



Meeting Minutes

DATE:	Monday 9th September 2013
TIME:	6pm
LOCATION:	FMC Seminar Room
PRESENT – Staff	Dr Karen Logan – GP Partner Karen Jones – Practice Manager Karen Greenhough – Administrator
GUEST	Dr Stephen Ledger – GP Partner (6pm to 6.30pm)
PRESENT – Patients	10 patients invited to attend. 5 attended. Apologies sent by: - <i>For confidentiality reasons patient names will not be shown on the minutes</i>
Minutes taken by:	Karen Greenhough

() letters shown in brackets relate to handout pack sheets

1. Welcome

Karen J welcomed the group to our 8th Patient Reference Group (PRG) meeting.

2. Guest

Dr Stephen Ledger gave a presentation / led a discussion with the group regarding *improving rates of early diagnosis of cancer*.

- A copy of the presentation is attached to the minutes.
- A sample of cancer posters and leaflets were show to the group – which will be going out on display in the practice shortly.

An information sheet (A) was discussed and ideas from group members were added:

GC – thanked Dr Ledger for the presentation and said it was reassuring to know the practice is actively working on this (all group members agreed).

GC – asked if once a patient is diagnosed and offered treatment options could GPs get involved in decision making regarding what treatment path to follow? Dr Ledger – GPs have to be cautious as they do not have the in-depth experience of the cancer consultants. However patients can use their GP to discuss any issues they may be concerned about.

AR – our publicity materials could include that cancer can be treated successfully – diagnosis is not always fatal.

JHa – Important that we have information on display for individuals about what symptoms to look for.

JHi – The sample 2 week referral letter was very good but should we underline the *and* in ‘DO let the hospital and your GP know...’?

3. From last meeting

Meeting minutes dated 20th May 2013 (B) were approved by the group.

Karen L – will take the issue of booking double appointments for GPs & Nurses to the *next* Partners meeting for discussion (scheduled for 23rd September).

Karen J – advised that the installation of the new computer system went well – some improvements are still being made.

Notice out on display:

We upgraded the practice computer system on the 3rd July which will allow us to improve the services we are able to provide to patients in the future.

It will take 3 to 4 months for our staff to be fully up to speed with the operation of the new system.

We thank you for your patience during this time.

Karen L – confirmed that the Partners have agreed the use of social media (i.e. twitter and facebook) to communicate with patients providing it is one-way (outgoing) only. Further discussions will need to be made regarding what to use this for.

4. Update on Young Persons Project

New posters that Jack & Tina had designed were shown to the group **(C)**.

Jack and Tina were not at the meeting so discussions regarding them will be added to the agenda of the next meeting.

The group expressed thanks to them both for their efforts and thought the posters were very impressive.

5. Any other business

FMC Patient Newsletter

Autumn 2013 edition **(D)** now out on display.

Staffing

Karen J - Dr O'Hare and Dr Calvert have left the practice. We are presently looking to recruit a new GP to join our team.

Jayne Dalziel has recently qualified as a Nurse Practitioner.

Karen J – advised that a team from the practice (28 including staff, family & friends) are taking part in the Cancer Research UK Race for Life – Leeds Twilight Walk at Roundhay Park on Friday 18th October. Anyone wishing to sponsor them can donate on www.raceforlifeforsome.org/fountain-medical

Care Quality Commission – Guide for working with Patient Groups

A copy of a new booklet **(E)** and covering letter from the CQC Chief Executive was handed out. It was agreed that the group would take this home to read and we would add this as an agenda item to discuss in more detail at our next meeting.

Our Local Patient Participation (annual) Report

Karen J advised that our report which was submitted on 18th February 2013 has been assessed and we have achieved everything that was required of us.

A big thank you to the group and virtual panel members for their contribution to this.

PRG – Virtual Panel Members

An email was sent to all Virtual Panel members on 21st August advising that this group meeting was taking place. It included the following wording “If you have any ideas or other comments that you wish me to take to the PRG *Group* meeting on your behalf please let me know”.

LT – Sent some ‘thoughts on paper’ regarding the appointment system **(F)** for discussion at the meeting.

Karen L –1. A GP may be working on a certain day but if they are covering the ‘emergency GP duties’ they will not be available to use their appointments to see any patients other than those classed as emergencies.

2. When a GP works full time it is easier to book an appointment with them however if the GP reduces their working hours this will become more difficult. This could be the time for the patient to change their GP?

JHa – Continuity could remain – but with a different GP.

AR – patients will have to learn to compromise.

Karen L – We welcome LTs comments, have recognised her points and will discuss these further with our staff in the TARGET meeting scheduled for 17th October – a section is being dedicated to our appointment system. We have to find a way forward for both patients and GPs.

JHi – If a GP leaves the practice will anyone take over their ‘speciality’? Karen L – the practice will certainly try and ensure this is addressed and that patients are made aware.

GC – Is it feasible to have 2 people answering the telephones early morning? Karen J – confirmed that this does presently happen. Karen L – advised that the telephone system does need updating. A ‘wish list’ is presently being put together for costing / approval.

GC – Does the practice have a policy in place for dealing with and charging visitors/non-patients from another country?

Karen L – Explained the procedure and advised that we follow NHS guidance on what emergency primary care they can receive.

AR – who is a member of the Leeds West Clinical Commissioning Assurance Group updated the group on what had been happening. He has recently attended 2 meetings:

31st July – on various topics including community dermatology, stroke services, maternity and bereavement.

4th September – regarding Innovation and a Primary Care ‘think tank’.

Date and Time of next meeting: 6pm - Monday 9th December

Thank you from the FMC team to all PRG Group and Virtual Panel members for their continued support