**Patient Reference Group**

**Brookside Surgery**

**Minutes of the meeting held on**

**Thursday 18 May 2023 at 1.30pm**

Present : Chris (Chair), Jayne (Vice-Chair), Madeleine Clark (Practice Manager), Dr Watters and 8 further attendees.

1. Apologies: 5 apologies

2. Minutes of last meeting

These were approved and it was agreed to publish them unredacted on the

website.

3. Matters arising

…. reported that the defibrillator originally fitted failed to work and has been returned to America (Don’t Ask!) Instead, ….. helpfully supplied a spare, though an accessory pack has had to be sellotaped on the back for now. It is working. It is available outside the surgery building – the surgery has its own inside.

Online Access has been delayed until November 2023. The surgery is working to be ready when it does happen. In the meantime, patients can access their records, order prescriptions etc on the NHS App if they complete a short form which is available from reception in the surgery.

The February minutes are on the website.

4. Latest Practice News

(a) The new GP contracts provide that appointments must be offered on the first contact – which is usually by phone. This is less flexible that our present system, because it requires appointments to be provided within 2 weeks. It means that patients with a chronic condition, where there may be a need for a check-up appointment after (say) 3 or 4 weeks, must now make that further appointment after 2 weeks have elapsed.

That said, the vast majority of appointments, some 80%, are booked on the day. Text message reminders are thus less necessary and are unlikely to be introduced in the near future,

Demand and capacity is evaluated annually, taking a snapshot of a typical 2 week period.

(b) The spate of Bank Holidays (4 in less than a month), especially those on Mondays, caused serious delays in the Dispensary – not so in the medical practice. The impact on deliveries was particularly severe.

(c) It was confirmed that Dr Reeves is leaving the Partnership at the end of June. He and his family are emigrating to take up practice in New Zealand.

To compensate, Dr Tyrell will do more sessions and another local doctor will join the Practice. Overall, there will be more sessions.

There will be no financial impact on the patient side of the surgery.

Administration staffing is stable.

(d) Recruitment for the dispensary remains a headache. We are advertising for a qualified FTE dispenser at the moment.

It is a national problem. Our pay rates are better than pharmacies. There is no national rate.

Questions were asked about EPS – Electronic Prescription Service – which enables patients to order and/or take their prescriptions anywhere they choose. Why do we not use it? We are a dispensing practice and EPS is not a helpful option. Very few of our patients would benefit. And the practice would have to pay to use the system - £8,000 at the moment.

Comment was made about the apparent lack of system in the dispensary at times. Surely, it was said, the whereabouts of what was ordered should be recorded electronically – to avoid looking here, there - and sometimes - everywhere for the relevant drugs or prescription. Madeleine was going to look into this further, agreeing that sometimes it did appear less than organised.

The Practice has now stopped its dispensing service to a local Care Home – a regrettable but necessary step in getting back to a more efficient service.

Another major factor in the recent reduced service in the dispensary was the erratic supply of drugs. The Practice uses 3 wholesalers. One of them is reliable is reporting items which are out of stock – a major reason for prescriptions not being available when expected. But another does not show live stock levels – so you don’t know what is available – or when it will be. Frustrating for all.

A member asked whether parallel imports were used. Answer – if possible, no. Another member said she found someone else’s drugs in her prescription – worrying of course.

How should patients order? Preferably not over the weekend – presently 80 message were being processed each Monday. The best way was on the NHS App – not the Practice website. And at present, leave 5 days before pick up.

5. Terms of Reference for the Group

The Chair had circulated draft terms of reference which the group approved. They are appended to these minutes.

6. Any other business

One or two notices were a bit bedraggled. … said she was happy to re-type them. And if the Practice would laminate them, … said he could affix them.

The notice about offensive behaviour was discussed. The ‘softer’ version suggested did not find favour. Dr Watters confirmed that the partners were keen to protect the staff from the few patients who acted inappropriately. The notice was directed at such persons. The group agreed. There was no need to sugar the pill. The vast majority of patients would not take offence.

After a discussion, it was decided that a farewell ‘do’ to mark Dr Reeves’ departure was not appropriate. While patients would not be discouraged from sending cards/goodwill messages etc, contributions to Dr Reeves’ preferred charity would be encouraged. That charity is Myton Hospice, which operates in Leamington, Rugby and Coventry. Contribution could be made via Just Giving and Gift Aid would be available.

7. Date of next meeting

The 18 October 2023 at 1.30 pm at the surgery.