

Patient Reference Group Meeting

Minutes

Meeting held on Wednesday 11th March 2015

Attendees:

Daryl Laws: Practice Manager
Pauline Anniss: Group Secretary
Dr Richard Emond GP
Teresa Edwards
Marianne O'Sullivan
Gail Anspack
Roy Mason

Apologies:

Tess Burchett
Rachel Lee
Maureen Montgomery
Norma McMurdo
Derek Cooper

Daryl welcomed everyone to the meeting.

Matters arising from previous minutes. None

CQC Inspection. Daryl said that the inspection did not take place on the 21/1/15 as the inspector was ill. There is no return date as yet, although Daryl had spoken with the Inspector on the phone and received very positive feedback on the documents which had been forwarded to the CQC in advance of the inspection and our website..

Electronic Prescribing Service. Dr Emond said that so far the service has proved to be quicker although there are a few minor teething problems. There is less room for prescriptions to get lost. Patients can still choose paper prescriptions. The system is for repeat prescriptions. It is to be noted that on the prescription slip there is an advert for new membership of the PRG.

Essex Area Team - 2014/15 Patient Participation Enhanced Service – Reporting Template

The Group discussed content of the reporting template, as follows:

It was agreed that Daryl would generate reports in respect of demographic statistics.

“Describe steps taken to ensure that the PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population” The Group agreed that efforts had been made to bring awareness to all potential members by advertising on the Surgery website, a permanent poster in the local library and pharmacy, reference to the Group on prescription counterfoils and posters displayed within the Surgery. Approaches were also made to Anglo European School to encourage young new members. The group has also liaised with the Parish Council.

“Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? e.g. a large student population, significant number of jobseekers, large numbers of nursing homes or a LGBT community?” The group agreed that the answer was ‘No’ to all categories.

“Outline the sources of feedback that were reviewed during the year” A) Suggestion Box. B) Face-to-face feedback. C) Promotional days for the blood pressure machine. D) In-house PRG Group together with their minutes on the website. These sources of feedback are reviewed bi monthly at PRG Meetings.

“Action plan priority areas and implementation” The group discussed the 2013/2014 improvement plan to which Daryl will refer in answering Priority areas 1, 2 and 3. Last year the group agreed 5 areas for improvement, however, the outcome of BBCCG’s evaluation of phlebotomy and courier services has yet to reach a conclusion.

“Progress on previous years” Daryl will go back and reflect on the last 3 years improvement plans.

Next Meeting. 1.The group will discuss ways in which we can attract carers groups and other “seldom heard” groups to become involved in the PRG. We could also discuss getting Speakers to the group. What we want to know is “what it is like to be a patient of this surgery”. The group may be able to devise a survey of carers and feed it back to the surgery, (albeit, neighbours, friends, relatives or external carers).What we want to get at is something like “Is the surgery in Ingatstone providing a reasonable service, or, if not, where/how can things be improved? (taking into account available resources).**2.** Is there a National Health Lottery sold in the village? **3.** We will also discuss 3 new improvements to the surgery.

Date of next Meetings 13 May 15 and 8 July 15.