

Minutes of the Patient Group held on Tuesday 15th August 2019 at HHWB (Allerton)

Present: Adeeba Malik
John Stone
Dr Arlene Raw
Sharon Barraclough – Business Development, Enterprise and Finance Manager HHW
Sandra Shallcross
Olga Green
Councillor Duffy
Audrey Matthews
Howard Turnpenny
Marion Le Pla
Romany Cole
John Samuel
Anthony Willoughby
Kathy Bairstow
Fred Stone

1. Apologies: Jennifer Hattersley

2. Matters arising / Minutes of the last meeting

The March minutes were accepted as an accurate record

3. DNA Policy

The DNA's (Did not attend appointment's) were discussed at length at the last meeting

The practice is very keen on finding a solution to this issue that appears to be a nationwide issue.

Details are kept on the patient's notes and they are spoken to where necessary. A conversation would generally be held after 3 missed appointments but care has to be taken regarding mental ability. Missed appointments are redistributed wherever possible. Various excuses are given and there is a group of regular offenders. It was suggested to charge a fee, but this is not viable at this moment in time. Additionally it was suggested that people could be removed from the patient list but this has not happened during the last two years.

We believe there needs to be a national discussion and perhaps a change to patient behaviour. We cannot refuse to register a new patient so removal from lists would only create a ping-pong effect. It was asked if we could get a comparative list between practices or a meeting between groups to see what worked. Perhaps send texts to patients who miss appointments detailing the costs to the practice (and possibly effects on others waiting for appointments) or maybe investigate the possibility of approaching a "SOAP" script team to include this as a story line (eg Coronation Street makes regular visits to their local practice)

On a side issue, patients have been removed from the list for inappropriate behaviour (eg verbal abuse). This is unacceptable to the practice and the police will be called where necessary

4. e-Consult

e-Consult started on the website on 1st August and is there for non-urgent questions from patients for which the aim is to answer within 48 hours. This is something the practice has opted-in to and is advertised on the surgery information screen. We are a pilot site and very few surgeries are taking part. Various clinicians will look at this through the day to give answers. It is found the information given by patients on a supplied template is very useful. There are no result figures as this has just started but it will be monitored to see if it affects the general practice. Figures should be available for the next meeting

5. Patient Participation Survey

It was asked if we wish to change the questions on the patient survey and it was proposed to send out a copy to the group to see if changes were required. Perhaps a text message could be sent out to patients to encourage people to fill it in. It is found that the upcoming flu-clinic is the best opportunity to distribute the questionnaires

In the last survey, it was found that the biggest issue was with the telephone system. This has been taken on board and staffing has improved. There are lots of calls and peak hours have been identified and are covered by more staff

Feedback is greatly received and it should be promoted

6. Practice staffing

We have lost 4 patient administrators (for valid reasons). We have 180+ applicants through "Indeed" for these positions. Interviews have started and there are good calibre applicants.

One HCA is now on maternity leave and has been replaced with District Nurse Katy Dunn who started in August. She does 30 hours per week

It is still very difficult to recruit a new GP. We are still continuing as a training practice as this can be used as an avenue to recruit when students see the whole picture

There are few reasons for these difficulties. The main one being money

As a Locum, doctors earn more money (often double the amount) and have no responsibility toward the practice. Hospitals used to have this problem but have now implemented a salary cap which is not possible for the practice

International recruitment is being considered but agencies charge a fee of £15,000 per introduction

7. Other business

There has been a program on TV about Bradford regarding problems in the NHS

With regard to the uptake of online appointments it is found that patients generally favour GPs against Advanced Nurse Practitioners although these people are fully trained and are perfectly capable. It is found that patients prefer to see the same person each time

Flu-clinic – an email has been issued asking for help in running these. It was also suggested adding “Please turn over” to the bottom of the patient letter to point out the address details that are required. Many people didn’t complete these last time

Shingles – There is a shingles rolling program being run nationally to target a specific patient group. This is one of many schemes being promoted by Public Health and not just the practice

Lloyds Allerton – They have changed their delivery times and these are now after 1pm and not before

Text Messages – Sometimes there are mixed messages that cause confusion and mistakes are made. Sometimes replacement appointments are made without patient agreement

Brexit – Is Brexit having an effect on medication. NO. Anything running out is for other reasons and if anything does run out then alternatives are always considered

John mentioned the next Patient Network Meetings that took place on 4th and 5th September at the Carlisle Business Centre and Scorex House (bottom of Bolton Road). All are allowed to attend

And finally – Date and time of next meeting

Thank you all for attending. And please look forward to the next one that will take place on a Tuesday 12th November at Clayton. Details to be forwarded nearer the event