

PATIENT PARTICIPATION GROUP MEETING – 20th March 13

TOPICS DISCUSSED:

Apologies from those that were unable to attend. KS explained that a few of the members send through their comments via email and receive the minutes from the meeting. It is understood that patients may not be available during the day to attend the meetings and therefore the virtual meetings are important to include as many patients as possible.

- **Conclusions from the last group meetings:**

- The survey results were discussed (please see results of the survey attached). The survey had been emailed through to all patients that had requested repeat prescriptions or use our email service. The survey was also available in the waiting area as well as offered to patients attending the practice by the reception team.

There had been a good response to the surveys and some interesting points to hopefully action in 2013-14.

The survey questions had been designed and agreed at the previous PPG meeting and some of the questions aimed to reflect on the action plans from 2011-12 and determine whether they had been implemented properly. The other questions hoped to look to the future and how to improve the service the practice delivers.

ACTION POINTS FROM 2011-12:

- Implementing a text system to remind patients of their appointments – over 61.5% liked to receive the texts messages. This reflected the same opinion as the previous year and therefore the practice will continue to fund the text messaging service.
- Privacy at the Reception desk – last year 97.7% believed their confidentiality was observed by the reception team but comments were raised that patients felt they could not speak freely at the desk as other patients could over hear their private conversation with the practice team. Over the last year the new door has been fitted and signs have been put up asking patients to respect each others privacy and not to come to the desk until they have been invited. The reception team have also asked people to observe one another's privacy and step back from the desk. The results from this years survey showed 98.8% of the

patients felt their confidentiality was observed but a comment was repeated - request for more privacy at the desk. Therefore we will aim to enforce the patient's privacy verbally by the reception team more.

- A local number was implemented last September and the 0844 number is being phased out. Unfortunately this year's survey showed that only 50% of the responders knew about the new number. The practice has replaced all signs and adjusted all letterheads to reflect the new local number and produced handy small contact cards that patients can keep in their bags and all web based directories have the new local number. Due to the response from this year's survey all email replies will have the new telephone number on and the reception team will remind patients of the new number.
- The reception team also took note that last year patients were finding it hard to get through on the telephone and therefore over the past year have been asking patients not to call at 9am and 2pm unless they require an emergency appointment and suggesting that people call at 3pm for specific results or problems. The results this year have shown a slightly improved response from the patients. KS welcomes any further suggestions of how to improve patient access via the telephone. A PPG member complimented the surgery and said she had never had a problem getting through on the telephone and found it much easier than her previous practice.
- The reception team are routinely offering the option to book with a specific doctor, next available doctor or a specific day. Although the results from the previous year marginally showed that patients only want to see a specific doctor it was felt that all the options should be given so that the patients can make an informed decision. 80% of responders had been given these options although unfortunately 50% of respondents had had to wait up to 5 days for a non emergency appointment. The practice has expanded the number of emergency appointments offered on the day and the reception team have been actively encouraging patients to call for cancellation appointments. It should be noted that over 71% of respondents skipped these questions and KS invites anyone to suggest ways of reducing the time a patient will have to wait for an appointment. The option of more specific leaflets to help patients to help themselves and therefore reduce the pressure on the surgery will be actioned for next year.

- The Health promotion leaflets were the last action point from the previous year and this years survey showed 100% of respondents thought the leaflets and posters were useful and up to date. KS would like to continue this high standard of patient literature and will be using the suggestions of leaflet topics for the next year.

NEW TOPICS AND ACTION POINTS:

- Displaying and advertising the new local telephone number so that more patients find out and utilise the cheaper number.
 - To publicise on our website, practice leaflet and posters in the waiting area suggesting patients telephone at different times to alleviate the pressure and wait time for patients calling the practice.
 - Continuing to offer topical, patient focused leaflets and KS would like patients to continue to suggest literature they would like available. A box will be placed in the waiting area so that patients can offer suggestions.
 - Patients will have more appointments in the community and less in the hospital setting (see later notes on NHS update).
 - Patient education to promote the use of the primary care settings and not to visit A&E for non emergency problems (see later notes on NHS update).
- **NHS update** – the PPG group heard about the progress of the new plans being implemented in the NHS. KS reassured the meeting that the GP's that meet monthly to discuss and implement changes to the NHS are very passionate about their patients care and positive about the reconfiguration of the NHS. KS described one directive that the NHS is working towards; bringing outpatient appointments into the community clinics rather than the hospitals. She explained that a hospital appointment costs a lot more to the NHS than a community clinic appointment but the clinical team are of the same standard and frequently are the same personnel as the Hospital setting. She also explained that hopefully this would mean patients can access the clinics more easily and the exposure to hospital acquired infections would be reduced. KS also explained about the proactive plans to teach patients to use the NHS appropriately and not attend A&E for minor illnesses that can be looked after in the GP setting. The surgery now offers appointments from 9am to help access for patients before work and offers emergency appointments at the end of each surgery session

as well as from 12midday to 12.30. These appointments are offered to patients with the hope that they will use the GP as their primary care giver and not attend A&E. She also mentioned the 111 number that is advertised around the practice for the out of hours service and the Healthcare Pathway leaflet that are available in the waiting area and offered to patients that are unfamiliar with the NHS and access points (please see attached leaflet).

- Primary Navigator – The group were informed that a Primary care Navigator had joined the surgery. He is employed by Age Concern UK to work with all our patients over the age of 55 years old that have social or economic problems. KS explained that Health Checks that have been offered to patients over the age of 65 years hope to identify any non medical problems our patients have and sign post them to the Navigator that can offer help and support. The over all aim of the Navigator is to reduce the pressure for the NHS by alleviating social problems that can cause ill health later on. A member enquired as to how to contact the Navigator and it was decided that a poster should be put up in the waiting area so that all patients could be informed of this service. KS will action this.
- Next meeting – 3mths time.