

NOTES FROM PRG MEETING 25TH FEBRUARY 2013

Present: Dr A Godwin
Dr L Coleman
Dr J Fox
Mrs G Heppell (Practice Manager)
Mrs K Scott
Mrs D Hogbin
Mrs M Long
14 Members of the PRG

A second annual PRG meeting was held on the evening of Monday 25th February, the purpose of which was to report back to our Group on the 2011/12 Action Plan, to discuss our latest Patient Survey and to agree an Action Plan for 2012/13.

A presentation was given outlining the progress we had achieved in relation to the 2011/12 Action plan and a summary of the findings of this year's patient survey.

A general question and answer session then followed.

Telephones

This was acknowledged as the biggest area of concern for both patients and staff. Gill reiterated again that when we change our telephone system, her vision was that everyone (excluding GPs and Nurses) would be answering the telephone at 8.30 for approximately 20 minutes so that initial telephone calls would all be answered quickly.

It was therefore agreed that the main priority is to install a new telephone system and sort the Text Messaging Cancellation facility (outstanding from 2011/12).

It was requested that this new telephone system have the facility to have a separate telephone number to ring to cancel appointments. This would be taken into account when implementing the new system.

Telephone Consultations

It was also agreed to look into the possibility of planned "telephone consultation appointments" - which is one area which we deviated from the National Benchmark.

Concerns were raised by the Group relating to these "telephone consultations" i.e. confidentiality (how we could verify the identity of the caller), how consultations will be recorded, and whether these telephone conversations need to be taped.

Drs Godwin, Coleman and Fox confirmed that the medical records would be written up in exactly the same way as the "face to face" consultations. It was not felt that these conversations need to be taped, but it was felt that care would be needed to double check that they were speaking to the actual patient.

The idea of these "telephone consultation appointments" would be as a follow up for a patient who has had a "face to face" appointment with a GP and perhaps told to try a new medication etc. The GP could arrange with the patient at that initial appointment a mutually convenient time to telephone the patient to see if the new medication had worked - thus saving the patient coming back to be seen for a "face to face" consultation.

It was agreed that it would be difficult to measure the success or failure of this new service. It was suggested that a patient questionnaire could be handed out to the patient to gain feed back after each consultation.

Dr Godwin, Dr Coleman and Dr Fox agreed to discuss this with their Partners and that they would trial the process that is agreed upon.

Parking

It was brought to our attention that there were overgrown brambles in the disabled parking and cycle rack areas. This would be addressed.

It was also pointed out that one of our Group Members had seen patients parking in the Health Centre and then going into town. This is always a problem, but without the resources to have a parking attendant this was difficult to address. The Health Centre had trialled the issuing of parking fine tickets, organised by an external company, but this had not proved to be successful.

Gill acknowledged that there was a problem at times with parking and agreed to look into the possibility of staff parking elsewhere i.e. the Methodist Church/Social Club/Parish Church.

Same Day Illness Clinic

It was agreed that this was liked and well received by the patients. Hopefully this service would continue but Gill outlined that the cost was £75,000 which is being funded by the Partners of St. Thomas Medical Group.

Prescriptions

One of our Group members asked whether prescriptions could be available sooner than 48 hours.

Again Gill explained the reasons for the time scale and also explained that if a prescription was needed sooner than 48 hours we would always accommodate these requests. Please either ask one of the Reception Staff or the GP Secretary if this is the case.

Health Watch - Devon

The Community Council for Devon have been asked to create a new Government Health Watchdog for Devon, to be called Healthwatch Devon. Gill had received a request for a representative of our PPG to attend a meeting re its introduction on 19th March. Two members of our Group expressed an interest in attending.

Devon Commissioning Group

Gill explained that Primary Care Trusts would be disbanded on 31 March and Commissioning Groups set up. These Commissioning Groups will buy services on behalf of their local populations, e.g. community services, hospital services etc. Exeter will be part of the North, East and West Devon Group. Exeter Community Council comprises GPs, nurses and Managers from providers of health services in Exeter and they have recently advertised for two lay members to join the council. If anyone is interested in this post they should contact Gill for details, or look on the NHS Jobs website, where the post is advertised. As the population of the new Commissioning Group would be mainly rural, it is important that representatives from the City make their voices heard.

New GP Contract

A new GP Contract is to be imposed on all GPs from 1 April and there is great uncertainty as to the implications for GPs, their staff and their patients. The contracts set higher standards to be achieved in chronic disease management and extra services to be provided, without any extra resources. Practices will struggle to achieve the higher targets and provide the extra services without their being implications for the services

they already provide. The Partners of St Thomas Medical Group have written to the Secretary of State outlining their concerns. Gill warned of hard times ahead!

Any Other Matters

Gill asked whether any Members of our Group would be happy to set up a more formalised Patient Participation Group, which meets independently of the Practice, reporting back to the Partners any concerns and suggestions. The Practice would be happy to help with the setting up of the group and to provide a venue for meetings etc.

It was generally felt that it would be better to meet as we currently do for the time being and a more independent Group to be formed in say 2 or 3 years time when the Group is more established.

Next Meeting

This would be held once the new telephone system had been installed. To be advised.