

# PATIENT PARTICIPATION GROUP MEETING

Monday 22<sup>nd</sup> February 2015  
7pm at Weobley Surgery

## MINUTES

### ACTION

**1. In attendance**

John Allen, Ruth Bright, Alex Davies, Gary Griffiths, Maria Haines, Gladys Henesey, Alan Jones, Raymond Jones, Bill Montague, Jean Rees

**2. Apologies**

Anthony Barraclough, Helen Cotterell, Sarah Pithouse

**3. Minutes of the Last Meeting**

Agreed as a true record.

**4. Election of Chair**

One nomination had been received for Alan Jones. No other nominations on the night were received and Alan Jones was unanimously voted in as Chair.

**5. Building Update**

MP reported that the extension was currently on time. The new waiting area would hopefully be finished by the end of February with the new entrance being utilised at this time. The temporary entrance would then be closed off and the new consulting rooms completed by the end of March when all work would need to be completed. In addition to the new build, both of the other consulting rooms were to have new sink units, tiling and flooring.

MH asked if there would be a drop off point in the courtyard. MP explained that the courtyard would be available for limited disabled parking only (as previously). MP and Rachel Penney had met with the Parish Council early last week to discuss issues with regard to the surgery such as parking and a number of options had been identified that may help although it was reiterated that the responsibility was not for the practice to provide allocated parking. The Practice also referred patients to their Healthy Lifestyle Policy and encouraged those able to walk the short distance from the large car park at the Village Hall.

**6. Text Messaging**

MP indicated that the Practice had suffered quite considerably with patients not attending for appointments (DNAs). There did not seem to be a correlation to type of appointment, age of patient, booking method or length of time between booking

and attending.

Posters had been made available in the waiting room regarding the number of DNAs on a monthly basis and the current course of action for patients if they continue to not attend. Patients who DNA two appointments within a six month period are now written to and DNAs are coded into the patient record which then allows the doctor to discuss this with the patient when they are next seen.

There are increasing pressures upon clinical staff to reduce waiting times for appointments and to increase patient access to clinicians. Patients who do not provide notice of cancellation add to these pressures by reserving appointments that are then wasted. MP has therefore done a lot of research across the county with regard to providing text message reminders and it has been clear that the reduction in DNAs has been large. The Practice has decided to trial this service. Posters urging patients to offer their mobile numbers have been placed in the waiting rooms, on the website and on repeat prescriptions. As indicated in the leaflet circulated the system can do so much more including auto-appointment cancellation, reminders for review appointments, patient surveys, prescription read messages (see attached). We will start with reminders and auto-appointment cancellation. If successful we will move to adding in more features including the ability to be able to send notification to landlines and not just mobile phones which may be more accessible for patients in areas where mobile signal is poor.

Patients do not have to take up the service and can opt out at any time by informing a member of the reception team.

AD indicated that in his experience the text messaging service that had been set-up at his school had taken quite a lot of engagement between the school and the parents to make it successful and it maybe that sessions of this nature at the practice would be very beneficial.

## **7. Card Machines**

MP reported that this had been looked into on a couple of occasions especially as the rental rates had now reduced. However, these were still very expensive as the turnover of transactions were not enough to reduce the costs and in turn an additional charge would need to be levied to the patient per transaction. In addition the Practice would need to install additional telephone lines, purchase the handsets and would also be charged per transaction which was felt to be unsustainable.

## **8. Patient Online Access**

MP informed the group that from 1<sup>st</sup> April 2016 patients can request to see their coded record online. A request form will need to be completed and ID reviewed (even if already signed up to Patient Online Access). Immediate access to coded information will not be possible until the notes have been reviewed by a doctor as any third party references will need to be removed from the notes. A Patient Information Leaflet was circulated (as attached) which gives an overview of what is classed as coded information and what is not. The leaflet also asks patients to consider a number of things before requesting access. In addition, parents, carers and relatives will be able to request proxy access to a patient's notes through a separate form and process.

Where a person has a Power of Attorney a request form would still need to be completed in line with Information Governance procedures although the Practice would always welcome sight of a Power of Attorney at any time so that this could be recorded and coded onto a patient's record.

Patients will be able to login to the system from anywhere in the world however it will be their responsibility to keep their login details and password safe and secure. If the patient decides to print out any information from their record, it is also their responsibility to keep this secure.

Initially test results will be available indicating the result and the normal range but there is no current option to turn on comments for the results alone. This will be enabled in the new version of the computer system which should be upgraded by the end of March. There was some obvious concern that the interpretation of results could lead to unnecessary anxiety by some patients although hopefully this would be resolved shortly with the upgrade.

The age at which access can be requested is still under review and will be discussed by the Partners this week to ensure a consistent approach in line with safeguarding best practice.

Initially, due to the complexities of the 'switch on' for each individual record and the work involved in reviewing the notes, three members of staff will be allocated to undertake this process – Michele Petrie – Practice Manager, Sarah Pithouse – Assistant Practice Manager and Vanessa Warman – Reception Manager (at times when either MP or SP are unavailable).

## **9. Any other Business**

**Patient Online Survey Results** – OP reported that the Practice had featured extremely well in the recent national survey results for appointment satisfaction being ranked within the top 100 practices in the country (62<sup>nd</sup>) along with Much Birch.

**Water Machine** – MH had asked whether a water dispenser could be provided for patients at the practice in the waiting area. MP indicated that in her previous role a water sample had been taken from one of these machines and they were astonished at the results. Unfortunately not all patients undertake good personal hygiene and in an environment where people often feel unwell and children play, plastic cups and the water dispenser could be a good source of spreading viral illness.

**7 Day Working** – RJ asked what the intentions were of the CCG to close the ASDA walk-in centre and how this would affect the Practice. OP and MP reassured those present that although a lot of discussion had taken place with the CCG and representatives from across each practice no decision had been made to affect any closure. The rural practices had made it very clear that should this happen then the resources needed to be diverted much more widely across the county to ensure equity of service.

MP explained that we are still awaiting the detail from the Department of Health as to what is to be expected of seven day working making it very difficult to plan what is required. Whilst GPs may wish to provide sessions 24/7 to their own patients it was impossible to meet this patient expectation. It was suggested that Taurus would continue with their sessions on behalf of the practices and for the service to become more equitable.

**Carers Awards** – OP reported that the Practice was thrilled to win the overall Practice of the Year and Rachel Penney received the award for the Doctor of the Year at the recent Carer's Awards. GG indicated that nomination forms would soon be available in the waiting areas and encouraged carers to complete these and send into the Herefordshire Carers Forum.

**10. Date of Next Meeting**

Monday 9<sup>th</sup> May 2016, 7.00 pm at Staunton on Wye Surgery