**LEYTON HEALTHCARE PATIENT PARTICIPATION GROUP (PPG)**

**Tuesday 23rd January 2018**

**MINUTES**

Attendees: 7 patient representative group members:

 Caroline Paul, Clinical Practice Manager

 Dr Dinesh Kapoor (Senior GP Partner)

Apologies: No

Chair: BS

**1. Apologies**

There were no apologies received. CP did mention to the group that one of our PPG members. BJ has moved.

**2. Minutes of the previous meeting and matters arising**

Minutes of the previous meeting was taken into the meeting. A copy had been previously sent to all members of the PPG and no amendments were requested. It was also decided that the group meet 4-5 times per year about every two months but no meetings in August and December.

**3. Staff Update**

DK informed the group that we now have a reception manager in place. This is for trial period at the present. There is a review meeting planned with the reception manager with a view to offering a permanent position. Dr Kapoor also went on to say that the practice has tried to improve access by creating more appointment slots. He has done this by employing an advanced nurse practitioner-Mark Edwards, and a Clinical Pharmacist Naheed Hussain. Mark although a nurse he can also prescribe and he will work 3 days per week. Naheed will be able to see patients face to face with regards to their medication reviews and will also help with stream lining the prescribing process, especially dealing with the medications changed via the hospital due to inpatient treatment.

**4. Blood test Arrangements**

Blood test appointments are now online booking only, however there is a facility for a walk in service but this will be eventually phased out. KM went on to explain that at Langthorne they have a screen and the patient types in the date of birth and an after selecting the various options a time slot is offered. If the time slot offered is too long to wait then the patient can leave the building and return within 15minutes of their allocated time slot. Dr Kapoor said that the practice do offer some blood tests here, i.e.-elderly or those patients that require chronic disease management monitoring 1.e.-diabetes etc. Those patients that are housebound are referred to a domiciliary phlebotomy service and the test will be carried out at the patient’s home.

**5. Premises Update**

CP wanted to bring to the meeting an update with regards to the regeneration project as mentioned in previous meetings. CP had said that she had been in touch with Shahnaz Begum at CCG and informed me that the person dealing with this at the Local Council is Mark Dawson. However Shahnaz did state the project is still at the talking stage.

There was also some discussion around the car park. Dr Kapoor had said he would try to see if this could be opened earlier and maybe look into the possibility of a bus route, BS said he had looked into the possibility of a bus route some years ago but was told that the route was not feasible, DD also mentioned that he had been in contact with LRT and he was also told that the bus route was not feasible. It was also mentioned that there was no direct bus route to Whipps Cross Hospital.

**6. Online Services**

KM discussed viewing patient’s records and also wanted to know what can be seen when viewed. DK explained when an entry is made in the system it has a read code attached, and it will be only the read coded entries and medication that can be viewed. CP explained that before patients can view their summary care record a clinician has to read the coded entries to make sure that any sensitive information does not cause concern or distress.

**7. Patients Comments on NHS Choices**

Dr Kapoor discussed NHS Choices website and the comments made about the practice. These comments are normally knee jerk reactions made by the patients who have not been given what they expected to receive. DR Kapoor responds to each comment made by asking the patient to contact us to discuss their comment but no one replies. BS suggested that the comments be responded by the PPG and these comments can be raised at the following PPG meeting. BS is happy for his e-mail to be used.

**8. Any Other Business**

**Pharmacies:** Discussion around stock piling of medications. Now that there will be a clinical pharmacist in post, this may help deal with the reduction of pharmacists repeating medication that the patient no longer requires.

**Reception:** Name badges for the receptionists were mentioned again. Caroline said that their NHS badge is needed to log in to the system but they had their name displayed by the desk as to which each receptionist would be sitting it. However the nameplate does tend to fall off during the course of the morning. The receptionists should appear more welcoming. Caroline will arrange for the reception manager to come to next PPG meeting.

**Citizen’s Advice Bureau:** EHwanted to know if there was anyscheme regarding the Citizens Advice and General Practice. If a patient requires any advice regarding employment, housing or any other social issue-the GP can refer to Social Prescribing Service.

**Community Events:** EHmentioned that there will be a community event with regards tointernet and various scams at Leyton Orient on 16th February 2018. There will also be stalls form various charities.

**Date of next meeting: 20.03.2018**