

Minutes of the Patient Participation Group Meeting held on 29<sup>th</sup> January 2015 at the Manby surgery.

Present:           Dr G Parker       L. Green (Chair)           R. Pettigrew       S. Pearce  
                  T. Claydon       E. Bonnett                J. Mahaffy        J. Trueman  
                  J. Caws           Jean West  
                  L Chapman (sec)

Apologies:       Vicki – has left the practice  
                  Bev – on holiday

Lynn Chapman took the minutes.

LG welcomed Jean West as a new member to the group.

Maria Olphert sent apologies.

LG said that there were three different websites ongoing at present but work should be finished by the end of Feb after a transitional period. Members all happy to have their name mentioned on website but no photos.

LG said that the wastage report had not yet been completed because of dispensary pressure which was ongoing.

SP to organise another flood defence meeting.

LG informed members that the new phone system was being installed on 18/19/20<sup>th</sup> February so there may be a few disruptions to the system but hopefully all would go well. Post meeting – new phone system now installed.

JT pointed out that only one online appointment could be booked at any one time. LC has, since the meeting, spoken to JT and informed her that this has been changed and any number of online appointments can now be booked.

JT also stated that more online appointments were needed to be prebooked at least 2 weeks in advance and also needed to be a link from the website.

Members also requested that a list of procedures be posted on the website explaining exactly what practice nurses, healthcare assistants and nurse practitioners do so as patient's can book appointments with the right clinician.

Leaving of messages on phones – LG said that it was not our normal policy to leave messages on phones but if this was put in writing, we would be happy to do so.

DNA's – report for next meeting. LC

Reception to actively update SMS consent etc. when patients arrive at the desk.

Medication not on repeat. Members felt that this was a waste of a telephone call or an appointment. LG stated that it is the way it has to be and we have to follow protocol. Dispensers are not allowed to make changes to medication or doses etc. therefore patients need a telephone consultation with either our Nurse Practitioner or a Doctor.

TC asked how many appointment slots were available per week and stated that there should be 70 slots/1000 patients. LG to look into.

JW stated that she always found the receptionists very patient and friendly under quite difficult circumstances.

Members asked for a timetable of Doctors for 4 weeks ahead. LG explained that this is what we would normally work to but because of sickness, holidays, locums not coming in etc. this had not been the case but hopefully we will get back on track.

Hand sanitizer audit – LG had done an audit on the use of the hand sanitizer at Manby and 15 people used on entry and 12 did not.

TV screens – New system has been trialled whereby the patient name will appear on the TV screen along with videos, announcements, practice news etc. More info will be available when purchase is agreed with management team.

JT said that she objected to being asked her DOB at the desk and it was agreed that DOB or address would suffice.

Extra clinics – LG stated that we were running Doctor and nurse clinics during the month of February for one month only between the 2 sites. We are also looking at extended hours and early or late opening times but a plan needs to be put in place.

JM – Once again, we had a brief conversation regarding the closure of Manby on a Tuesday and Thursday afternoon but LG asked if this could be deferred as this will always be an ongoing debate. LG to report on patient numbers at Manby and North Somercotes.

### **GP National Survey Results**

GP National Survey – LG went through the GP National Survey results (copy attached) and it was agreed that the results were favourable for our practice. LG stated that the government had posted out the questionnaires, with a reminder if the survey had not been returned. Bearing in mind the cost of postage, this would be a phenomenal cost to the NHS.

### **Summary of results**

Overall, patients find it very easy or fairly easy getting through to someone at the surgery.

The new telephone installation will ensure continued ease of access getting through to someone at the surgery.

The helpfulness of the receptionists at the surgery was overall very helpful or fairly helpful.

As most patients normally book appointments to see the GP or nurse in person or on-line, it was agreed by the group to publicise on-line booking with advertising campaign.

57% of patients did say they were able to get an appointment to see or speak to someone.

The convenience of appointments was either very convenient or fairly convenient.

The group agreed that the introduction of extended hours and the winter pressure plan Saturday opening would give more options with regards to convenience of appointment times.

The overall experience of making an appointment was either very good or fairly good.

When we looked at waiting times at the surgery, 39% waited more than 15 minutes.

It was agreed that the practice would highlight the need to keep to one 10 minute appointment, one problem.

Overall, patients were either very satisfied or fairly satisfied with the opening hours of the surgery.

The group did agree that again, introduction of extended hours and winter pressure would help give more options in respect of opening times.

68% of patients said that the surgery was open at a time convenient for them.

When asked about additional opening times, 72% said they would like to see the surgery open after 6.30 p.m. and 72% said they would like to see the surgery open on a Saturday.

Again, the group agreed that extended hours and winter pressure Saturday openings would help to increase availability.

Overall experience of the surgery was very good or fairly good.

Finally, 34% of patients taking part in the survey would recommend the surgery to someone who has moved to the area and 34% would probably recommend.

Generally, the group agreed that this was a very good recommendation for the surgery.

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Minor injuries – GSP stated that we could do certain procedures at the practice depending on nurse availability, but on the whole advised that patients attend A&E as we are not a minor injury unit. He stated that if someone rang the surgery regarding a suspected broken arm/leg etc. he would immediately advise to go to A&E based on medico legal requirements.

Dr Deaney will take over the cryo clinics in future but no clinics are currently available and Dr Parker will take over minor surgery clinics, but again, no clinics are currently available.

Members felt that receptionists should update the waiting room more often on waiting times as sometimes, they feel they have been forgotten about. LG advised that this would be possible on the new TV system and would appear on the screen.

Attendance Report – LC to do a report on how many patients the Doctors and Nurses have seen over a 4 week period and also how many items have been dispensed.

GSP stated that CQC had placed the Intelligent Monitoring figures for MMP in a public domain, which although 18 months out of date, had given the practice a bad report. GSP told members that for example, if a patient declines a flu vaccination it is coded as declined but as far as the CQC are concerned, this does not make any difference but we cannot force vaccinations onto patients. GSP said it was a very downbeat report and he would be discussing this with the CQC when we have a visit as these will be posted in the waiting rooms.

Time and date of next meeting – 9 a.m. Thursday May 7<sup>th</sup> 2015 at North Somercotes.