## **Bankfield Surgery**

## Patient Reference Group Meeting Minutes

Wednesday 13<sup>th</sup> September 2017

**Attendees**: Dr Mattocks, Claire Baggley (Business Manager), Sarah Beeden (Practice Nurse), Rachel Knights (Secretary), Avril Blagbrough & Sharon Fenton (Receptionists), undisclosed patients x 10.

#### 1. Welcome and Introductions

Claire (BM) welcomed the group and passed round an attendance sheet for signatures. Everyone introduced themselves and stated their roles.

### 2. Apologies:

These were received from three undisclosed patients.

### 3. Minutes of last meeting:

Claire asked if anyone had read the last minutes which were on the website and if they were a true record. Proposed by ES and seconded by HP.

4. Terms of reference: Still valid and on the website.

#### 5. Roles:

The role Chairman and Vice Chairman would continue as previously. A new secretary was appointed.

## 6. Update on Practice:

BM asked if one of the Practice Champions (PC) could inform the meeting of their role as some of the Patient Reference Group (PRG) were unaware of the role they play. PC HP stated that they had a strong team of PC but would be happy to have more. One of the PC's runs a walking group which is very successful and it is still ongoing (moving to the Wednesday @2pm on the 20<sup>th</sup> Sept). They also look as social aspects. There is also a craft group available which deals with everything, ie knitting, sewing, crocheting. One of the PC's can run a Stress Management course which the practice has benefitted from this training previously. One of the PC's has an interest in Dementia and has techniques to aid memory loss for both carers and patients. One of the PC's, is the champion for babies and young mothers. Another PC is hoping to start a Diabetes support group. There is also interest to support lonely and depressed patients. Basically, the Practice Champions look at what can be done to help people in the Elland and local area.

BM mentioned that the Government encourage practices to be as large as 30,000 patients. This could mean some practice in the Calderdale area joining as one large practice. Bankfield have approximately 8,000 patients. There have been a number of practices in Calderdale so far that have expressed an interest. A discussion ensued as to 'what does it mean, how would it look, what would it involve'. Dr Mattocks said that she had been involved in this in the Bradford Area and this meant the sharing of admin and other resources, such as GPs. Some felt that this would mean having to travel to other surgeries for appointments if none were available at Bankfield and this could cause problems with travel for the patient. However, as it was still in the very early stages, it would be discussed at a later date. It was agreed that it would need patient groups to discuss this. One of the PC's, asked what the difference was between a drop in centre and the surgery? It was explained that

a drop in centre was for acute problems whilst a patient was in that area, the surgery would deal with both acute and onward treatment/referrals.

BM informed the group that as from October the surgery would be open both via the front door and on the telephone untill 6.30 pm Monday to Friday. That means that the surgery is open Monday to Friday from 8am until 6.30 pm.

In the previous minutes the BM explained that the practice were keen to develop other professionals. Dr Durkin is keen to support Registrars who are qualified doctors but just need to gain experience in General Practice under direction of the trainer. Registrars are able to hold surgeries and therefore increase the number of GPs appointments that are available for patients. The Practice continues to develop 3<sup>rd</sup> year medical students and student nurses as well along with other non-clinical staff development.

#### 7. Patient feedback:

One of the PC's wondered whether it would help the doctors if patients self-referred to the Spire for their initial consultation. Dr Mattocks felt it would be very expensive as well as not really being practical. There were concerns that patients may not get some procedures, such as X-rays without a GP referral.

Discussion took place about the ten minutes time slot allotted to patients. BM asked whether a crib sheet would help patients to discuss their problems in the time, but some PC's felt patients would not participate.

It was felt that the Monday morning was a difficult time to get through on the phone and it was pointed out by receptionist that they could book on line. It was felt that not all patients are keen to use computers and one member said she had tried three time to log in. The receptionist pointed out that they were available to help, just phone.

One of the PRG members said that sometimes in the newspapers it said things about different medications which he would like to see clarified, but not to take up a doctor's time answering queries. Dr Mattocks said that Bankfield has a pharmacist working at the surgery each morning and they could look at whether she would be able to answer some of these queries. Obviously, the Pharmacist would need more time, also local Pharmacies could perhaps help with these queries. Opticians could help with eye problems and Podiatrists could help with foot and ankle problems, as they specialise in these areas.

One of the PRG members asked at the last meeting if the Practice was going to stock hearing aid batteries. These are available at the hospital, with a long wait, Brighouse surgeries and Todmorden surgeries but without transport were difficult to get to. BM said they would look into it. One of the PC mentioned that Allen House Surgery in Sowerby Bridge dealt with batteries and minor repairs. However, this again, is difficult without own transport.

One of the PRG members said that she was in the surgery the other day when a lady mentioned that she did not want to use the computer to sign in. Reception said they were always available to help. However, sometimes, the surgery is busy. BM said that the PC's had initially spent time helping people and perhaps they could assist again if available. Monday mornings seem to be the busiest period.

Reception felt that Wednesday morning baby group were not always signing in. BM said she would talk to one of the PC's who was here over the baby clinic session to see how they could make sure that this happens.

BM said wi-fi should be available in the practice from December.

One of the PC's suggested topics for discussion as she could not attend. These were the ten minute appointment slots and access, particularly on Monday morning. It was felt by most that this surgery is better than many in the area but a discussion took place. BM pointed out that the review of the services had been carried out at the results were circulated and were on line, which bore out that this surgery is about average in most areas however access is something that the practice are currently looking at improving.

BM advised the group that our new receptionist/secretary will be talking to the patients to complete the friends and family questionnaires to get the patients experience in attending the surgery and the information will be passed back.

8. **A.O.B.:** Nothing was raised.

# 9. Date of next meeting:

The BM asked the meeting whether they felt twice a year was enough to hold these meetings. It was agreed that in future they would be held every four months (three times a year). The months would probably be February, June and October and the surgery would try to hold the meetings in the afternoons during February and October.

The BM thanked everyone for their attendance and participation at the meeting. The meeting was then closed.