

PATIENT PARTICIPATION GROUP MEETING – 14TH NOV 2013

Introductions from members present and 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.

TOPICS TO DISCUSS:

- **Feedback from last meeting:**

Royal Brompton Electronic System:

KS explained that in the previous meeting PPG members had complained that the consultants letters from Royal Brompton Hospital were not arriving at the surgery in a timely manner and this was delaying important medication changes as well as taking up admin and clinical time chasing these letters. KS has been working with the RBH to set up a secure link between the Hospital and the surgery to receive the letters electronically. The surgery will be commencing this facility in the next two weeks.

Survey:

KS handed around the draft of the survey containing the agreed topics for the surgery's 2013-14 annual survey. The group were asked to look through these and suggest amendments as well as further questions to ask.

A member required clarification as to what a 'Community Based' appointment was. The group decided to revise the wording to make it clear and have agreed upon 'Non-Hospital Based' appointment.

A member highlighted question 7; "If you needed to see a doctor on the weekend would you be willing to visit another local surgery in the area?" She asked whether this was something that would be implemented soon. KS explained that a new initiative was being rolled out to be able to have a GP surgery in the area that you could visit on a Saturday or Sunday between 8am – 5pm. This would be a walk in only facility. The members agreed that this would be a very good idea and looked forward to it being rolled out.

A member asked how the surveys would be circulated and KS explained that they would be electronically sent to all patients with email addresses that the practice has on file, available in the waiting room as well as given to patients when they leave their appointments. KS explained that it was too expensive to post the survey to patients. Two of the members volunteered to hand deliver some of the surveys. It was decided that they would be given a list of addresses without the names of the patients on and then hand deliver them – in line with data protection. The group agreed that on the survey it would clearly explain how to return the survey by post, hand deliver or complete the survey electronically using the surveymonkey website tool.

Age UK Navigator:

KS apologised that Carole Walker, the Navigator for the surgery, was unable to attend the meeting and had sent her apologies. KS briefly explained the role of the Navigator: she works with our patients at the practice to offer social support to patients over the age of 55 years.

- **PPG Training Dates:**

KS brought to the attention of the group some local training that is available for patients in the area if they would like to become more involved in the NHS. She handed out leaflets with the training dates to the group.

- **AOB:**

Air Pollution:

KS briefly showed an article to the group that a member had brought in regarding the damage that air pollution can cause.

Digital Medical Records:

KS explained that the HSCIC has been requesting patients to opt out of having their medical details uploaded onto a central network that can use patient identifiable information to process research as well as in the future enable patients to have access to their medical records via the internet. A member was very eager to have this resource available and KS explained some of the variables that have to be overcome before this can happen; maintaining the confidentiality of patient's details from internet hackers, translating the medical terminology and acronyms used in patients notes. She was unable to give the member a timescale on when patient's medical records will be available on the internet.

Collecting Referrals:

KS asked the group whether they thought patients would mind coming into the surgery to collect their referral letters instead of the surgery posting them in order to reduce the cost. The members agreed this would be a good money saving idea and also suggested that the practice emails the referral letters. KS explained that they would need to sign a brief form/box to authorise the practice to email personal data from the practices secure NHS email address to the patient's unsecure address. The members thought this was a reasonable request.

KS thanks the members for attending the meeting and explained the next meeting would be held at the beginning of March.