

Minutes: Of Wychbury Patients' Participation Group Meeting

Held at Wychbury Medical Centre,
on 30th June 2014 at 6.45pm

1. **West Midland Fire Service** – Failed to attend the meeting, no apologise given.

2. **Welcome and Apologies**

Members Present: Harry Bloomer (Chair), Bill Beardow (Vice-Chair/Sec.), Margaret Heath (Treasurer), Selvaranam Arulselvan, Dr Steven Coates, Jill Guest, Lisa Groves, Joy McCormick, Sarah Read, Vicky Rose.

Apologies: Pauline Christie, Bryan Gould, Chris Penn, and Dennis Rose.

3. **Approval of previous minutes:** The minutes were approved.

4. **Bank – update:** No changes reports since last meeting.

5. **Communications:**

a) **Suggestion Boxes:** Two complaints were receive in the suggestion boxes. The first at Cradley Road related to a member of staff and has been passed to the practice manager for investigation.

The second at Wychbury related to parking for disabled. (see also section 8). It would appear that CP has miss understood the problem at Wychbury, when this was last investigated, it was staff from the Lloyds Pharmacy who were parking in patient's disabled bays.

It was agreed PPG members visit to check the situation.

b) **Wychbury Website:** Agenda and minutes for PPG meetings added.

c) **Virtual Patient Group Communications:** The agenda, minutes and healthcare event details were sent to the members.

6. **Practice Activities:**

SC was advised the proposed location for additional parking at Wychbury was a "Site of Special Scientific Interest" and as such was a no go area for development. HB commented that if it is a site of Site of Special Scientific Interest no one appears to know about it. VR comments that the area is an ancient burial ground, HB replied that Wychbury Hill is, but query the proposed site. HB to check at the Dudley Archives on the 10th of July and with the local history group.

SR reported that the practice is working on the Productive General Practice program. The practice had a review day in January 2014 and from this they need to have patient participation to develop the program further. This will be divided into prescriptions, sickness and absence; home visits; advanced nurse practitioner and triage; front of house

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reception (starting with telephones). In addition there will be a fortnightly project meeting to monitor the program. The next project meeting will be on Wednesday the 9th of June at 10:00am. We need a member and a deputy for each meeting, to ensure continuity, with only one attending each meeting. HB, JM and BB agreed to support the project on behalf of the PPG. HB to attend the first project meeting. Currently the project will run until November. HB to approach DR to check if he would like to become involved in the project (Done). The second part of the patient survey will be completed shortly and this can then be used as input to the project. VR to send the completed survey forms to Chapel House and advise BB when they can be collected for analysis. HB asked if the practice had considered canvassing patients to try and find someone for each of the groups who might have experience. Due to time restraints the practice had rejected this approach.

- 7. Prescriptions:** To remain on agenda as a reminder. MH asked how information that is normally attached to the prescription for regarding reviews, test results and other requests to patients, should get to the patient when the prescriptions are collected from the surgery by the pharmacy. Currently when this occurs the patient does not receive the additional information from the practice as they never see the prescriptions. The practice will contact the local pharmacies to ensure additional information is passed to the patient.

Update: How this type of information will be passed to the patient with the new electronic prescription system is unresolved.

- 8. Parking at Wychbury:** - See item 6, regarding the provision of additional parking at Wychbury.

Another matter still remaining outstanding at Cradley Road is the public seating next to the surgery on Cradley Road. These were removed due to damage and have not been replaced. MH to chase Sandwell MBC to get them replaced. The fencing around the Cradley Road surgery requires repair.

- 9. Self Care For Life – Be Healthy This Winter: 18th - 24th November:**
HB reported the both Dudley CCG and Dudley MBC had failed to respond to his approaches regarding Self Care Week. Our main area should be with the Wychbury doctors and health care staff training to encourage self care with the patients and the patient group making self care leaflets available to patients. The Self Care Forum will shortly be issuing an Information Pack and when received we can plan in more detail how we will promote self care at the Wychbury Group and at the local pharmacies.
BB reported that he had suggested Dudley CCG make free medication available for minor winter ailments, for example; paracetamol. It would

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encourage patients to use the pharmacies rather than the doctors for minor ailments. The CCG previously stated this approach was unsuccessfully trailed and had been abused by the patients. HB will approach the CCG again via the POPs Group to promote the idea as part of Self Care Week 2014. SC stated that something similar had been tried in Dudley, but he did not know if it had been successful. BB said that Taz at Modi Pharmacy was going to try and get us some information regarding the scheme in Walsall.

Action: HB/BB to raise free medication at POP group. BB to get information regarding scheme in Walsall.

- 10. Health Care Event 17th May 2014 - Dementia:** HB reported that Chris Rowley who was a speaker at the event, has informed him that she is leaving Dudley MBC for a position elsewhere. MH commented that the event was not as well attended as our previous events and thought that this could be due to a stigma with the topic. Other members thought that it might have been due to lack of parking at the venue, but HB replied that there are 5 car parks in the surrounding area. It was agreed that the topic might have had a negative effect on attendances, but that all who had attended had found the event useful. The event had been advertised locally and throughout the rest of Dudley and still did not attract the expected numbers. MH asked if with such a low attendance was the event worthwhile. Based on the comments from those who attended HB thought it had been. Another aspect of that was a major disappointment to HB/BB was the number of people who attended the event from the other PPGs in Dudley as we had personally invited all the members of the POP group to attend, only one attended. HB/BB had also personally visited the Crestfield practice to invite them to attend and left posters to advertise the event, no one attended. It was suggested that at any further events we need to include some testing to attract patient to attend.

- 11. Urgent Care in Dudley:** BB advised the group the CCG had decided to close the current walk-in centre and replace it with an urgent care facility at Russells Hall Hospital. The latest information released by the CCG states that in excess of 160,000 will be treated at the new facility, in numbers this means they will be treating more patient than are currently treated by the A&E department and the Walk-in centre (in excess of half the patients in Dudley). BB has asked Julie Jasper, the CCG board member for patient engagement, how the new centre will treat this number and where they are going to come from? HB stated that elsewhere where this has been introduced, providing the department is staffed by good GPs it has been successful. The introduction of this approach at Russells Hall is complicated by the lack of available parking and parking costs. There is lots of available space for additional parking, but no plans are in hand to develop this. For patients the major problem

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to date has been that the CCG has not consulted with patient, but have presented us with their preferred solution and asked for our approval of this. Another major concern is how will the CCG recruit GPs to work in the new department, when Wychbury have been unable to find a suitable candidate to replace a retired GP.

12. **Dudley Patient Opportunity Panel (POP):** Dudley CCG have just reached an agreement with Dudley CVS to manage a fund for patients groups. At a recent meeting attended by HB/BB they were told some PPGs in Dudley do not want a formal structure or to hold funds, hence Dudley CVS's involvements in the funding of the groups. Our proposal is that each PPG should get an annual allocation of funds based on the number of patients at the practice, this was agreed with the representative from Worcester Street at the meeting held at their new premises. Total value of the fund is £50,000 over two years, part of the fund could be split between the group, with part of it held in reserve for grants for special event or PPG start up. HB and BB had requested that the outcome of the locality meetings regarding the fund should be brought to the POPs meeting for them to decide on the structure of the funding scheme, but no commitment was made regarding this by the CCG representatives at the meeting we attended, this was supported by the Worcester Street representatives.
13. **Black Country Neurological Alliance:** BG was unable to attend the meeting due to other commitments, so this item will be carried over to the next meeting.
14. **Russells Hall Hospital - PPG:** - DR did not attend the meeting, but had reported previously that it is now more than twelve months since last meeting.
15. **Any other business:**
 - a) **Booking appointments on-line** – HB explained the idea of the patients group providing training at the practice for patients who wish to use the on-line appointment service. We would visit each of the surgeries and provide training on using the on-line booking service. JM offered to prepare a help card for patients to use at home and this was agreed by the group. The practice would need to make available to us a computer with an internet connection at each surgery for us to demonstrate the system. To get the program started HB is to join the scheme and BB will then provide him with assistance to use the service and monitor the time this takes. It would also be of assistance if the practice could provide us with a dummy account for training purposes. The training will be advertised in the surgeries and patients wishing to use the service would be asked to register and be given a time and date for the training. The overall objective being to reduce

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the load on the telephone service. HB stressed the need to also provide training at a late evening surgery to ensure that the people who work during the day have an opportunity to learn how to use the service. From sometime in August the service will replace the current on-line prescription service and become the means for ordering on-line prescriptions, in addition to providing the on-line appointment service. JM explained that she only discovered the planned change by using the existing on-line repeat prescription service.

Actions: HB to register for the service. JM to prepare help card. BB to assist HB in using the service and setting up training programme. SR to provide dummy account and make available computer and internet access at the surgeries.

- b) **Telephone Services:** LG explained that the practice is now monitoring the telephone usage at the practice to be able to assess that the changes they are making do actually improve the service. One area already identified is that when a patient calls the appointment number, but wants to speak to general enquiries, in the past they would have transfer the call internally, but this could then lead to an appointment line being blocked if the person taking the general enquires could not take the call immediately. Patient are therefore now been requested to re-dial using the correct number, this has improved the service to patients as the practice is now able to answer 98.9% of calls within two rings. LG will continue monitoring the service to see if other improvements can be made. The practice also intends to ask for consent to allow the practice to contact them by text and email to allow the practice to pass on information to them regarding tests, test result and appointments. HB suggested that this should be done as part of a new patient registration as well as a request to existing patients. HB offered to distribute posters informing patients of the two telephone numbers to the local libraries and the pharmacies. LG also pointed out that the practice now have business cards available that also give this information.
- c) **Practice News Letter:** BB asked if this was now available on the website for download, SR replied that currently she was using some of the March newsletters content on the site, but not the complete newsletter as a pdf, like had previously been requested.
- d) **Patient Over 75 Designated Doctor:** MH asked if the practice as now designating a specific doctor to patients over 75. SC replied that letter were currently being prepared and sent to the patient over 75 informing them who their designated doctor is.
- e) **Other Items:** LG advised the group that Helen Marsh had been voted joint "Practice Nurse Of The Year".

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Date of Next Meeting: The next meeting will be held at the 4th August 2014 at Chapel House Lane Surgery starting at 6:45pm.

Meeting closed.

Certified to be a true record of business conducted on the 30th June 2014 at Cradley Road Surgery.

Signed: (Chairman)

Acronyms:

- CCG - Clinical Commissioning Group (Dudley)
- CQC - Care Quality Commission
- DGH - District General Hospital
- POP - Patient Opportunities Panel
- PPG - Patient Participation Group