

FOXHILL HEALTHY LIVING GROUP

Minutes of meeting held 4 February 2016

Present

BD
BH
BP
UG
AG
GE
JF
AH
CT

Apologies

SB
SA
MN

Care Quality Commission Report

CT explained the Medical Centre had to provide extra factual evidence before being granted a “good” rating. CT explained there were areas we had been encouraged to improve on regarding hand written prescription security and the recording of our HCA giving vaccinations. CT highlighted what a difficult process it had been particularly for CB, AR and MN who took the bulk of responsibility. The full report is available on our website or via the CQC website.

Art Group

CT explained the art group was now funded by SOAR for a 7 week project

New Nurse

AG and GE both mentioned that CB’s presence would be missed at the practice and as a group we wish her good luck in the future.

CT explained the replacement Carolyn Cousins was an experienced Practice Nurse from Dykes Hall Medical Centre and she visited the practice pre interview.

Fraud in Older Patients

CT passed on some worrying info re fraud. This involves patients being approached by people pretending to represent the GP surgery and when they visit they sell overpriced and often unneeded aids and adaptations. We are warning any patient that receives a call they doubt to ring the medical centre themselves to confirm any planned visit. Also AG mentioned other report from an email regarding attacks on drivers, with them being stopped by eggs thrown at windshields.

BP and UG both mentioned a preference service on phones which prevents (most) nuisance calls.

Sheffield University Evaluation Group

CT explained DS had forward this on to the group, however the initial meeting had already taken place and no one was interested in attending.

Bus Routes

CT shared email from SA. Group decided letter SR drafted could be forward to SA to pass to appropriate MP. UG mentioned it was terrible at first but buses seem to be improving. BH stated still lots of confusion re routes etc.

Prescription Line

CT explained that the prescription line had now closed and mostly (so far) people have accepted this change graciously. We hope the extra freed up phone line and receptionist will make life easier for patient phone access. CQC feedback from patients was that telephone access was difficult.

Alternatives are:-

- Online (password required from Reception)
- By hand
- By post
- Local pharmacist liaison
- Care organisations are able to fax

BH mentioned issues if meds need ordering several times because of differences in stock. CT explained we can usually sort this by lining up prescriptions, and doctors and nurses are happy to do this in appointments.

Medical Students

UG asked re medical students as she had seen a group in reception. CT explained the doctors are involved in their training and on a Thursday they are trained as a group at the Medical Centre, often with “guest patients” from the practice. We also have individual teaching for medical students.

Some Questions

Electronic prescribing – UG was told it would take 2 days before her script would be ready to collect and she would need to check by phone it was ready. WD also said if it is a controlled drug electronic prescribing would take 7 days. CT explained she was uncertain on these points but would discuss with MN and discuss at next meeting.

Mandy’s response:

Controlled drugs cannot be sent via electronic prescribing. Patients are told that if some of their items are not able to be processed via electronic prescribing then we cannot have a dual process in place so they are unable to have electronic prescribing.

Advice to ring to check prescription is ready to collect – this will be discussed at the next Admin worker group as this isn’t the correct process. Mandy wondered whether this was when we first went over to EPS.

Next Meeting

4th April 2016 at 3pm