

PPG Meeting

Monday 6th October 2014 7pm at Southwood Practice

Those Present: LStratton, R Cuninghame, D Srivastava, B Hambleton, P Bewley

Apologies: G Symons, S Siggs, J Drake, J Hewitt

Review of minutes of last meeting:

- Farnborough Poly clinic – we still have no information on this.
- TV Screen – the surgery will be having a TV screen fitted soon, this will be used to inform patients of useful information relating to their health and well being and surgery information. It will not be used to advertise products.
- DNA: The DNA rate continues to be a concern. The surgery does try to address this by issuing appointment cards, sending text reminders and voice reminders to landline. We also display the numbers of appointments missed in the waiting room. We are aware that the figures are including telephone appointments and triage telephone appointments where we cannot get hold of patients.
- Minutes of last meeting agreed by all present

Review Triage

- Do patients understand triage.
- Having discussed this at a previous meeting we changed triage to 'Telephone Assessment' this appears to be working well. We have not had much negative feedback; most patients seem to be quite happy as they know they will speak to someone on the day
- There are some exceptions where the system doesn't suit everyone, (e.g. teachers can't take a call when in class) we try to accommodate by taking a time when it would be more acceptable to take a call for example after 3pm.
- Having up to 2 weeks of appointments on the system has also helped as patients know they will be seen within 2 weeks and not have to wait 4 weeks for an appointment

Waiting times shown on the self check in screen

- When booking in using the self check in screen it gives the wait time. It has been brought to our notice that the wait time is sometimes incorrect, either showing a long wait then they are called quickly or it shows a short wait and they are kept waiting a long time.
- The wait time is calculated by the changes between A – arrived S – seen and L – left. Patients checking in start the process by A – arriving themselves. The clinician calls them generating the S – seen and then when the patient leaves the room L – left is added by the clinician
- If a patient takes longer than their 10 minute appointment the extra time is shown to the next patient who checks in.
- If a patient checks in and the screen shows a short wait time, but then there is a long wait, it may be the previous patient has taken longer than their 10 minute appointment

- GPs morning surgery consists of appointments with telephone appointments and breaks in the middle of the morning. If the GP runs late and leaves their telephone appointments until the end of morning surgery this will affect the wait times shown on the self check in.
- The general feeling at the meeting is that patients would prefer to see a wait time on the self check screen as the reception team do put up notices when the GP is running late

Effectiveness of external services

- We don't usually get feedback from patients on the external services used. We get a report from the clinician on discharges following treatment
- Suggest this is added to the next survey – Lorraine and Rosie to action.

Annual survey

- For the PPG DES we run a survey once a year to collect information on how we are doing and look for areas that may need improvement
- The PPG group were asked what questions should be included in this year's survey along with the usual questions on age, ethnicity, employment status, carer, gender.
- A copy of last year's survey was handed out and will be emailed to PPG Members who could not attend the meeting, asking for suggestions to be collated by Lorraine and Rosie by 15th Oct.
- Monkey Survey was used last year and we will use it again this year

Action Plan – 3 key areas

- Last year's action plan has been completed.
 - **To promote in house services and self referral serviced more widely in the waiting room.** There is now a dedicated notice board
 - **To use all communication methods available to reach as many patients as possible.** We use text, email, posters, leaflets, website, face book, twitter, messages to the right hand side of prescriptions, the self check in screen and verbally
 - **Promote online services.** We attach to prescriptions, and include in the new patient information pack a leaflet explaining and inviting patients to use the Online service.
- This year we need to agree a 3 key area action plan.
 - PPG members were asked at the meeting (and will send to those not attending meeting) for items to include in the action plan.
 - Feedback from PPG members within next couple of weeks via email to Lorraine with suggestions for Action plan
- Access to patients records on line
 - This is a new initiative where patient can view parts of their medical record online.
 - Our understanding is that patients will need to be registered to use Online Access and will be able to see a list of coded items eg: Asthma, Diabetes, COPD
 - The surgery only has to set a date for this and we are looking at March 2015. This is not a fixed date yet
- Surgery experience
 - Time keeping and failure to attend (cost) and Patient care and nursing.

- This question was relating to District Nurse Team, did we know how much it cost the Practice. The discussion centred on patients leaving hospital and the difference between a care package with social Services and the District Nurse Team who would attend patients at home for clinical needs. The hospital would make the arrangements for either the care package or the DNT to visit the patient and the surgery would be informed by the hospital via a patient discharge.
 - The surgery will contact the DN team via telephone, email or fax if they have a patient who needs to be seen at home. Generally they would be housebound patients who need a blood test or dressings changed.
 - Someone from the DN team attends a monthly meeting at Southwood to update the Practice on the Southwood Patients that they are seeing.
 - If the DN team have any concerns about a patient they are seeing, they will speak to a GP at the Practice either by phone or in person
 - We are unable to give costs involved as Lorraine and Rosie do not have access or involvement with the accounts, Helen Gledhill would be the person to speak to.
- Innovations
 - The group discussed innovative ideas that the surgery are already using e.g.: online booking and prescription request, email, text messages to patients, PPG, Facebook and twitter. There was also discussion on future ideas, e.g.: electronic prescription service, extending the use of email, access to patient medical records online, Information TV in the waiting room.
- Patient experience
 - Time out Café
 - Dhruv explained how the Time out Café works and praised the benefits of it. Rosie to get some leaflets to display in the waiting room
 - Lungs Aloud Singing Group
 - Dhruv explained about the Lungs Aloud Singing Group. The treatment room dies have posters displaying this but Rosie to get some leaflets to display in the waiting room.
- Looking ahead
 - Managing our own conditions/Healthcare close to where we live/help in the community
 - The group felt that patients don't manage their conditions without GP/Nurse assistant like they used to in the past. The Choose Well Campaign that ran last year was a good idea and it was suggested that posters should still be used to encourage patients to think about self help and asking a pharmacy before they see a GP
 - Rushmore Healthy Living, Lungs Aloud and Time Out Café – information made available to patients/posters in waiting room. Rosie/Lorraine to action
- Electronic Prescriptions
 - A new electronic prescription service is now up and running for some Surgeries and Pharmacies. The idea is that the patient requests, surgery completes and pharmacy

completes the request for medication electronically. Southwood are looking to start this service in November 14.

- CQC
 - Southwood was one of the first in the area to have a CQC Inspection. Due to changes in the way inspections are carried out the team are revisiting all the Practices again.
 - The inspection team may want to speak to members of the PPG and the group have agreed to being contacted if needed either by telephone or email.

AOB:

FFT – Friends and Family Test in General Practice

Rosie explained the FFT, and that we need to gather information from 1 question with specific answers. The group agreed that we would add this to the annual survey.

Feedback on Flu Clinic on 4/10/14

Lorraine passed on there were many compliments voiced on the day about the excellent service and smooth operation and organisation of the annual flu clinic on Sat. Those at the meeting agreed it is a good format and well executed. A good community experience.

Boots Vantage card

We have been made aware that patients signing up for a boots advantage card are automatically being signed up for the electronic prescription service, which will override an agreement with another pharmacy.

Practice Newsletter

The Practice would like to produce a newsletter; however we have been unable to put something together for sometime due to the amount of work in surgery. Lorraine asked if anyone would be interested in compiling a newsletter. Penny has agreed to have a look at doing something. To be continued at next meeting