

F2F Meeting Minutes

Wednesday 21 November 2018 3.00 – 5.00 pm

APPROVED BY THOSE PRESENT

Sent to Practice Manager for emailing to virtual PPG and display on BHC website

Present

BHC Staff: **JH, NS**

F2F Group members present: **JB, EE*, MM, PP, ES, ET*, EW**

Visitor: **AT**

The Minutes of the September meeting had been approved already and will be sent out to the virtual PPG and put on the website when the computer changeover has completed.

ITEMS ARISING FROM 12 September Meeting

ACTION/UPDATE

TAI CHI FOR PATIENTS PROJECT

1.1 The door should be fitted the week beginning 17 December 2018.

1.2 **AT** was introduced as the future instructor. The first session will be **Thursday 24 January 2019**. Time to be 2.00-3.00 pm. If the weather is bad then the first session will be held in the seminar room (if available). This would be suitable because the mind-body section can be done sitting down. **AT** will create a contact tree with those who come – in order to notify them if a session is to be cancelled for any reason. The fee will be £4.00 per session. The price will be pay as you go. Receipts will be given to participants. BHC guarantees £30.00 a session to **AT**. The sessions will be in Term time.

MM to contact the patients who attended the pilot 6 sessions in spring and advise them of start date and the afternoon time.

MM will be present at the first session to help with the contact tree.

Publicity A4 poster in reception to show **AT**'s email and phone number with start date, day and the afternoon time. 'Beginners Welcome' to be included.

1.3 **Funding**: Rationel UK confirmed that they are willing to receive a delayed application for some funding from their community fund. **JB** will look for additional funding sources. **Samples and prices of Benches**: **JB** delayed this until we can go into the space, measure accurately and decide how many 3-seater benches might be fitted in. Recycled plastic benches will be used and must have weight limit information. Before the next meeting in January 2019 information will be sent round.

UPDATING THE PRACTICE WEBPAGE WITH INFORMATION ON THE PPG

There was a lot of discussion about the BHC website – the fixed subject choices on the task bar and how patients might discover useful information about the PPG, F2F group meetings and the current leaflets. At the moment it is only clear to those who know already where the information is....

AN INDIVIDUAL PATIENT'S OPT-OUT CHOICES/OPTIONS

JH explained as follows: 1. National Summary Records – which are bare-bones information including medications and allergies -**implicit opt-in** 2. Local Oxfordshire Care Summary can be accessed by OX Trust Hospitals and out of hours GPs; **implicit opt-out** unless decided as opt-in. 3. TEXTS: relationship with GP. Can expect texts from GP SMS – opt-in or opt-out chosen **on registration** as a patient with the practice. 4. EMIS – software new to the practice – has the add-on possibility to send text during a consultation. This is being considered by the clinicians at BHC. There would need to be consent for clinical information to be typed into SMS.

ES has still not had her meeting with **PN**. It is hoped that the meeting will take place in December now that the computer changeover is taking place.

NS to book if available.

MM has confirmed points to **AT**

MM

MM done and with **NS**

JB

PP, MM

JH, ES, PN

'FLU JAB DAYS FEEDBACK: Day 1 in September was very quiet. **MM & JB** stayed until noon but there were not enough patients for **EW** to need to stay. Day 2 in October there were nearly 300 and **MM** and **ES** were surrounded by people. Patients were very friendly and helpful to the others. **MM** did as many blood pressure tests as possible. When the record paper ran out she then wrote the BP result on the Weight and Height machine paper. This machine ran out of paper too but it was possible to fit spare paper. **ES** helped to remind people to have a sleeve rolled up ready for the 'flu jab.

It is suggested that when a volunteer is present on a 'flu jab days in 2019 that there could be a rise and fall chair for patients of varying heights.

ET asked about the frequency of calibration of the BP machine in the reception area. Calibration of BP machines in the practice takes place annually. It was mentioned that patients have their own machine at home if they need to check their own BP regularly. You can check the calibration of a home BP machine against the machine in reception. (See note at end of minutes about the follow up, after the meeting; to demonstrate to the practice staff the restrictions for a patient using the BP machine alone.)

RE-PAINTING OF LINES IN THE PATIENT CAR PARK

This is on the list of jobs for the handyman.

LEAFLETS (all updated versions are on the BHC website)

'One Step at a Time' **ET** and **JB** have updated the information since edition 1 in December 2017. As expected there are a number of changes. Edition 2 will be on display when the current copies run out.

'Test Results' is now on display. **NS** reported that it is a popular leaflet. **'Coping with Bereavement'** Edition 2 will be on display when current copies run out.

FEEDBACK ON COMPUTER CHANGEOVER

JH explained that it had been really busy because of the usual routine plus learning the new system. He considers that it will take some time for everyone to get used to it. The practice is now using protocols and templates which are interchangeable with other practices in Oxfordshire. There was training every day for the first week. Reception staff members are having training on new Emis protocols. Montgomery House practice has also been helpful in this because they have had the system for some time. There was some discussion about how to re-register for online services. 1 person present has been able to do this.

UPDATE ON THE 4 ARMCHAIRS IN RECEPTION

Two are on raised blocks but it is necessary to have the other two without raised blocks.

JB to PP to NS
For printing. **Done**

AGENDA

		Action
1	New Leaflet: to encourage patients to take advantage of screening for cancers, this is offered to them by letter. BHC needs to have more of their patients responding to the invitations. There are some medical students in the practice who are working on a leaflet draft with JH . MM asked about the local targets. ES pointed out the importance of patients understanding about screening for themselves and that screen results might be used in national or regional research programmes. In her opinion patients must be clear that they are giving permission for two different things i.e. a patient can refuse permission for results to be used to separate research. ES is concerned about data sharing without permission. She suggested that mention be made of this in any leaflet produced.	JH
2	UPDATE ON TRAINING SESSIONS for EW and MM to encourage patients to go for screening to give talks about screening. JH has applied for places for this.	JH
3	LANGUAGE IN STANDARD MESSAGES, chosen by a GP, to be relayed to a patient who phones for test results. The list which F2F group members had received with the	JH & NS if approved

Circulation when approved: BHC practice staff present, Practice Manager, Reception Manager and all F2F group members, Chair of NELF (+hard copy to those marked *).

Chairman MMmonica@mehers.com

Minute takers in 2018: JB & PP bhc.ppg.f2f@gmail.com

<p>agenda has been superseded. Work is being done on this new list in the practice, so it is not attached at this time. Comments were made by various members on the possible confusion in a message e.g. “Result Acceptable, No change to Management Plan”. If the test was for something new for which no existing management plan is in place a patient could be confused, even alarmed or think it was for someone else. Some of the new messages presume that a patient will ring. What happens if (s)he does not? Is there a prompt in some way on the patient’s file?</p> <p>It was suggested that a laminated large copy of the Test Results leaflet should be on display in the rooms where tests are carried out. A patient can read it while waiting for the test to be performed. The patient must be made aware that (s)he is responsible for checking results.</p> <p>UPDATE FROM NELF¹ MEETING ON 7.11.18 PP and ET had attended.</p> <ul style="list-style-type: none"> - Earwax treatment is necessary for older people the Forum is pressing for funding. There is an 85 page report on services for older people. - There is a pilot project in Oxfordshire to send an Occupational Therapist with kit with a paramedic team responding to a call where a fall has occurred but does not involve a heart attack or a stroke. - There is also a pilot project as a result of pressure from the NHS called “e-consult”. Emails to the practice triaged and responded to within 48 hours. Expectation is that the time spent on this will be saved by having fewer appointments. There will be ‘trigger words’ to flag for 999. - Delayed Transfer from Hospital beds: From May to November 2018 it is reported that 60% of patients were able to go home within 3 weeks of being transferred to the Care Home beds from hospitals. 	<p style="text-align: center;">Decision to be made by practice</p>
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ANY OTHER BUSINESS

1. Contraception: **JH** responded to a query about funding changes which could make it more difficult for patients to access implants and IUDs by stating that practices had resisted this proposal.
2. Patient triage over the phone. What guidelines do Reception/Phone staff work to? **JH** explained that there is no computerised triage system and the Reception/phone staff are purely booking appointments without accessing a patient’s medical notes.
3. There was a query about Mjog.com text messages and concern that it was not genuine. Mjog is the new text messaging service connected to the new software system at the practice: EMIS and the EMIS Patient Access. There were comments about re-registering as patients for on line services.
4. **DATES OF THE NEXT TWO MEETINGS: Wednesday 23 January 2019 and Wednesday 20 March 2019**
Time: 3-5 p.m. in BHC

The meeting closed at 5.10 pm

Footnote – after the meeting: *In reception, the members looked at the **blood pressure machine, table, chair and instructions** plus position of instructions on the wall - in relation to a patient sitting on the chair. There are problems for any patient to read the instructions over a left shoulder with left arm in the machine. Also, there are **problems for tall and very short patients** to take their own blood pressure because of the height of the chair.*

¹ NELF is North East Locality Forum which includes the PPGs from Bicester, Islip, Kidlington and Woodstock

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