# PATIENT PARTICIPATION GROUP MEETING – 31st July 2013

#### **TOPICS DISCUSSED:**

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.

## • Conclusions from the last group meetings:

- O Displaying and advertising the new local telephone number so that more patients find out and utilise the cheaper number. Members of the meeting thought that this was sufficient. KS reassured the members that the old number still works.
- o 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. Members feedback was good.
- Ocontinuing to offer topical, patient focused leaflets and KS would like patients to continue to suggest literature they would like available. A box has been placed in the waiting area so that patients can offer suggestions. No suggestions have been offered yet and all members of the meeting thought that the promotional information was good.
- O Patients will have more appointments in the community and less in the hospital setting. The members thought this was a good idea but were worried that the community appointments would be in St Charle's which is very far for our patients to travel. KS reassured the members that there were preliminary plans to have another hub nearer the practice.
- Patient education to promote the use of the primary care settings and not to visit A&E for non emergency problems. All members thought this was a good idea and the staff should continue to encourage the patients to use the NHS responsibly.

#### • Your NHS:

- O Community Based Appointments: KS explained that the new arrangements in the NHS will have more outpatient appointments based in the community setting and that this will save money as well as reduce exposure to hospital acquired infections. All members agreed that this would be a good idea. One member enquired as to whether the surgery could buy more equipment, for example; an ECG machine, so that patients could have these services at the surgery. KS explained that there had been discussions within our cluster of GP's to share some of the resources that other surgeries have with our patients but also stressed the importance of having properly trained clinical staff to interpret the results. There was also a request for a Parkinson's Community Clinic. A few of the members were not favourable about the quality of care given at the outpatient appointments attended at World's End Health Centre and found the admin staff unhelpful. KS will feed this back.
- O Navigator working at the practice. KS recapped that the surgery is fortunate to have a Navigator from Age UK working with our patients at the practice to offer social support to patients over the age of 55 years. Members agreed this was a great opportunity for the patients and suggested that a poster be placed in the waiting area explaining this resource and how to access it. KS will action this.

### • Survey questions for 2013-14:

- Review of satisfaction with the health promotional information. Would the patients like to access health advice via our website?
- Location of community based outpatients appointments. Where would the patients like to have the services?
- O Booking appointments via the internet. Is this something that the patients would like?

#### • **AOB**:

- Complaints were heard re the Royal Brompton Hospital and that patients were not receiving the consultation letters after their appointment and there was a lack of sharing of pathology information meaning that the patients have to repeat blood tests.
  KS suggested she could liaise with the Hospital to encourage sharing of patient information.
- O KS explained that Dr Tonkin had left the practice and we wished her the best. Dr Lewis is still supporting Dr Scudder and will now be working at the surgery on Monday mornings and Dr Wyld is working at the surgery on Monday afternoons. The members are very favourable of both doctors. The surgery is looking for a new doctor to take over her role and will be interviewing perspective doctors over the next few weeks. KS explained that throughout this period the surgery would be supported by regular locums and asked for any feedback from the members of the clinical care provided by the locums.
- O Positive feedback from the members of the PPG re the surgery and the patient care they receive. No further suggestions were given of how to improve the service given.

#### • Action Points:

- O A poster in the waiting area regarding the Age UK Navigator working at the surgery
- O A draft of the Survey for 2013-14 to be reviewed at the next meeting
- O KS to liaise with Royal Brompton Hospital to encourage sharing of information.