

## MINUTES 28<sup>TH</sup> SEPTEMBER 2017

- The PPG noticeboard was discussed. JJ felt that a larger, brighter header sheet was needed so that it stood out more. MD agreed to look at making the header larger and bolder.
- Use of A3 paper on the noticeboard was discussed. The Practice does not have an A3 print facility but BB kindly offered to print anything in A3 that was required.
- JJ provided examples of the PPG leaflet that were still showing Heather Ogden and Dr Donlevy's name on it. MD expressed surprise as he personally updated all the PPG leaflets after HO resigned, including the master copy and had personally put them on display. It seems some rogue old stock is still in circulation somewhere. MD agreed to ask a colleague to do an audit of the stock and remove any outdated stock.
- JJ noted that the next meeting date on the Practice website was still out of date. MD apologised as he had asked his colleague to correct this after the last meeting and agreed to get it changed correctly this time.
- JJ suggested that the 'Ask the Practice' feature (or similarly worded feature) for the PPG noticeboard could include information about screenings – prostate, AAA, breast, cervical etc. BB also suggested a section about coeliac. Active Ageing, which was recently circulated to all PPG reps was also mentioned. JJ, BB and BR agreed to meet up independently to discuss these ideas in more detail and progress.
- JJ commented that the 'or otherwise' on the PPG poster was not in the right place but then there was some confusion as to whether it had been changed and was now correct. MD agreed to check the poster and get it re-copied if required.
- The new Social Prescriber, Simon Booth, had to pull out of attending at the last minute but was still keen to attend the next meeting. In his absence, MD provided an update on the role of Social Prescriber and some background on Simon. MD also provided an update on the planned Physio recruitment and explained that he expected that to be finalised in the next few weeks.
- MD provided an update on the withdrawal of gluten free products on prescription which had now come into effect. A brief discussion took place about the costs of gluten free products on prescription compared to over the counter. MD explained that we had fewer affected patients than some Practices and to date there had been no patient comments in respect of the withdrawal.
- MH provided an update on the CCG led changes to the Repeat Prescribing Process across Airedale, Wharfedale and Craven and explained what this would mean for patients.
- MD provided an update on the flu clinics and both BB and JJ raised queries in respect of the invite process. Explained that the invites (some 3,000) go out in batches in order to manage incoming calls from patients looking to book an appointment. The invite batches are not necessarily in alphabetical order so husband and wives may not get their invite at the same time.
- MD gave an update on PPG membership. Another 11 members have expressed interest in being virtual members and MD has sent them the documents about joining the group and attending meetings. No response to date. JJ asked if we knew how much interest there had been in the PPG noticeboard. MD said he was not best placed to know as he is upstairs.
- MD gave an update on the maternity leaves of Dr's Cuthbert and Kennedy and the retirement of Heather Wilkinson. He also updated the Practice on the restructure of the non-clinical teams following Heather's retirement.
- MH gave an overview of triage and appointments and how the triage system works and benefits patients and the Practice. He explained how an effective triage system can improve patient access and ensure the patient gets to see an appropriate clinician at an appropriate time.

- JJ asked MD why there was such a strain on appointments when MD has routinely said the Practice has enough GP's. MD explained that the Practice does have enough GP's but that does not necessarily mean there is always enough appointments as patient demand, GP work patterns, time needed by GP's for admin and meetings and other commitments all have to be factored in to a GP's day. BR asked how many appointments and GP's were typically needed for a patient list size like ours and MD explained there are no set rules really as patient demographic, socio economic factors, the number of patients with acute and non-acute illnesses all influence this. He gave an example of Ling House Practice which has similar patient numbers but significantly more GP sessions because of higher demand, whilst somewhere like Addingham offers less than 20% of the GP sessions offered by Silsden, yet has more than 25% of the patients, so demand is far less.
- MD gave an update on collaborative working and advised reps about the Modality Partnership and explained that the Modality merger was going live on 1<sup>st</sup> October which would see the following Practices join the Modality Group: Holycroft, Kilmeny, Farfield, Cross Hills and Fisher Medical. Silsden had considered the opportunity but decided it was not for us and we were still progressing our collaborative working plans with other non-Modality Practices.
- The next meeting is arranged for **5.30pm on 7<sup>th</sup> December 2017**. Please note the earlier start time – 5.30 not 6.30 as agreed.