Snaith & Rawcliffe Medical Group

# Minutes of Patient Liaison Group: Monday 16 April 2018, incorporating AGM

# *Members Present*

Brenda Mitchell (BM)

David Shepherd (DS)

Jean Brooks (JB)

Betty Wilks (BW)

Dennis Tredgett (DTr)

Eileen Hall (EH)

Barbara Pickersgill (BP)

Katrina Haigh (KH)

Paul Maher (PM)

Gareth Trenchard Morgan (GTM)

Dr Frances Booth (FB)

Dr Noel Tinker (NT)

Mrs Jacqueline Roe (JR)

**Apologies for Absence**

Phil Price (PP)

Dr Jon Martin (JM)

Dr Susie Foster (SF)

Dr Dan Thompson (DT)

**AGM**

Introductions were given and new members were welcomed to the committee.

**Re-elections**

Stuart Dransfield has resigned as Chairman as the PLG. We would like to take this opportunity of thanking Stuart for all his support and time he has given to the PLG and to the Practice over the last 25 years.

This has resulted in a vacancy for the Chair. We also need to appoint a vice-chair (as we do annually), as well as appointing a secretary and a treasurer (if required).

Dr Frances Booth asked for interested parties to contact Jacqueline Roe if they would like to nominate themselves for the positions. If we have more than one nomination for a position, then we will hold a secret ballot.

There will be an extraordinary meeting to be held at Snaith Practice on Monday 14th May 2018 at 18.30. **ALL NOMINATIONS TO BE GIVEN TO JR BY WEDNESDAY 9TH MAY 2018 AT MIDDAY.**

Once the positions have been agreed at the meeting on 14 May, then a new constitution must be written prior to the meeting in July. Support to assist with this can be found by accessing the NAPP website ([www.napp.org.uk](http://www.napp.org.uk)). Log on details:

Username: marshesppg@gmail.com

Password: greenfinch83

The four new members of the group were warmly welcomed to the group.

**Main Meeting Commenced at 19.00**

**Minutes from the last meeting**

These were approved

**Doctors Report on Practice Developments over the last 12 months**

* The Practice had a successful flu campaign – many thanks for the support from the PLG team again.
* Open Day- this was another success for the Practice and the PLG. We will be doing the same again in May 2019. Close links were forged with the local Primary Schools- resulting in some amazing artwork being displayed around the Practice!
* We stopped taking requests for medication both over the phone and on the dispensary answerphone. This caused a few issues for some patients, but the majority of people now registered for online access- enabling them to order prescriptions as well as booking appointments online. We need to continue to encourage more patients to sign up for online access.
* We have now got year 1 and year 2 Physicians Associates training in the Practice- this is a new scheme offered by the Hull and York Medical School (HYMS)- and we were one of the first practices to offer to take the students. This has been a good experience for both the patients, and the students.
* Last year we also signed up for e-consultations. Although the usage has been higher than we anticipated, it hasn’t really given us the benefits we hoped. We will continue to offer this until we can get an improved system.
* Unfortunately, there will no longer be a regular ‘baby clinic’ held at the Practice. Health Visitors are managed by the local authority, and therefore we have no control as to where they are based. However- there will be the same support for parents- they will now have to call an office and they will be triaged by the health visiting team. East Riding patients have a different office to call than North Yorkshire patients- however, all contact numbers are put into their baby’s ‘red book’.
* Last year we held 4 days of specialised clinics for our stoma patients. This was extremely well received, and we will be holding these clinics again this year.
* The girls in the practice ran the Leeds Muddy Run back in June- raising over £1,000 for cancer research.
* We had a new member join the PLG- Phil Price. Phil is warmly welcomed to the group.
* The virtual PLG group numbers are at 101 (a 25% increase year on year). This is a good number, and we will be looking to utilise this group more in 2018/19
* The Practice list size is the largest its ever been- it now stands at 10,514. We have no problem with GP / nurse recruitment, and we carefully monitor our future workforce challenges.
* The Practice also joined the National Association of Patient Participation (NAPP). This can be accessed by all of the PLG members (log-on details are at the top of these minutes).
* We have begun to manage our ‘DNA’ patients (Did Not Attend). We have devised a robust policy which we follow carefully. So far this year (2018), we have removed 4 patients for failing to attend 5+ appointments in a rolling 12 month period.
* The ‘Marshes Care Fund’ balance was discussed. It stood at £3026.55, the practice purchased an ECG machine (costing £1954.80), so the present balance is £1071.75. The balance is always discussed every meeting, and no purchases are made without the agreement of the PLG members.

**Developments in 2018/2019**

* The Practice is in the throes of recruiting a clinical pharmacist. The pharmacist will be able to do medication reviews, and a lot of other work that currently the GPs are doing. This will be of benefit to the practice.
* Extended Access- the government want GP surgeries to open 8-8 Mon- Fri, as well as Saturday and Sunday mornings. We are currently working with our neighbouring practices to establish a joined-up working proposal before the start date of October 2018.
* Care Navigators are highly trained receptionist who will ‘navigate’ the patient to the correct person. This may be a direct referral to physio, a nurse, phlebotomy etc etc. The receptionists here will start their training in the summer.
* Building works- we have been successful in getting funds from NHS England to create new consultation rooms upstairs, move a corridor, refresh the nurse rooms, and many other aspects of improvement. This work will begin in the summer.
* We are also looking to get all out Lloyd George records digitised- this is a huge project, but one that will be worthwhile for both patients and clinicians.
* The meeting closed at 7.45pm