

Friarwood PPG Meeting Minutes

24th April 2012

Present: Kevin Duggan – Practice Manager, Liz de Dombal (G.P.), Lynda Bowker, Betty Bridden, Barbara Brown, Janet Hardisty, Brian Chappell, Gordon Mullis,, Gerry .Delaney, Anne Tollick, Ann Jones, John Nye.

Apologies: Kath Evans, Geoff Allinson

Minutes of the last meeting were approved.

Kevin Duggan chaired the meeting.

DNA's; KD informed the group of a pilot scheme that the practice is taking part in where they are cooperating with the Acute Trust to help reduce the number of patient attending A&E. The idea being that if the hospital decides the patient can be treated at the surgery, then they can phone the surgery (who will hold two appointments back in the afternoon) so they can be seen. So far this has been running for two weeks but as yet no patients have been referred back to surgery. It was suggested that the real solution would probably be to change/educate patient's attitudes to the use of A&E services and to practice GP appointments.

Car parking; It was suggested that a strip saying Press Enter to complete exit process needs to be placed on the push button box.

PPG; GD contacted the Pontefract and Castleford Express to invite them to a meeting but there was no interest from them in doing so. JN reported that Wakefield is hoping to do a mass publication detailing all PPG's but until then the papers are not interested. New College has still not replied. Contact with the Duke of Edinburgh scheme is still on going. Dr D suggested inviting Yvette Cooper to a meeting.

Newsletter – KE has produced a two page newsletter which was thought to be excellent. An addition to this was to add the shuttle bus number on so that patients and visitors to Pinderfields could discover the times. It was also suggested that as the costs to the surgery of A&E appointments is of concern then these could be shown. In addition the date of the next PPG meeting could be shown.

The Patient Survey Report has been published on line as well as being available in the surgery.

Access and Care Plans; These are underway. Nurse Practitioner Jayne Robson is organising this. Letters will be sent out to patients next week.

Practice updates; Chiropody - Sadly the Chiropody service at the surgery will end on the 31st May. KD has tried to keep this in house but the PCT contract was withdrawn. Steve Bradley (chiropodist) is transferring to the Community Podiatry Service at the Community Health Service building in Pontefract. All patients on his case load will receive a letter informing them of this and every patient will be given an assessment of their needs from the Health Service.

Ophthalmology – KD will be meeting Huddersfield BMI to see what Ophthalmology service they can offer locally. LB and JH expressed concerns about two clinics in the surgery being provided by private providers.

Primary Care Transformation Scheme – this scheme is designed to put more money into General Practices to help provide more appointments and thus reduce A/E attendances and Emergency attendances at the Acute Trust. Two doctors have been appointed on six month contracts to help with this, however there is money available for these contracts to be extended to one year. Dr Stephen Carr will be in surgery on Mondays and Tuesdays. He will see thirty-six extra appointments on Mondays and eighteen on Tuesdays. Dr. Prasad will see eighteen additional appointments on Wednesdays.

A patient satisfaction survey is to be conducted regarding phlebotomy.

The GPs are to do more telephone consultations. Mobile telephones have been supplied to the doctors. This is being trialled and started last week. It is hoped that patients will gradually realise that these are available. There has been a scheme running in another part of the country (called Dr. First) whereby the doctor does a telephone triage assessment.

Any other business; J N has been attending meetings in Wakefield sharing good practice with other PPG's. He was pleased to comment that Friarwood PPG had better ideas than most! He will shortly be meeting with Dr Adam Shepherd from the Consortia. He asked if we were pleased to get feedback from the meetings and if we wanted him to continue attending. He was thanked for doing so and his input was greatly appreciated by the group.

Kevin was asked if we could have a diagram showing the layers of control that will be in place when the Consortia take over. This is to help better understanding.

Gordon Mullis raised the question of "G.P to arrange transport" which appears on hospital appointment letters. This is apparently a bit of a grey area as the Acute Trust passes responsibility to surgery's who then have to talk to the Ambulance service to see if patients are actually eligible for patient transport

P.P.G. meetings will now take place on the last Tuesday of every month.

The next meeting will be 29th May 2012