

Manor Medical Practice – Patient Participation Group (PPG)
Minutes of meeting held 3/5/17.

Present: Rafiq (Chair); Dale (Vice-chair); Madeline; Jamshad; Ian (Minutes); Caroline (Manor Medical Practice); Dr Ali

Apologies: Jenny; Helen; Anne; Cath; Richard.

The Chair informed the meeting that Mohammed Nazir has resigned from the group. He was thanked for his input to the meetings.

Minutes of last meeting: Agreed. There were no matters arising.

Dr Ali led a very interesting discussion of the updated Practice procedures:

A Triage service is in place within Manor Medical Practice to avoid appointments booking up to the extent that patients who need to see a GP can't get to see them. Between 50 and 60% of patients do not NEED to see a GP. To date the new system is working well. The system is patient focussed. Demand for appointment is being managed and those patients who need to see a doctor can get an appointment.

Next step is to roll out Triage across the Practice. The aim is for a Top Class patient centred service which can only be achieved by managing demand and avoiding complaints.

This approach was **AGREED** by the PPG.

The Practice will identify repeat attenders in an effort to treat them in a more appropriate manner. There is a public perception that people have a "right" to see a doctor, which is correct but only if they really need to.

People are very quick to complain on the NHS Choices website but not so quick to compliment. Where there is a complaint the Practice has the right of reply and will try and contact the person making the complaint in an effort to resolve the problem.

Failed Appointments: Patients who are failing to attend appointments – even when they have made them in the first place – is an ongoing problem for the Practice. The process for attempting to resolve the difficulty is, for persistent offenders:

- A Did not Attend (DNA) letter is sent which contains the threat of removal from the Practice register;
- If problem continues a second warning letter is sent and the matter is referred to the Doctors' meeting;
- If there is still no resolution and DNAs continue the person will be removed from the Practice.

Improving Patient Experience: The Practice is constantly looking at innovative ideas and trying to work in new and effective ways. The latest idea is to use an application (app) called "**Vitrucare**". This enables patients to keep track of their blood pressure and weight by loading their data. It can also be used to monitor diabetes. The app is downloaded onto a

smartphone and will enable the patient and doctor to have a conversation via Skype. This will revolutionise patient care and Dr Ali wants to introduce it across the Practice. An email address is all that is required and accounts will be set up for PPG members, initially.

The information is put into the Vitrucare app by the patient and is integrated with patient records. These are available to every doctor in the Practice and there is no need to explain to the doctor what the problems are. They will be able to see the whole record and know what's going on. It won't matter which GP sees the patient they will have full knowledge. (If a patient requests to see a particular doctor will still be possible but the patient may have to wait some time for an appointment.)

Total patient access to their medical record is coming, despite national opposition from some doctors. Dr Ali believes passionately in free access to personal medical information – with safeguards. It is after all the patient's data not the doctor's.

Dr Ali informed the meeting that 60% of the Practice's work load was managing chronic disease. A system of differentiated clinics has been established (Blue/Red and Purple). A 10 minute consultation with a doctor is not sufficient to ensure the correct care is being given. Therefore the Practice Nurse will undertake a proper care plan for patients in the appropriate clinic.

Other business/information:

- 1. Electronic Prescriptions:** Some drugs known as opioids e.g. morphine, tramadol, fentanyl etc. cannot be sent electronically to the pharmacist as they have to be signed for. There are problems with timescales for other scripts. There are 100s of prescriptions to be signed on a daily basis by the duty doctor. The urgent ones are signed daily, others may take longer to process. The SOLUTION is that a pharmacist has been trained up by the Practice to be able to prescribe and a second one is in training. They will begin work in June and will deal with the volume of work on a daily basis.
- 2. Meeting with Pharmacists:** These will continue into the future. The positive comments made at the last meeting with the pharmacists were passed onto Dr Ali.
- 3. Asthma clinic:** This was held recently and although not as well attended as hoped for (9children only) nevertheless it was a very good and positive session.
- 4. Clinical Commissioning Forum (CCF):** There is a conference on the 10th May for the Bradford District CCF. Rashid and Dr Braun will be attending on behalf of Manor Medical Practice. The focus will be looking at the Access Plan.
- 5. Manor Medical Practice** seems to be the only GP Practice locally with an active PPG membership in excess of 12 people. Dudley Hill appears to be the next most active with 3 – 4 members and they think they are good.

- 6. Downstairs toilet at Girlington** is currently out of order. The hand drier has been removed from the wall, leaving bare wires sticking out. There is some disagreement about the cause of this. Some say it has been stolen, others that it has been moved to replace a faulty drier in another toilet. The mystery remains to be solved!

Date of Next Meeting:

Committee members were asked to note the next meeting will be held on **WEDNESDAY 19th July 2017 @ 1.00pm Girlington Road.**

Signed: Rafiq Sehgal (Chair) PPG

Date: _____

Minutes prepared by Ian Price. 17/5/17.