

Friarwood Surgery PPG Meeting Minutes

29th May 2012

Present: Kevin Duggan Practice Manager, Linda Dale G.P. Kath Evans chair, Paul Windeatt, Ian Thompson, Linda Bowker, Betty Bridden, Barbara Brown, Janet Hardistry, Brian Chappell, John Nye, Anne Tollick.

Apologies: Ann Jones, Gerry Delany, Gordon Mullis

Minutes of the last meeting were approved.

D.N.A's: This problem will be difficult to solve, John Nye is hoping to get feedback from other surgeries later in the month in the hope of finding a solution.

PPG meeting: It had been mentioned at a previous meeting that Yvette Cooper could be asked to attend a meeting. It has been decided that an invite will not be appropriate at this time.

Newsletter; The Spring Newsletter has been circulated to members and is now on the website. It will be available in the surgery.

Access and Care Plans: It is hoped to target up to 80% of Long Term Condition patients who qualify are to be invited in to the surgery to discuss their personal care plans. This is being lead by Jayne Robson the nurse practitioner.

Chiropody: This will service will not be available at the surgery as from the end of May due to the withdrawal of the contract by the PCT. Patients have been notified by the Practice and will be contacted personally by the Community Podiatry service for an assessment of their clinical needs.

Ophthalmology: There is some uncertainty as to whether this service will eventually come to the surgery. KD to review the options available.

Primary Care Transformation Scheme: The locums are proving difficult to retain as the Practice has high standards of clinical care. KD is trying to keep the posts filled via recruitment agencies.

Phlebotomy Survey: This still has not been done and the chair person (Kath) queried whether the PPG group should develop this survey. It was agreed that this was probably a good idea and will be discussed at the next meeting.

G.P Telephone Consultations: This is not proving particularly popular with either patients or GP's. As it is still in its infancy it will need time to settle in. It was thought that it needed more advertising. There are now more GP telephone triage consultation appointments available in the afternoon. It was suggested that it would be helpful if you could book a telephone appointment on line. It was also mentioned that it could perhaps go on the list of options given when you ring the surgery.

Reception area: There have been mixed reviews regarding the new open appearance of the desk. As with anything new it will take time for the new design to be accepted.

A+E: Posters: These did not particularly impress the group. The surgery is working in collaboration with MYHT but the extra appointments are not currently being filled as no referrals are coming back from A/E.

Consortia: KD gave a talk to the group about how commissioning works at the moment and how it will change in the future. KD also showed the group the makeup of the current consortia board or as it is now known as the clinical commission group (CCG).

Any other business: Wakefield would like members other PPG groups to join them and asked if our group would be prepared to talk to them and meet with other groups. John Nye already attends and Betty Bridden showed an interest. KD suggested that they could alternate their meeting venues to

encourage people from other areas to attend and make it easier for them. The next meeting is the 20th June at White Rose House in Wakefield.

Holiday inoculations; Brian wanted to know whether inoculations for rabies will now be included. Dr Dale replied that inoculations have always been offered to patients on a one to one basis as and when they are required. It was pointed out that these have to be paid for privately.

John Thompson mentioned “cookies” and whether this was a problem on the surgery web site. KD said he would look into this.

Betty Bridden was worried about results from consultations in another area not being forwarded to the actual doctor responsible for the referral. Until there is an amalgamated computer service between all NHS sites then this will prove to be problematic.

Next meeting Tuesday June 26th