**PRG Meeting Notes – Tuesday 2nd July 2019**

**Present**

Rianne Norton Minutes

Angela Marwood Practice Manager (Chairperson)

Kate Lamb Assistant Practice Manager

Gail Alexander Patient Representative

Sabrina Alexander Patient Representative

Janet Neville Patient Representative

**Action Points from Previous Minutes**

There was only one action point from the previous meeting (see below):

**Action Point**

Angela will take the letter back to the Administration Team and look at having the template letter re-worded.

Angela explained that she did briefly discuss this with Claire Leeson, our Administration Team Leader. The letter is explaining a process, so whilst the process will remain the same, it was noted that we could look at amending the wording of the letter.

**Action Point**

Angela will discuss again with Claire Leeson with the intention of re-wording the template letter.

**Comments and Compliments**

Hemsworth (May 2019)

*Dr Ahmed* *Dr Ahmed received a large basket of fruit and thank you card from a grateful patient.*

Hemsworth (May 2019)

*Patient called to say how brilliant Helen is, she has helped her a lot since the passing of her mother. She says Helen is fantastic and has helped her a lot through such a difficult time and that she has a lot of trust for her.*

Kinsley (July 2019)

*A receptionist (not sure who has dealt with this lady) to say a huge thank you. They have said when they come to Kinsley the receptionist who dealt with them was very helpful and advised them to go to urgent treatment centre as we had no free appointments left to book. They took the advice given went to UTC and were sorted with whatever treatment she needed. They wanted to pass their regards on and say a huge thanks to whoever it was who dealt with the. They think it’s a great service that when we don’t have apps to offer we can navigate them elsewhere.*

Angela commented that it was nice to receive this feedback from a patient who had been referred to the UTC, as often patients feel that they are being “fobbed off” when they are advised to attend by our reception team.

PPG Linking and Mental Health Open Day

This is being held on 4th July 2019 at College Lane surgery in Ackworth. All PRG members are welcome to attend.

Did Not Attend (DNA) – Draft Procedure

Kate has put together a new procedure to look at how we manage persistent DNAs within the practice.

We are looking at sending out a letter to patients if they DNA 2 x appointments within a 12 month period. This letter will advise patients that no further action will be taken at that time, but that should they DNA for a third time within the same 12 month period, then this will be seen as a breakdown in the patient/GP relationship and they may be removed from the practice and asked to register elsewhere.

The letter will also include the costs involved in failing to attend an appointment at the practice, as well as the total annual cost to the NHS of patients failing to attend their appointments. Patients will also be reminded of the many different ways in which they can cancel appointments with the practice.

If the patient DNA’s on 3 x occasions with in a 12 month period then a final letter will be sent to them stating that they will be removed from the practice list and asked to register at an alternative GP practice.

The patient will be given a 4-week period in which to contact the Practice Manager in writing in order to explain any extenuating circumstances which has prevented them from cancelling their appointments. A GP Partner will have the final say in authorising a patient’s removal from the list to ensure clinical safety.

Angela explained that they took the procedure to the Partner’s Meeting on 02.07.19 but unfortunately there was no time to discuss it. Instead it will be addressed at the next Partner’s Meeting.

However, in the meantime it was asked if PRG members could take the procedure away with them to look at, and then any feedback can be provided at the next meeting.

One PRG member said it was felt that 12 months is too long a period and after discussion it was agreed that the period will be DNA’s over a 6 month period.

**Action Point**

PRG members will look at the draft procedure and provide feedback at the next PRG Meeting.

**Action Point**

Angela will take the procedure to the next Partner’s Meeting.

**Serving or ex-serving forces patients – coding**

Kate explained that she had been discussing this matter with the local councillor – Sandra Pickin - who does a lot of work with veterans.

Sandra is asking if GP surgeries can add a question and then read code patients who are forces or ex-forces personnel. This is so that we can be aware of patients who may need extra help and/or support.

Kate explained that it shouldn’t be too difficult to add this question in to the new patient packs and then add this information to a patient’s record.

A member of the group also suggested that we put a poster up behind reception asking patients to inform their GP if they are ex-service personnel.

Kate explained that we may also carry out a ‘contact update’ in the future in order to ensure that we code as many patients as possible.

Kate also added that there is an event being held in Pontefract Park on Saturday 6th July 2019 to celebrate National Armed Forces Day.

**CCG Annual General Meeting**

Kate was notified of this meeting by Sandra Pickin – unfortunately it has not been widely advertised by the CCG. It is being held at Hemsworth Community Centre on Bullenshaw Road on Tuesday 9th July 2019. Members of the public are very welcome to attend.

Anyone wishing to attend the meeting should arrive at 5.30pm ready for a 6pm start. Patients may submit questions directly to the CCG but this must be done before the start of the meeting. If you would like to submit a question to the executive team in advance, or would like to find out more about the Annual General Meeting, please contact the Communications Team on 01924 317684.

**Practice Update**

Revised Opening Hours

Angela explained that the practice is currently considering a proposal to shut the Kinsley and Greenview branch surgeries for one afternoon per week.

As a practice we are contracted to open our main site (Hemsworth) during the core hours of 8am to 6.30pm. We added extended hours clinics outside of these core hours.

Historically Kinsley used to shut on a Thursday afternoon which was acceptable as the main site was still open.

When the surgery merged with Greenview Medical Centre in Upton, Greenview used to close for one hour every day over lunchtime.

Now all three sites open from 8am to 6.30pm as well as extended hours on some days from 7.30am to 8am and/or then 6.30pm to 8pm. This is a lot of hours to cover – especially for our reception team.

Angela wanted to make it clear that this is NOT about saving money. It is about consolidating our working practices. The proposal is to shut both branch sites – Kinsley and Greenview Medical Centres for one afternoon per week. Kinsley would close every Tuesday from 12pm to 6pm and Greenview would close every Thursday from 12pm to 6pm. Both sites would re-open at 6.30pm until 8pm for the extended sessions.

By doing this we can arrange for members of staff to cover at other sites. At the moment the only time that members of staff have off together is TARGET afternoon – this is one Wednesday per month for ten months of the year.

We have submitted the draft proposal to the CCG as we have to ask their permission to close the sites. The proposal will then go to the next probity meeting in July 2019 whereby the proposal will be discussed by stakeholders.

This proposal will not mean a reduction in the hours worked by our reception team, but instead we can consolidate the hours that they work across the three sites. Members of staff can get to the main site more often for training/mentoring and to raise any issues with their Team Leader and/or the Practice Management Team.

We want to engage the PRG members in this proposal and to encourage feedback.

Sometimes we do struggle to cover the hours on reception especially as we currently have two members of our reception team on long term sick leave and so we are 42 hours down per week. We also have to take into account short-term sick leave and annual leave.

We have been consulting with the CCG and want to engage with patients. We may also conduct some patient surveys for those patients who primarily use the Kinsley and Greenview surgeries.

Overall the PRG members were receptive to this change with one member of the group commenting that it will only affect patients who are unable to travel to other sites.

Some practices have permanently closed their branch sites – this is NOT what we are proposing.

A member of the group asked about the loss of GP appointments while the branch sites are closed.

Angela explained that there will be NO loss of GP appointments/clinics. There will be no loss of clinical time at all.

GPs that usually run clinics at the branch sites during the proposed closed afternoons will move to another site. GPs do have preferences for which site they carry out their clinics, but they will all hold clinics at Hemsworth at some point during the week.

This also applies to nursing staff and healthcare assistants. The same clinical services will be available but just held at different sites for those two afternoons each week.

With regards to the extended hours we have signed up to provide; the guidelines state that we must allocate 30 minutes of extended hours for every 1000 patients we have on our practice register. We have approximately 15000 patients and therefore we are contracted to provide 7.5 extra clinical hours per week.

A question was asked as to why the telephone lines close at 6pm but the surgery remains open until at least 6.30pm.

Angela explained that all telephone calls are diverted to GP Care Wakefield from 6pm until 8pm. After that time calls will be diverted to the Out of Hours service.

GP Care Wakefield do have routine nurse-led clinics during the day for bloods, dressings etc.

After 5pm the practice can book patients in directly with GP Care Wakefield who will triage the patient over the phone and then offer an appointment as required.

A discussion was also had around the days/times of the PRG meetings and whether we might look to consider alternative days and/or times in order to encourage more patients to attend.

**Next Meeting**

To be arranged.