

Winchmore Hill Practice

Patient Participation Group

Minutes for Meeting Thursday 10th November 2016 at 6.30pm

Members Present

Betty MacLeod (BM) Chairman, Rajinder Sunner (RS), Toulla Trupia (TT) Practice Manager, Dr C Sankaran (CS), Dr R Noor (RN), Trevor Gaunt (TG), Barbara Govey (BG), Trevor Watson (TW), Cassie Zachariou (CZ), Kathryn Blair (KB), Geraldine Sweetapple (GS), Patricia Murphy (PM), Rose Vigneswaran (RV), Paul Gouldstone Clinical Commissioning Group Head of Medicines Management (PG)

1. Welcome – BM introduced herself, welcomed everyone present.
 - 1.1 Apologies for absence – BM accepted apologies informed by TT
2. Minutes of the last meeting – approved
3. Matters arising from the last meeting – TT informed us that the downstairs disabled toilets should now be fixed and in good working order.
4. Over the Counter Medication - Paul Gouldstone from the Clinical Commissioning Group (CCG) was invited to inform us on the new directive from the CCG; 'Enfield CCG does not support the prescribing of medication that is available to buy from local pharmacies or supermarkets for children or adults'. A copy of the statement attached. Letters had been sent out to GP practices in Enfield, where advice and guidance had been given on how to reduce costs of medicines. GP's had been advised that where certain items that could be obtain over the counter they should not prescribe these items but advise the patient to buy them over the counter. Both CS and RN further clarified this would include items such as moisturising creams, gels, body washes and shampoos for patients with no diagnosis, unless the skin is infected or recommended by a specialist. Various members of the PPG shared some of their experiences and what they had heard was happening in other practices or what they had understood to be the protocol. It was clear that the process of communicating the directive and informing patients and the public was not good and this had led to confusion and in some cases misinformation. PG stated that the intention had been to get leaflets and posters printed to make sure everyone was aware of the changes however they rushed into implementing the directive, which meant that there is now some confusion. Also that there does appear to be a problem with consistency. PG reassured us that the CCG are and will be doing what they can rectify this. BM thanked PG for attending our meeting and stated it was very useful.
5. Communication – RS had raised an issue that she had recently become aware of which was the length of time it took for referrals to be made. She also stated that this particular issue was some time ago so may have addressed already. TT clarified that this had been an issue when one of the secretaries had retired, this had caused a back log. However this is no longer a problem and currently referrals are made within 48 hours. TT further informed us that staff hours have been increased and they are currently a member of staff down even they are constantly advertising for admin staff. TG suggested that there is still a problem, some patients having to wait 10 minutes and reception staff need to ask for help when there is a long queue. Especially when the plasma screen is not working. TT asked if 10 minutes was an unreasonable time, some PPG members felt this was too long especially if it was difficult for them to stand or feeling particularly unwell. TT agreed that staff should ask for help however to manage the reception desk and know when and how they can leave it to ask for help takes some experience and not all staff are able to do this just yet. K stated that the layout of the downstairs area was not ideal.

6. Newsletter – TT apologised for being able to get newsletters out as regularly. Items suggest for the newsletter: TT - A receptionist view, an article perhaps written by one of the receptionist about what she perceived her job to be and what it is actually like. RS – suggested something about the new directive on medicines, using the surgery pod and the blood pressure machines. CZ suggested an article about DNA's, information on how many DNA's and how much they cost the surgery, and how that wasted resource could be used in other ways. Various members agreed that the DNA information should be displayed in some way for everyone to see every time they attend.
7. Developing the PPG – Webpage was discussed and further developing or adding to it. Raising funds look at ideas on how to do this. FTT need to revisit how this can best be done, some PPG members feel it is a pointless exercise and as there is no penalty in not getting a lot of surveys done we should not worry too much about it. A walking group was suggested by CS. W informed us she attended the PPG borough meeting found it informative and also that there are PPG champions per network. RS and BM to find out when the next PPG borough meeting is, TT suggested we could take it in turns to attend.
8. AOB –
 - 8.1 BG asked why it is not possible to get a later appointment. She had to call several times before she could get an appointment most suited to her, she felt embarrassed but also felt she was wasting the receptionist time. TT informed us that they do try to book appointments that most suit patients however sometimes it is not possible because they need to fill certain appointments first.
 - 8.2 TG stated that the abuse of the car park by people clearly not in the surgery still needs to be addressed. RN confirmed that this is still a problem and they are constantly trying to think of ways to conquer this problem, some suggestion have been clamping, or putting stickers on screens of a offenders.
 - 8.3 CZ asked if there was a policy about the number of questions could asked in one appointment. She gave us an account of a patient who had 3 young children and needed to ask 3 questions but told that she had to make another appointment to ask the 3rd question. RN clarified that in most cases they tried to answer as many questions as they could but sometimes time constraints meant that they may have to ask a patient to come back. Ideally they would prefer not to do this especially if there are young children involved.
 - 8.4 FW asked something about the pressure on GP's time and asked if our GP saw patients privately in our practice, RN stated that no GP's in this practice see patients privately.
 - 8.5 RV asked if there is an age restriction on how much medication can be prescribed per prescription, RN confirmed there is no age restriction but prescription the Practice only issue one month's supply to reduce cost of wasted medicines and reduce hoarding.

The meeting was closed at 8.30pm all were thanked for attending, the GP's present were especially thanked for their time.

TT will confirm the date of the next meeting.

Minutes taken by RS