

**Ashville Medical Practice Patient Reference Group Meeting Minutes**  
**25<sup>th</sup> April 2019**

Location: Ashville Medical Practice Conference Room

Attendees: Melanie Jones – Practice Manager  
Lydia – Administration  
Aimee – Administration  
Patient Reference Group Members – 9 Attendees

**1. Actions Update:**

No actions had been required from the previous meeting.

**2. New Members:**

A new member had joined the group, but was unable to attend this meeting.

**3. Practice News:**

Mel reported that the practice was extremely busy due to Bank Holidays and staff sickness. The patient numbers had increased to 11,936.

- Mel introduced Lydia and Aimee who had joined the administrative team recently, meaning that there was a full complement of staff.
- A G.P returner, Dr Anderson joined the practice on March 1<sup>st</sup> 2019, and would stay for approximately nine months. Her mentor is Dr Rainford.
- Dr. Woodward, a trainee GP will be at the practice until April 2020.
- It is hoped that a GP registrar will join the practice in August 2019.
- Mel explained how the GP contract works, stating that it is issued annually in April, and this year required changes in practice operation. It is non negotiable. For example, the new contract requires 25% of all surgery appointments to be offered on line, and new models to be set up; further discussions about this would take place within the practice.
- Mel outlined new guidelines that had been introduced for the “Practice Delivery Agreement (PDA)”, adding that Barnsley was fortunate in that the CCG has invested in general practice with the PDA.
- A decision has been made to restructure the practice administration; Ruth Nowodny will take up the role of Office Manager with effect from May 1<sup>st</sup>, and will be responsible for the staff and day to day running of the business. Mel will remain in her current role, but the new structure will free up more of her time to deal with the more strategic element of the business to ensure that the practice runs efficiently and smoothly, and meets required targets.

**4. CQC Report:**

The outcome of this was “good”. The report has now been published and is available on the practice website and the CQC website.

There will now be annual telephone reviews, and an on site inspection in five years.

**5. Terms of Reference:**

There is a requirement that this document is reviewed annually. It had been circulated and it was agreed that it should remain in its current format and content.

## **6. Patient Survey 2019:**

Mel suggested to the group that the survey should remain the same as in 2018 as this allowed for realistic comparisons to be made from year to year.

She added that NHS England recommend 75 appointments per 1000 patients per week; Ashville currently offer 99 appointments per 1000 patients per week.

The group members acknowledged how much this level of appointments was generally appreciated by patients.

## **7. Primary Care Networks:**

Mel explained that the aim of PCNs was to deliver enhanced direct local services, and it would include all GP practices. Currently payment is made per patient for services such as flu vaccinations, health checks, etc. Regular income is required to deliver proper and safe service in terms of staff, equipment and treatment for patients.

Barnsley would be divided into six localities, and there are five practices in the locality in which Ashville is situated. The aim is that patient care should not suffer anywhere in the Borough, but funding is not available for all necessary posts.

Discussion took place about potential difficulties in communication, duplication of roles and work etc.

Barnsley Health Federation has offered to set up a “super network” by coordinating the 6 localities under their umbrella. Mel explained that this seemed more sensible but discussions were ongoing.

## **8. Patient Council:**

A member of the group had attended this meeting on 27th March, where discussions and information had been shared about Patient Reference Groups in the various practices in Barnsley.

Mention had been made of the “Sound Doctor” which is an online video service that provides health education for people with long term health conditions. Each practice has a unique link enabling patients to access the website and view videos.

Mel informed the meeting that around 9,500 texts with the link had been sent to Ashville patients, and as a result 3270 website visits had been made. 16.9% of patients had made more than one visit and 2,335 films had been viewed. It is hoped that making information available in this way will help to reduce the numbers of patients presenting with acute exacerbations of their condition.

(The minutes of the Patient Council meeting have now been circulated to members for information, along with the link for “Sound Doctor”.)

## **9. Any Other Business:**

(a) A member had attended an event in Stairfoot Park, where three people had passed compliments about the appointment system at Ashville.

(b) A member asked about the level of “Did Not Attend” appointments. Mel stated that this stands at 1% of GP appointments and 8% of nurse appointments. However, the higher level reflects the fact that it is possible to make appointments with a nurse one month in advance.

(c) This led to discussion about “DNA” appointments at the hospital, where patients are immediately referred back to their GP practice if they fail to attend.

## **10. Date and Time of Next Meeting:**

**Thursday 25<sup>th</sup> July at 1.00pm** in the Conference Room at Ashville Medical Practice.