

Minutes of Bramingham PPG Meeting – Tuesday 22nd November 2016

1. **Present** -: Eddie Bermingham [EB], [chair], Ann Beard [ABe], Joyce Greener [JG], Angela Banks [Aba], John Wright [JW], John Hendle [JoH], Janet Hendle [JaH], John Breen [JB], Bharti Patel [BP], Nick Wrapson [NW], [practice Manager], John Godleman [JG], [area manager]
2. **Apologies** -: Caroline Dawson, Elaine Crimp, Paul Aylott, Keith Halliwell

3. Clinical Staff -: Doctors 1f/t, 2 p/t

- Current situation under the practice contract – for every 1,000 patients 75 GP or nurse practice appointments per week. [3/4 GP ¼ nurse] plus 30 appointments practice nurse [1/4 HCA, 3/4 nurse]. This fulfils the current contract of the Practice Group. Although still advertising for patients the current number of was not available.
- JG – To improve situation in the practice noticed doctors doing too much admin. Admin staff to take a lot of admin away from doctors thus freeing doctors to focus on their roles. There would be a transition process with initial training 08/12
- EB – With Doctor Simpson having left, how are the targets met with the current doctor situation with 2 of the 3 doctors not working on a full time basis.
- JG In the past practice had too many clinical staff offering too many appointments. Freeing doctors of admin would free them up to see patients. Michelle, nurse practitioner can take ‘minor’ illness appointments. Target was for patients who phoned up to be seen within 48 hours unless emergency.

4. Website -: Currently not fit for purpose

- NW – Nick Taylor group practice man to review website and go through with NW.
- JG – Website needed to be built from scratch. Time scale feedback from NW

- **Broughton Gate** in Milton Keynes was held up as a model website from the Practice Group.

5.Merger – :Phoenix and Practice Group

- EB – Asked about visits from the Practice Group and checked on personnel currently in situ.
- Established communication process [1] NW, [2] JG.
- Ambreen had now been appointed the new assistant manager at the practice

6.Medications –: BP fed back on current medication problems based on her experience in dealing with practice prescriptions.

- Medication ordered/expected/needed not prescribed due to reviews
- Emergency supplies had to be given until review
- If patients need medication difficulty getting appointment with doctor for review/medicine
- Lack of contact from practice to collect prescriptions for those unable to collect themselves.
- NW Extra time for admin to go through prescriptions and medication reviews. Down from 850 to 300. Emphasised it had to be the doctors decision alone re medication.
- Concern at having a 5 day wait for prescriptions. Should be 2 working days. BH confirmed this concern in that in some cases waiting was over a week . Should be 2 days.
- BP – The electronic service for prescriptions. Doctors not following processes and thus prescriptions were sitting at doctors instead of being clicked through to pharmacy.
- BP Medication not prescribed to any patient then the surgery should notify patient e.g. if repeats stopped. This has caused many problems.
- JG – Prescriptions need to be a priority.
- JG – Create a link with Ambreen re prescription issues
- NW – Practice has enough admin staff but they now need enhanced training to take admin off doctors. Each staff member to be given an area of responsibility.
- JG – The Practice Group had tried and tested procedures so improvements should be seen within 2 weeks of the training day

7.Appointments -:

- EB – Great concern re fortnightly view online to book appointments [only 2 patient appointments over a 2 week period]. This experienced by other PPG members and in one case only 1 appointment available.
- NW – On his system 4/5 per day. With this discrepancy offered to sit down with members to compare computer findings.
- EB concerned that more appointments should be available by phone. Limited emergency appointments can be given on embargoed appointments from 08.00 and 12.00. However it was stressed that there should be a fairer balance between appointments made online and appointments via phone to create greater efficiency for the patients in accessing treatment. All about creating a greater balance.
- JG – Mix of such appointments a constant dilemma especially in the winter months

8.General and Actions -:

- NW is likely to be at the practice Monday and Wednesday. However check.
- JW concerned about feedback from hospital
- JG – A medical administrator will be reviewing hospital letters, scan to system and sent to doctor. Takes admin off Doctor. If all OK doctor will take no action.
- Staff needed in the right places following training and re-organisation
- Ambreen to liaise with BP re medication. A priority.
- The new website needs to be up and running for patients urgently.
- Patients to be seen within 48 hours of phoning for an appointment.
- Create a better balance between online and phone appointments.

9.Date Next Meeting –: Tuesday 7th February 2017 at 18,30

