**Notes of the Riverside Medical Centre PPG Meeting**

**Held on 13th September 2018**

**Present:**

Joyce Swindlehurst PPG Chair

Margaret Shillito Patient Representative

Cath Wilson Riverside Medical Centre

June Price Patient Representative

Sylvia Megson Patient Representative

**Apologies**

**Notes from previous meeting -** Agreed

**Matters Arising**

* Clinical Pharmacy in General Practice Cath gave an update on the new Pharmacist, Jinnan Azeez, her role and the type of work she is undertaking. Jinnan will be carrying out face to face medication review, she is a Prescriber and can order blood tests where needed to complete the medication reviews. The Practice is really pleased with the quality of the medication reviews done so far.
* Joyce asked about the progress on the suggestion from last meeting re group meetings for Long Term Condition patients – Cath advised that the Practice is considering this, however, would need to cancel Nurse appointments so it may not be practical – especially when there are already groups such as the Expert Patient Groups already in operation. Margaret will find out where and when the EP Groups are being held.
* Margaret advised that one of her collegaues had dropped off some leaflets regarding the Nordic Walking sessions.
* Cath advised that the Practice has the service of a counsellor, Naheed Kahan, each Friday afternoon to see patients with Low Level Mental Health issues such as low mood, anxiety and stress related issues – there is no need to see or speak to a GP and patients are able to book to see Naheed most Friday afternoon. She will assess the patient and offer suitable suggestions or onward referrals if needed.
* Late Visiting Service – Cath updated the group about the Late Visiting Service – staffed by highly qualified Community Matrons, the service is available each day and will respond to Late Calls requested by the GP for patients who are housebound and in need of medical attention – The GP liaises with the Community Matron and if suitable a member of the team will visit and manage the patient – this means that the GP doesn’t need to go out to see the patient and ensures a more speedy response
* Sit & Wait concerns – Margaret expressed concerns about patients ‘jumping the queue’ during the morning sessions – Cath explained the rationale behind why some patients may be seen sooner – this included clinical urgency, children and patients with dementia or Learning Disabilities (for whom it is not appropriate to wait due to distress caused) Cath also advised that not all GP’s may be participating in the Sit & Wait on some mornings – there may be times when other clinics are concurrent with the Sit & Wait and it may appear that patients are being called in early when in fact they may be attending to see a GP in an alternative clinic. Discussion took place around how to notify patients of this as it can be very frustrating for patients – One suggestion was to have a Board identifying which GP’s are working on the Sit & Wait clinic and what other GP’s may be doing to avoid confusion and frustration.
* Newsletter – September newsletter was discussed and Cath agreed to some minor alterations and additions
* Seasonal Influenza Vaccinations – Sylvia asked about the new flu vaccine for older patients (over 65’s) - Cath advised that Public Helath England has introduced new guidance about which vaccine patients should receive – over 65’s will be given a Trivalent Vaccine, Over 2 years and under 65’s will receive a Quadrivalant vaccine – Cath reminded the group that many Pharmacies also provide NHS flu vaccines free of charge to eligible patients. The idea of providing vaccination in more locations is to make it easier for patients to obtain vaccination and hopefully provide more vaccines and therefore increased immunity throughout the population.
* Cath discussed the recent GP Patient Survey results and advised that the only areas highlighted to be below the Wakefield CCG’s averages were 1. Satisfied with appointments 2. Overall good experience of making an appointment.
* Cath explained that the questions asked were specifically about appointments and as the Practice doesn’t have booked appointments on mornings, patients may have responded negatively as afternoon appointments were often booked well in advance. The way the surgery works, same day walk in sessions, telephone triage for same day requests, telephone appointments for urgent and routine issues means that we can ensure those who need to be seen can be seen. The GP’s feel this is a safer way to work.
* As there was no other business the meeting was closed

Next meeting – WEDNESDAY 28th November at 2pm. (please note change of day)