

Minutes of the Healthy Living Group held 1st March 2017

Apologies: SR, BN, Present - BH, WD, UG, JF, GE, BP, CLT and MN

MINUTES FROM LAST MEETING WERE DISCUSSED AND AGREED

NEW STAFF AT FOXHILL

Anne Ashton – Computer manager is leaving and will be much missed. She is retiring – interviews for her post are scheduled.

Hina Kanabar – New salaried GP in post

COPD Video showing in Waiting Room

It was commented on that the COPD video is very informative.

Pre-diabetic groups – have started and are running in the surgery on a Friday – assessments pre and post group are also being made in the clinical rooms. The idea is to identify those at risk of developing diabetes and to do group work on diet and lifestyle to hopefully reduce the risk. **The surgery simply host this but it is run via a private company commissioned by the NHS.**

Care Planning

Mandy has made a report back to ccg on Care Planning and we as a practice have been poor at recording care planning –although all the nurses do this as part of chronic disease management and have done for years, our coding is not as good as it could be.

The process of Care planning uses a tool called PAM (Patient Activation Measure) which is a questionnaire to rate how motivated a patient is and glean information about gaps in knowledge. Then a patient with a nurse/Doctor looks at setting goals and actions to achieve this and is supported and monitored to achieve the goals. CT mentioned she had actually been on some training re the care planning a couple of weeks ago and has come back with some ideas to make the process better and more user friendly – so we can begin to record correctly. Mandy also feedback Dawns thoughts that maybe care planning appointments should (for her) be shorter and more frequent. As this would suit her patients better.

Patient Representative Groups

MN – highlighted fact that the CCG is looking for a larger group of patients – i.e. some representation from each practice– MN produced invite – no one was interested in attending and SB stated that as it was an evening group it will put some people off going in the dark.

Hub appointments

Mandy explained that we now have HUB appointments available for weekends and evenings at 4 satellite surgeries

- Palgrave (The Health Care Surgery)
- Wood House Medical Centre
- Sloane Practice
- Crookes Practice
-

These offer GP and nurse appointments.

Nurse appointments can be booked via reception for ear syringing, dressings (as long as dressings taken), bloods and asthma reviews. Doctor's appointments have to be book via a clinician.

CT highlighted how useful these appointments had been and that we need to get better at booking patients into them for our patients to get the benefit of them.

The group generally agreed this was good for working people and offered flexibility

BP asked if it is like the Out of Hours centre at NGH and Mandy explained it was totally different and these appointments are about offering flexibility for patients as part of extended our services to weekends and evenings.

New Training for Receptionists

MN mentioned that a new training idea- that is about navigating patients into the best service, is under discussion. This would hopefully provide consistency but all the practice managers feel communication about this is important so patients understand why receptionists ask certain questions. So this does mean we need to develop a culture of sharing info with receptionist. CT stated this was important anyway (if a patients felt comfortable to do this) as an appropriate time slot can be booked.

BH – mentioned the need for name badges again and the fact it is important that the receptionist ask patients in line to step back and not intrudes on a conversation – although there was a general acknowledgement that our receptionist would often enforce this privacy rule.

Transport

Bus Passes – MN brought some info re renewal of Bus passes and this would now automatically be done. If it didn't arrive 4 weeks before renewal date then patients should enquire.

BP said she had heard of a practice providing a paid mini bus CLT wondered if this was a Community Transport thing.

CLT highlighted that we can support via our work with SOAR to claim for attendance allowance in those needing to have support to attend appointments and we have details of community transport as we are aware of transport links being poor to the surgery.

Jean Fryer said she has found out that if you show the Bus Driver a letter with a hospital appointment on it and you need to get a bus earlier – they will not charge you.

Neighbourhood Working

Working with a neighbourhood – this for us means working with other local practices of Grenoside, Chapelgreen, Mill Road and Ecclesfield Group Practice.

MN highlighted the advantages of this – re sharing of protocols and this working together may allow smaller surgeries to survive – this is not a merger – just working together. More info likely to follow on this neighbourhood working!

AOB

BH wanted us to look into how transport was sorted for patients. Both MN and CLT thought it was generally the hospital dept. that sorted transport as long as it is mentioned on any referral letter.

UG – Expressed some concerns re automated messages from teaching hospital coming to her for another patient. How can she stop them? **MN to look into this**

NEXT MEETING
Wednesday 17th May at 5.00pm