed that it looked very good. Feedback from patients was all positive.

Carol advised that the seating in the waiting area is due to be done in January. This would be similar to the blue washable chairs and will meet Care Quality Commission infection control standards.

Margaret advised that the practice had now met all the priority areas.

Appointments with your GP Leaflet

Margaret brought the amended leaflet following the feedback from the previous meeting for consideration of the group. After a couple of small changes and an additional column stating the days the GPs work, it was agreed.

2. Partnership Changes

Dr Pattekar advised that Dr Perrins would be retiring at the end of January although his last working day will be the end of December. Dr Mannikar is coming from Riverside to take up the sessions and she will be working 7 sessions.

The chair asked that we give thanks to Dr Perrins for all the years he was worked here at Trinity and his skills as a doctor was very much appreciated by the Group.

3. Friends & Family

Emma was not at the meeting but had passed on the Information for Carol to relay to the Group.

Carol handed out copies of the November results: 31 patients had responded via text message and 1 patient had put a slip in the box. It seems patients prefer the text response.

Of the 32 responses; 30 were Extremely likely to recommend our GP practice to friends and family whilst 1 was likely and 1 was Extremely unlikely.

The comments were

Thinking about your response, what is the main reason why you feel this way?

- I would like to see the same doctor every time I come into practice.
- I got an appt straight away. Felt listened to.

What would you do to improve the service ce?

- Don't know, don't go that often
- At this moment nothing as I am 100% satisfied at the service offered from my gp practice
- I have always found your service to be excellent, thank you
- Nothing, your service is fine. The chemist next door could do with sorting out though!
- Nothing
- Nothing
- Nothing
- Later evening appointments at surgery
- Nothing , I'm very happy, service is excellent
- Nothing, very happy with the service me, my husband and two children receive at this practice.
- Make it easier to get an appointment maybe online and if you want to to just email and ask a doctor some rather than have to come in

The group picked up on the comment regarding emailing the practice and Margaret felt this was an area which could be explored. One member advised that following a visit to the GP she had a small query and rather than waste an appointment she asked the receptionist who then asked the GP and contacted the patient with the response. It was agreed that for things like this which are a waste of an appointment would be ideal to have some kind of email facility to the GP. Carol advised that this could be done and the practice just needs to work through the process. Margaret suggested we make this a priority area to develop.

4. The Older Person

Margaret advised that this had been discussed at our last meeting of this group but since then, the practice had made some progress.

Carol continued and explained that the practice had delivered a clinic last week whereby 7 patients were invited to attend the new clinic which was an appointment with the GP; Nurse; Health Care Assistant and with James from Age UK – everyone had a cup of tea and biscuit and chat. Most of the patients were brought in by mini bus which was provided by AGEUK and some were brought in by family. Carol advised that we had asked one of our Patient Group members to attend so that she could give feedback.

Our member who attended advised that the whole process was excellent. She went on to say that the leaflet had advised that it would take 2 hours and it had actually taken that amount of time. She had been picked up the mini bus and the only criticism was that the driver did not know where he was going and did get lost. She went on to say that she felt respected and looked after and a real feeling of “importance”. She went on to say that tea had been made whilst she attended one of the appointments and staff made sure that she had her tea when she came out. The AgeUK adviser was very good and had given her information on an Allowance she did not know about and that was very useful. Overall she said the whole process was excellent.

Margaret went on to say that the AGEUK adviser was excellent he had so much information to give out and went on to outline what he had done for one particular patient

James covered the following with one of our patients:

- Benefits - including attendance allowance, pension credit and top ups, council tax.
- Carers, managing at home, aids, handrails and bath aids. She has a telecom alarm in case of falls she already seen in the falls clinic as broke her hip last year.
- He discussed heating and bills and whether she had received her winter fuel payment which she had. There is an energy advisor who will look at the comparison websites to see if worth her changing supplier for those living independently.
- She was placed on the Winter Watch List so if adverse weather someone from Age UK will ring to make sure she is safe, have heating and food and will arrange help and support if required.
- James also had access to an emergency heating pack which includes thermos, hot water bottle, fleecy blanket, energy bars etc.
- Her main problem was social isolation – discussed lunch clubs and activities, very pleased with this as can be collected by the mini bus to attend. Nicola from Age UK will contact her to discuss.

Carol went on to say that the AGE UK adviser had managed to secure a new boiler for one person for nothing through his contacts. She said he was absolutely lovely with the patients.

This was the first clinic and now the practice need to meet with all concerned and look at what went well, what needs improvement and what we need to change.

Margaret advised that the practice wants to take this out to those patient who are housebound and the idea is that the nurse will take an IPAD so that the patient can connect with the GP via face time for a consultation.

Margaret had produced a newsletter which she handed out. The aim for this newsletter is to get the message out to all our over 65 patients to let them know about the service and see the patient feedback. Some patients feel this is not for them but the hope is that after reading the experience of other patients they will give it a try.

In summary the patients who attended the clinic were all very impressed with the clinic.

The overall response from the group was that they felt the practice was delivering an outstanding service and being very proactive. The group thought that this service was excellent.

5. Families, children and young people

Margaret advised that this was another area the practice is currently working on – trying to connect with the younger population. Margaret handed out a Newsletter for the younger population asking for feedback on the content. One group member who had a teenage son agreed to get some feedback and bring it to the next meeting. Margaret advised that the practice are looking at face time consultations or using technology to help them to connect with the surgery. This is where email consultations would be good. One member pointed out that the caption “ Here to Listen and not to Tell” is a good message to the younger population.

6. South Tyneside Clinical Commissioning Patient Reference Group – Bob

Bob gave an update saying 13 GP practices are represented. Discussions around the delay in ambulances attending to call outs. A person with a broken ankle took over an hour – they are prioritising calls. The cancer agenda was discussed again and still no screening for prostate cancer. E-Cigarettes were discussed and if they are healthy for other people – although a lot healthier for smokers! These are being banned in public places in Wales as the fumes are detrimental to non smokers. Your Voice Counts did a presentation on looking after yourself at home. Ros spoke about the new Quality Award for practices but Margaret wondered why this is needed as the Care Quality Commission assess and award a quality status? Finally Bob advised that the pharmacist adviser had stated that £12,000 is spent per patient per year on drugs on repeat scripts. This caused some discussion. Dr Pattekar feel that patients request medicine they do not need. Margaret wondered if the chemists who deliver just automatically request all the drugs and the patient possibly does not need them. It was agreed that there was a lot of waste in medication.

7. Newsletter – Facebook and twitter

Margaret produced the practice Newsletter for Christmas which is currently going out to patients. This was the usual newsletter. Margaret advised that there is a practice Facebook page and that we are also on twitter.

8. AOB

9. Date and Time of Next Meeting

The next meeting will be Tuesday 9th February 2016