

Minutes of Patient Participation Group Meeting Tuesday 6th August 2019

Present: HS (Assistant Practice Manager), TWS (Receptionist), HW (Apprentice),
Amanda from Woodhouse and District Community Forum, P1, P2, P3, P4, P5

Introduction

HS introduced the meeting by welcoming patients and introducing herself and HW to new PPG members.

1. Amanda from Woodhouse and District Community Forum

Amanda from Woodhouse and District Community Forum introduced herself and handed out leaflets with contact details for potential volunteers. She advised all patients that Woodhouse and District Community Forum works all across South East Sheffield and covers 11 areas in total, including Crystal Peaks, Sothall, Birley, Owlthorpe and Mosborough.

Amanda advised that the Health Team is a keeping well initiative through social prescribing; this means getting people out and about to different clubs and placing Health Trainers into practices. Lucy is Crystal Peaks Medical Centre current health trainer.

Amanda discussed the different types of volunteers she is currently trying to recruit. The idea of volunteers is to support practices and take pressure away from NHS staff. The different volunteers Amanda is recruiting for are:

- Drivers – to drive patients to the surgery and home from surgery when they are unable to get out independently.
- Admin Support – to support with the admin duties carried out on a daily basis within GP practices, this could include photocopying, tagging, shredding etc.
- Peer support facilitator – for the volunteer to have a well-controlled long term condition therefore to be able to hold support groups for people with the same long term condition who are not managing well. A nurse would be present and a health trainer if available.
- Digital Mentor – encouraging patients to sign up to online services and show patients how to use using a test patient or their own record with written consent. P1 would be interested in this.

Amanda advised if patients are interested to contact her on the details on the leaflet she has handed out, the volunteer would need 2 references, a DBS check would be undertaken and an informal interview would take place. Confidentiality is extremely important therefore a disclaimer would have to be signed. Amanda currently has 15 volunteers and all expenses would be covered. P2 queried the hours that would be required of a volunteer and Amanda advised it is down to the individual as to what suits them. The role can be very flexible.

Amanda left the meeting.

2. NHS App

HS went on to discuss the NHS App that is going live in September. She advised you can book appointments online, order repeat prescriptions and look at your detailed coded record. The NHS App also offers a symptom checker for any minor ailments. For extra security, the app also requires an uploaded photo ID either passport or driving licence. P1 asked if username and password would change from current log in – HS advised it would not change.

P3 queried how he would get access to this, HS happy to show patient how to use if he calls into surgery with his iPad.

P1 asked if she could view her full clinical record online, HS advised this is not currently a service we offer online however she can request her detailed coded record. HS advised what would be visible in the detailed coded record, for example, operations, long term conditions, diagnoses etc. HS advised how to request online and once dealt with by the practice, an SMS would be sent informing.

3. New GP's

HS advised that as of this week, Dr Corroon and Dr Radford have joined the practice as salaried GP's. P3 asked if that meant as there are more doctors, appointment availability for on the day would increase. HS discussed Urgent Access and TWS advised that currently waiting time for a pre-bookable appointment is around 2-3 weeks depending on which GP you prefer to see.

4. Pharmacist/ Care Navigation

P3 asked how the GP's felt about pharmacist being able to diagnose and prescribe for patients. HS advised that sometimes the GP's shouldn't always be first point of call. If you have a minor ailment it is good for the patient to see a pharmacist if they can deal with the problem as the outcome is the same which allows the GP's to then see more specialist cases. TWS advised that patients can go direct to an optician for certain eye problems, which means the patient doesn't have to wait to see the GP but can go straight to a specialist.

HS went on to discuss the phone message that advises of 'Care Navigation' and that's why reception sometimes try to ask for a bit more information so they can direct patients to the most appropriate service. P3 advised that sometimes when he rings, the message is very quiet, HS is aware of this and has already contacted the telephone provider but they can't see a reason why. HS asked patients to let her know if it happens to them so she can track the call and inform First Call.

P1 also advised the telephone message is by Dr Costen, this needs updating – **HS to action/ MS to discuss at Partners meeting.**

5. Travel Vaccination Form

P4 asked if the travel vaccination form could be added to the website - **HS to action.**

6. Waiting area

P1 enquired whether the practice was in a position to purchase new chairs for the waiting area. HS explained this is self-funded by the Partners and due to new flooring this is not an option at the moment. Patients did not realise furnishings were funded by the practice; they thought such items were funded by NHSE.

Next meeting: TBC