

Ferrybridge Medical Centre
Patient Participation Group Meeting held on
Tuesday 4 July 2017 – 10.00 a.m.
Venue – Ferrybridge Community Centre

Present: *Practice Business Manager, IT Manager/Estates Manager, Administrative Assistant, 4 members*

Apologies: *Nil*

Practice's IT/Estates Manager introduced himself to the meeting

Minutes from last meeting:

The minutes of the previous meeting held on 12 January were agreed as a true record

Matters arising – Action points:

A Patient agreed at the last meeting to proof read and amend the communication screens in the reception area. Patient thought it was informative and not much needed changing. Amendments that require changing will be passed on to the receptionist to amend.

Ferrybridge Medical Centre and Elizabeth Court merger update:

The practices have now merged as a legal partnership which is known as Health Care First. The next stage of the merger is to incorporate 4 NHS contracts into 1. This will be a complicated and long drawn stage.

Personnel:

Dr McGowan returned to the practice at the end of April after leaving the surgery in December 2016.

Amelia Todd who was our Apprentice Healthcare Assistant has taken up a role as a Radiologist Assistant at St James's University Hospital.

Nicola Sandon, a receptionist from Park View Surgery has took up a temporary post as Clinical Coder

Prescription Clerks – After reviewing the process in practice with how prescriptions are deal with two receptionists have took up this new role. They will deal with all issues and queries regarding prescriptions. They are due to start this at the beginning of August. The practice will be recruiting for new receptionist to fill their previous posts.

Five Towns Health federation

The federation is a group of practices in Ferrybridge, Castleford and Normanton. The federation has employed a Clinical Pharmacist and Pharmacy Technicians. The Clinical Pharmacist will work across the federation and set up new protocols and procedures to be put in place in practice. This will be rolled out by March 2018.

Extended hours:

Practice Manager went on to explain the federation will be creating extended hours for all patients across the federation. Patients may have to travel to other sites if they need to be seen and cannot be seen at their usual branch. A discussion was had amongst the group and how they felt. They felt the Saturday morning service worked well but work could be looked at to offer more appointments early morning and early evening. Mr Johns will work on putting a proposal together. Mr Johns informed the group this is something the government requires all practices to offer.

Contact Centre:

The contact centre at Ferrybridge High Street is now up and running. The receptionists take all calls from the contact centre. GPs and Nurses also take calls in the morning from the centre. The Prescription Clerks will be based there also. The contact centre has a facility now to take calls for our other surgery Queen Street and Park View if required.

Patient Transport Service – Pilot update:

A pilot transport scheme for patients who found it hard to get to surgery but were not housebound was piloted at Ferrybridge for 3-4 months and due to the service not being utilised by patients, the practice has withdrawn from the service. Patients can still use the service but would have to be seen at Elizabeth Court Surgery as a temporary resident.

Patient Self Care Initiative:

Practice Manager spoke about a new Self Care Pilot initiative which is intended to be rolled out in the practice. Mr Hodgson attended a meeting with Mr Johns and felt this was a good idea and could help patients. The scheme is to get patients to learn about self care with health professionals about their medical conditions. The practice is looking to trial this with some of our patients who suffer with long term conditions, such as asthma, diabetes and COPD. The practice is hoping this will start in September on a 6 month trial.

AOB:

Practice Update:

Practice Manager briefly informed the group of what Lee's role in the practice is.

IT Manager went on to inform the group of the Clinical Coder's role within the practice. After reviewing the mail process within the practice two existing members of staff were trained to undertake the role of Clinical Coder's. All post from all 3 sites, Ferrybridge, Park View Surgery and Queen Street Surgery is screened at Ferrybridge. The Clinical Coder's along with Amy scan, attach, read code and action all letters. The GPs read and action any medication changes or letters the team are unsure of what needs actioning. The GPs now only need to action around 20% of all mail that comes through the practice. The other 80% of the mails is dealt with by non-clinical staff. This gives GPs more time to deal with other patient queries and helps prevent and increase in their overall workload.

Patient Online Service:

IT Manager informed the group that 24% of the practice population are registered to use on-line services. This number is a high percentage amongst Practices in the Wakefield CCG.

Patient asked what you could see on your on-line record. Lee informed the record shows any coded entries in the patient record, test results and your past medical history. You can also book routine appointments and order your repeat prescriptions.

IT Manager informed the group there is a System One app that can be downloaded to either your smartphone or I phone to use. The app and web service cannot be used outside of the UK.

After further discussion it was agreed the group would get together for further training with Lee then offer a tutorial session to patients who do not use the service.

Development:

The practice will be piloting a on-line triage system for patients with non-urgent queries. The patient fills in an on-line form which is e-mailed to the practice. This is then actioned by the practice and an e-mailed response is sent back to the patient.

Practice Manager went on to say due to the increase in our practice population, which stands at 10,749, the practice was looking at how to develop new services for patients. Mr Atkinson asked if the practice would close their practice list. Practice Manager went on to say that if the standard of service, or the practice couldn't cope with demand or didn't have enough space it might be considered, but there would be penalties to the practice. Closure of a Practice list is a rare occurrence. The Practice

would rather develop more efficient procedures and new roles to help with patient demand where possible.

Date of Next Meeting

Week Commencing 19 September, day to be arranged