

# YORK MEDICAL PRACTICE PATIENT GROUP MEETING

Tuesday 26th September 2017

Chair: Maggie Ennis

Minute taker: Joyce Jacobs

**Present:** Penny Alexander (PA), Stephen Alexander (SA), Lauren Hoadley (LH), Sonia Jacks (SJ), Alan McMillan (AM), Glyndwr Whitworth (GW)  
ME welcomed Katie Anthony (KA) to the Committee.

- 1. Apologies:** Ken Mason, Peter Henderson, Paul Leonard, Richard Bedwell, Dr Q Parsons
- 2. Minutes of the last meeting:** 25<sup>th</sup> July 2017 agreed
- 3. Matters arising not included in the Agenda:** LH reported that DNAs seem to be a diminishing problem due to the text reminder and the ability of the patient to reply to the text which automatically cancels the appointment and frees up the slot.  
SJ said that she does not send the newsletter to the Interest Group but LH reported that she has created a database of the email addresses of patients (more than 6000 names) and will email out the September newsletter in batches. The email will also include flyers for the Stress Event and the T2 diabetics' walk organised as a result of the T2 Diabetes event. ME expressed the PG's appreciation to LH of her work on this.
- 4. Stress and Anxiety Event :** PA reported that the speakers who will each speak for ten minutes at the event are likely to be from Off the Record, Richmond Mind, St Mary's University and Richmond Wellbeing. GW has been pushing the event when she has been to St Mary's and Dr Parsons has asked colleagues to mention the event to patients. Two Registrars from the Practice will attend.
- 5. Type 2 Diabetes Walking Group Update.** ME reported that the first of these walks will take place on Friday 29<sup>th</sup> September and there are three people likely to join the group.
- 6 Carers - next event February 2018 :** Katie Anthony volunteered to organise this event as she has experience of both caring for someone and

organising such events (albeit on a larger scale). It was felt that Paul Leonard and Richard Bedwell could assist. The target audience will be the carers of young or elderly people. Speakers could be from Richmond Carers Centre or be carers themselves or both.

**Action: KA to report**

- 7 **Numbers of medical and non-medical complaints to the Practice:** LH reported that the complaints were specific to the individual patients. SJ asked if complaints via Friends and Family, NHS Choices are all counted. LH said that there are two kinds 'soft' complaints eg someone speaking to a receptionist which are recorded. 'Hard' complaints eg a letter to the Practice are also recorded. SJ suggested that the website should read 'Feedback and complaints'. LH said she would look into it. AM asked about complaints, LH said they should be acknowledged within three days, and investigated which could have different timeframes. Dr Parsons is the Complaints Officer. SA asked if there is a complaints procedure on the website and LH thinks there is.

**Action: LH looking into title recommendation**

- 8 **Access for disabled people:** ME said she is interested in understanding how the YMP deals with patients with problems in hearing, mental health, seeing or who are otherwise less able-bodied. LH said there was a hearing loop and Braille available. GW said she thought there is information on the website. Furthermore the CQC passed the Practice in this regard in its report earlier this year. SJ produced an accessibility document on communication needs. She said it was not for patients to find out this information. She said it is for the Practice to flag up such people. LH said that the 'filtered list' shows disabilities. PA suggested there should be a working group consisting of PA, ME, SJ and LH to look at this in detail.

**Action: LH to consider again the document and Working group to report**

- 9 **AOB: New building update:** LH reported that there are now two rooms out of action because of flooding. This meant that water was dripping through the asbestos in the ceiling. The NHS PS is still examining alternatives.

SA said he will draft a letter and circulate it to the PG before sending it to everyone with some influence.

**Action: SA to draft and circulate letter**

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**Patient Group Matters.**

- **NAPP Survey:** After discussion it was agreed that SA will complete the survey on behalf of the PG
- Chair for future meetings: Nothing decided
- Terms of Reference: JJ will circulate the updated TofR
- **New Membership/Core and Interest Group (IG):** SJ contacted three potential members of the IG but had no reply. In the context of the IG other practices send a questionnaire three times a year (eg on triage, texting reminders) and then issue an annual report based on the responses. This allows other patients to see the impact on the practice of the PG. There will be a Working Group to investigate this idea for the PG.  
**Action:** SJ and ME

AM, having attended the AGM of the CCG, wanted to know:

- 1 if the YMP has modified its handling of referrals. LH said that the Practice had signed up to a Locally Commissioned Service which makes sure a referral has been made to the appropriate place.
- 2 about the new training of receptionists. . LH said that the receptionists are being trained in 'Active Signposting'. They do not ever triage. 'Active Signposting' was covered in the minutes of February 2017.
- 3 if there was any YMP work practices which would affect patient accessibility. LH there was not. The patient list remains open and the GP workload is monitored by the Practice. NHS England also collects data on GP workload

KA asked about using Skype for the PG meetings which would allow other members to participate. The meeting thought it was not suitable at the moment but it could be in future.

**Next Meetings: 28<sup>th</sup> November 2017, 30<sup>th</sup> January 2018 and 27<sup>th</sup> March 2018** Chair: ME, Minute taker: JJ