# Oakwood Medical Centre

# Patient Participation Group Meeting Minutes

Thursday 10th January 2019 9.30am

Chairman Monty Meth called to order the regular meeting of the Oakwood Medical Centre PPG at 9.35am on 10th January 2019.

1. Roll call

The following persons were present:

Monty Meth, John Hill, Stephanie Jacobs, Tom Devine, Lynn Lambert, Martin Dunn, Marilyn Brewster, Rohinton Khajotia, Nevin Kaleli, Stacy Holding, Sian Bevan,

Apologies: Maria Mitchell, Elena Dellafora

1. Approval of minutes from last meeting

Monty read the minutes from the last meeting. The minutes were approved as read.

1. Open issues
2. Single Offer

Sian updated the group on the Single offer and confirmed that we had received regular payments for wound care, Pre-diabetes and Atrial Fibrillation. Prostate remains on hold and TB although this is up and running we have yet to find any eligible patients that fit the criteria. Monty asked that should there be any discrepancies in regards to the single offer that he be notified.

1. New business
2. Atrial Fibrillation (AF)

Tom asked what groups the surgery were targeting for AF diagnosis and it was explained that we primarily target patients over 65 who have a pre- existing condition. This then lead onto information being shared about a new pilot scheme, Alive Cor that the surgery is involved in. This is a portable ECG device designed to detect AF.

1. Appointments

Tom and Stephanie asked for this item to be added to the Agenda. Monty raised the issue of using Triage nurses to help control the need/use of emergency appointments. Sian explained that this was something that had been used in the past but the surgery found that 90% of patients being triage needed to be seen anyway so it was increasing the workload rather than reducing. This is something that the partners currently aren’t keen to take up at the minute and feel that clinician time can be better utilised elsewhere.

The PPG asked what the surgery feels would help or benefit them as a practice. The Doctors were keen to recruit an additional GP and or a clinical pharmacist. Sian explained that OMC did look into securing funding for clinical pharmacists through an NHS incentive scheme but unfortunately on this occasion did not meet the funding criteria. We are now considering how viable it would be to employ a pharmacist directly.

Appointment availability

Stephanie raised the issue of not being able to get an online appointment and the only availability over the phone was with a GP she didn’t know.

Tom and Marilyn also said that they had found it difficult to get a GP appointment. Sian recapped the appointment system and explained routine appointments are bookable up to six weeks in advance and Book On Day appointments are available every morning at 8am and again at 12 noon for the evening. Also over half of all routine 10 minute appointments were available to book online. Sian also ran through how the team tries to manage the appointment flow by releasing appointments gradually. We did review the way this worked a couple of months ago and the GP’s said that they had found the current system more workable than the previous one.

John suggested that perhaps the GP’s would benefit from a comfort break during their surgery. Sian explained that all GP’s have regular catch ups and these vary according to the needs of the clinician.

1. Appointments running late

Stephanie mentioned that receptionists are not informing patients if a doctor is running late. Sian will remind all staff of the procedure to follow when a clinician is running behind schedule.

1. Doctors

Tom asked whether the surgery now has a full complement of doctors. It was explained that we are still looking for an additional 2-3 sessions. We now have Dr Akobundu and from the beginning of January we have Dr Sohrabi who will be with us for the next year doing an additional 3 sessions.

Stephanie asked the question whether there was a limit to the amount of patients the surgery could register. As directed by NHSE we are not allowed to close our books to new patients unless there is an exceptional circumstance. Our Current list size is 7,500.

1. Family & Friend Test

We went over Decembers FFT. The FFT has showed quite positive results over the last six months and the PPG members have noticed a reduction in negative feedback. The surgery will keep working on ensuring a positive patient experience.

1. Did Not Attend Report

Sian ran through the DNA report for the last quarter. The DNA’s for this period was higher than normal but looking into the report we had significant amount of Flu clinics booked and on some of these days there was a high non-attendance rate in these clinics. Hopefully these figures will improve in the next quarter.

1. A.O.B

PPG Enfield Network Meeting Feedback

John Hill kindly attended this meeting on behalf of OMC. John talked us through the minutes of the meeting.

Also Monty suggesting nominating John Hill to the new Patients Reference Group run by the CCG . John said he would consider this but couldn’t commit at this point in time. .

Next PPG Meeting 9.30am 7th March 2019