

PORTER BROOK MEDICAL CENTRE

PATIENT PARTICIPATION GROUP MINUTES

Thursday 20th August 2014

Present: Susie Uprichard Practice Manager & Business Partner
 Janice Ellis Patient Services Manager
 Dr Gurjit Barn GP Partner
 Shirley Theasby Practice Nurse
 Raza Hussain
 Tim Nelson
 Eileen Nelson
 Jenny Bristow

1. Apologies	Actions
<p>Apologies were received from Kirsty, Katie, Charlie and Steve with thanks.</p> <p>Unfortunately, due to ill health, Leslie, who has been part of the Group since it was set up in 2011, will no longer be able to attend meetings. The Group would like to formally record their thanks and appreciation for the contribution he has made and send their best wishes.</p>	<p align="right">Janice</p>
2. Minutes of the Last Meeting	
<p>The Minutes of the meeting held on 10th July 2014 were accepted as an accurate record.</p>	
3. Matters Arising	
<ul style="list-style-type: none"> • Visit to Parliament - Following the suggestion made by Charlie, Jenny, who has recently received an email circular, has volunteered to find out more about how interested members of the Group/Practice could get involved in the next visit, which she believes to be in February. • Queuing line at the desk – Tim suggested that we trial a large sign stuck on the front of the desk at the car park end directing patients to the queue. This may be obscured by the seating, but it was agreed it was worth a trial. 	<p align="right">Jenny</p> <p align="right">Janice</p>
4. Membership of the Group	
<p>Janice reported actions taken to recruit new members since the last meeting:</p> <ul style="list-style-type: none"> • Posters in the waiting room, on stairs and doors • Advert placed on our website and in the summer newsletter • Expression of interest forms on the front desk and in consulting rooms • All clinicians asked for suggestions for appropriate patients to contact • Letter and interest form now given out to every new patient registering with the Practice • 62 letters sent out to target groups (those suggested by clinicians and a random selection of 18 – 30 year olds, carers and new mothers). <p>Six expressions of interest have been received. Current patient membership is 7. It was agreed that the Terms of Reference should be amended to allow up to 15 patient members and all those expressing an interest invited to join. The Group would like to know if Craig is still happy to be part of the Group.</p>	<p align="right">Janice</p>

<p>Discussion of how to attract/involve underrepresented groups included:</p> <ul style="list-style-type: none"> • Virtual group via email – this had been tried when the Group was first set up and with the students but there had been little or no response. • Go out to community groups to recruit – since the members have to be patients and not all would be, this was discounted. • Shirley has contacts with the Student Health Association and offered to find out how they engage students. <p>We will continue to recruit and consider any further expressions of interest at the next meeting. Meeting dates will continue to be varied in the hope of attracting more people.</p>	<p>Shirley</p>
<p>5. Key Priority Areas/Action Plan</p>	
<p>A number of sources of patient feedback were considered:</p> <ul style="list-style-type: none"> • GP Patient Survey 2013/14 – recently published and commissioned independently of the Practice • Comments and suggestions book – comments entered in the book during 2014 (see summary at Appendix A) • One question survey – handed out to patients attending the surgery over a period of 1 week in August, as agreed at the last meeting (see summary at Appendix B). • Complaints – it was considered that most of these were patient/consultation specific and no trends were identified. • Friends and family test – due to be introduced in December and could be used to gain further feedback. The Group will give consideration to a question to be put on the form. <p>The following areas were picked for further consideration:</p> <ul style="list-style-type: none"> • Running late for appointments – complaint from all 3 feedback sources. It was agreed that the Practice would look at what data was available on this e.g. percentage of appointments running more than 10 minutes late, average waiting times, etc. • Continuity – from GP Survey/one question survey. Try to improve publicity on GP choice via newsletter etc. Make sure receptionists ask patients which GP they want to see when making an appointment. • Telephone system – improve ability to get through on the phone - from Comments and Suggestion book. The Group would like data from the new phone system on number of calls taken, waiting time, etc. • Magazines – from one question survey and previous patient survey. We need to check if we are able to have in the waiting room – possible infection control issue. • Choose and Book – concerns regarding reliable implementation of the system. Some patients may not be aware of the ability to choose. There is a plan to move to an electronic referral system. • Texting test results – to save patients ringing in when results are normal. This would be helpful for patients and free up the telephone system. Consideration would need to be given to consent and confidentiality. 	<p style="text-align: center; vertical-align: middle;"> Susie/Janice to discuss with Adam (IT Manager) </p> <p style="text-align: center; vertical-align: middle;"> Susie/Janice to discuss with Adam </p> <p style="text-align: center; vertical-align: middle;"> Janice </p>

<p>An action plan will be put in place at the next meeting when more information is available and new members have joined.</p>	
<p>6. Any other business</p>	
<ul style="list-style-type: none"> • The Group would like to thank patients for completing the one question survey and let them know that their suggestions are being considered and the Group will feedback when possible. This can be done with a poster on the PPG board in the waiting room, on the website and in the next newsletter. • Jenny asked about the arrangements for the extended breast screening programme. The Practice does not have a say in which patients are selected. Invites are sent from Screening Services. 	<p>Janice</p>
<p>8 Date of next meeting</p>	
<p>Thursday 2nd October at 6pm</p>	

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PATIENT PARTICIPATION GROUP

SUMMARY OF COMMENTS/SUGGESTIONS ENTERED IN COMMENTS/SUGGESTIONS BOOK 2014

- Failed on line prescription request x2
- Doctors and nurses running late
- Time taken to get through on the phone
- Cleaning in the waiting room
- Request for text message if doctor or nurse is running late
- Bicycle rack

PORTER BROOK MEDICAL CENTRE**PATIENT PARTICIPATION GROUP**

The Patient Participation Group is looking for areas in which the Practice or the service we provide could be improved. Please take a minute to tell us **one thing (other than parking, which we are aware is an issue but are unable to do anything about)** that could have made your visit today better. **You do not need to give your name or any personal details.**

Comment:

37 responses received:

15 positive - examples:

- Always had a pleasant visit
- Everyone friendly
- Service is excellent – staff are amazing
- No problems with appointments or consultations, early and late surgeries good, environment ok

Summary of suggestions/comments:

- A display showing where you are in the queue to see the doctor
- Being able to see the same GP
- More Saturday appointments
- Leaflets on what the surgery offers
- See the doctor on time/running late for appointment/shorter waiting times x6
- Mental health referral lost
- Offer quick appointments – sometimes have to wait to get appointments
- Message service informing patients of earlier appointments (cancellations?)
- Easier contact out of hours
- Same day appointments x3
- Priority appointments for people who work
- Doctors to take bloods to save second appointment with nurse
- Magazines x 2
- Sign on Cemetery Road showing where to turn

- Podiatrist
- Door in a more prominent position/ sign to say where door is
- Bicycle rack
- Display a calendar