

HOLLOW WAY MEDICAL CENTRE

Notes of 2nd Patient Participation Group Held on Wednesday 14th January 2015

Present: Practice: Dr. Alison Maycock, GP
Chris Robinson, Practice Manager

Patients: Catherine Meats
David Hurn
Jenny Parker

Main points discussed:

1. Ways to increase membership of the PPG

It was agreed that this was a main priority. Since the last meeting Kate had drafted a leaflet setting out information about the group. The leaflet was discussed, and a few additions suggested, such as the inclusion of an e-mail address for the group, the offer of talking to a member of the group, reminding patients about the suggestion box in the waiting room, and putting the website address on the bottom. It was agreed that CR would update the leaflet and recirculate for final approval. Action: CR

Once the leaflet was finalised, David and Kate kindly offered to come to the surgery to hand out leaflets in the waiting room and tell patients about the group.

It was agreed that a supply of leaflets should be kept by GPs and nurses and can also be handed out by Reception. Action: CR

2. The use of IT to promote the group/encourage feedback

It was agreed that a separate section should be set up on the website for the Patient Group. This should contain general information about the group as well as surveys, reports e.g. CQC report, and Patient Participation Group notes. Action: CR

The use of Twitter was discussed. The practice had an account but hadn't really used it. It was agreed that CR would review the Twitter account and decide whether it should be reinstated on the website. It was agreed that any tweets received would be replied to within a reasonable time, say 1-2 days, as it was not possible to monitor this continually.

David asked how long messages received via the website or the practice e-mail address normally take to be actioned. CR said that this e-mail account was monitored daily by one of the practice administrators who would take appropriate action the same day. Any complaints received via the website or e-mail address are passed to CR to deal with. It was agreed that any complaints received should be acknowledged by the Practice Administrator the same day and the sender informed that the Practice Manager would respond shortly. Action: CR It was agreed that it would be beneficial for the website address to be added to correspondence routinely to encourage patients to look at it.

3. Waiting rooms

The practice is encouraged to identify improvements through feedback and discussions with its Patient Group. It was agreed to review the waiting rooms to identify any practical

improvements which might be made to make them more useful, comfortable and user friendly.

Ground floor waiting room

Blood pressure monitoring station

It was agreed to encourage better use of the patient weighing and blood pressure area in the screened off area in the corner of the waiting room. If patients take their blood pressure before seeing the doctor or nurse, this saves time during the consultation. It was agreed that the outside of the screens should contain only posters drawing attention to the blood pressure area, and not on other topics. The table and chair were moved round to offer more privacy for a patient using the BP machine and scales. More signposting will be incorporated on the screens, and the area will be checked for paper and pens more regularly. Action CR

David agreed to look at the instructions for the use of the BP machine and try to incorporate some diagrams which might make the instructions easier for patients to understand.

Action: DH

First floor waiting room

It was suggested that this could be made more interesting by possibly having some art work displayed, for example changing art work from local schools. CR and AM would raise this with the other GPs and if it was decided to pursue this idea, Kate agreed to approach local schools. Action: CR/AM then KM

Another suggestion was for a large TV screen display to be set up, with changing PowerPoint health presentations showing on it. If this worked, a similar screen could be set up in the downstairs waiting room. DH agreed to find out more information about how this might work from an IT point of view. There was a discussion about whether this could be used as a calling system, as our old patient call system had broken and had been removed. CR thought that it would probably not be possible, as it would have to integrate with our clinical software system, EMIS, who were unlikely they would allow access. DH said that he would look the company up and try to find out further information. Action: DH

CR and AM would discuss the suggestion of health information screens with the other GPs. Action: CR/AM If the screens were adopted, then the information currently displayed on noticeboards could be reviewed, and some of the wall space possibly used for other purposes or for topic based health information. It was agreed that it would be beneficial for members of the group to be involved in deciding and organising information to be displayed in the surgery.

4. Feedback from patient surveys, Friends and Family, etc.

There was a discussion about the various forms of patient feedback which are available, such as results of patient surveys, CQC reports, GP Profiles etc. These are available on the website in the Patient Group domain. CR also drew members' attention to comments made so far as part of the national Friends and Family Test whereby patients are encouraged to give feedback on their visit to their GP practice by either completing a form at the surgery, or visiting iwantgreatcare.org and posting their comments on line. There are currently 30 comments which have been posted and are available for patients to read.

5. Information for new patients

There was a discussion about what information is given to new patients about how to use the surgery, order repeat prescriptions etc. CR said that new patients are given a pack containing forms to complete, and various items of information such as a practice leaflet, and information about the Summary Care Record. Members were given a copy of the information pack to take away, and it was agreed that they should review this and this topic should be discussed at the next meeting. Action: All

6. Items for discussion at next meeting

It was agreed that items to be discussed at the next meeting included:

- Progress with PPG recruitment
- Follow up from items discussed at last meeting
- Prescriptions
- Welcoming new patients
- The idea of a medical topic based meeting

7. Date of next meeting

It was agreed that the next meeting should be held either on Wednesday 4th or Wednesday 18th March at 9.30 a.m. at the Medical Centre. David would send out an invitation using the new PPG e-mail address offering those 2 dates. CR would supply a list of PPG members' e-mail addresses to David. Action: CR

Chris Robinson Practice Manager