

MINUTES

GREAT HARWOOD MEDICAL GROUP PATIENT PARTICIPATION GROUP MEETING

Date & Time: Wednesday 12th December 2012
2.00pm – 3.00pm

Venue: Baby Clinic
Great Harwood Health Centre

Those Present: Dr Grayson - GP
S Lord – Practice Manager
A Barker - Patient
B Knott - Patient
S Knott - Patient
D Bury - Patient
D Cockett - Patient
G Brown - Patient
G Rostron – Patient

Apologies: B Chippendale - Patient
A Cunningham - Patient
J Hall - Patient
G Dilworth -Patient
J Howard - Patient
A Wood – Patient
G Whitehead - Patient

Circulation: A Todd - Patient
K Dean - Patient
P Bolton - Patient
C Young - Patient
C O'Brien - Patient
L Fairbrother - Patient
R Woods - Patient
A Chadwick - Patient

Welcome

Dr Grayson opened the meeting by welcoming all attendees. He then presented the attached presentation to the group.

Future Meetings

Following the presentation discussions ensued on the best times and days for meetings. The practice does have constraints regarding fitting meetings around surgery times and room availability. There were mixed opinions of when meetings should take place and it is hoped that the next meeting will be in the early evening for patients who are unable to attend during the day.

Patient Survey

The main focus of this meeting was confirming areas for the patient survey which, as a group, we are required to undertake. The main focus for the survey was around

looking at the appointment system to reduce the vast amount of appointments which are lost due to patient's not turning up and publicising the services provided by the practice.

Dr Grayson answered questions on how the current appointment system operates and ideas for alternatives were discussed as per the attached presentation.

Telephone consultations were raised and Dr Grayson explained his reason for not routinely offering this service were centred around patient safety concerns of diagnosing over the telephone without being able to see the patient or examine them. The practice does accept many requests each day from patients asking advice from a GP which the GP will respond to, if they can, and reception will contact the patient with the GPs advice. If it is not possible to answer the patient's query then they will be asked to make an appointment. The GPs are happy for patients to continue to contact the surgery but would ask that requests be sent in an email form to ghmg@nhs.net rather than by telephone as these are easier to respond to and auditable.

Also discussed were prescriptions. Members of the group wondered how was the best way to order repeat prescriptions. The ideal way is to post the right hand side of the prescription clearly marked with the items requested in the red prescription box mounted on the wall in reception two working days before you need to collect your medication. The next preferred method is via email to ghmg@nhs.net listing each item you require. Most pharmacies offer a prescription service where they will order and collect regular items from the surgery and you just need to collect from the pharmacy, or they will deliver the items to your home. This service is only suitable for medications which you take regularly and not for ad hoc items such as painkillers, creams, gels etc. If you use this service please ensure that you inform your pharmacist of any changes to your medications as soon as possible to ensure you are taking the medication safely and to prevent waste. Your pharmacist should contact you 10 days before your prescription is due to be ordered to confirm which items you require. We discourage patients from ordering prescriptions over the telephone as this can lead to errors with verbal requests and it ties up the phone lines for patients trying to reach the surgery to make an appointment or request a home visit. In fact most surgeries do not accept telephone requests at all.

Questions

Practice funding was also explained by Dr Grayson. The surgery receives approximately £65 per registered patient per year for providing primary care services. It also receives financial reward for providing quality and achieving outcomes for patients with chronic diseases and to prevent patients from developing a chronic disease. Funding is also given for the provision of enhanced services such as removal of skin lesions and joint injections as mentioned in last month's presentation. The practice receives 1/12 of this income each month from which the GP Partners have to pay all staff, utilities on the health centre, office and drug consumables, postage, to name a few. After this the Partners can draw from the remaining monies.

Date & time of next meeting: Tuesday 5th February 2013 6.00pm.
Please confirm your attendance to Sarah by 1st February 2013.