

Patient Participation Group – Wednesday 21st May 2014 Minutes

Present

Patients: Mrs S Packer, Mrs S Netcott, Mrs S Hodges, Mr and Mrs Addy, Ms S Baghirathan, Mr A Akbar

Staff: Dr J Parrott (GP), Mrs A Toumi (Practice Manager), Ms H Stewart (PA to the Practice Manager)

Apologies: Mr and Mrs Hinsley, Mrs H Durn, Ms N Evans, Mr G Monaghan, Mrs A Neate

Items discussed:

1. New members were welcomed to the group and everyone briefly introduced themselves.
2. **Agenda item raised by PPG member:**
 - **Support for those with dementia from Volunteer Bristol** – Ms Baghirathan introduced herself as both a patient at the practice and also an employee of Volunteer Bristol. She discussed the work that she is doing in this role, developing a project aimed at encouraging people with dementia to get involved with volunteering. Each participant will be paired with a volunteer mentor who can provide the support needed to undertake regular volunteering placements, including help in choosing the right placement. There are many volunteering opportunities, such as gardening projects, arts placements and holiday play schemes. The scheme is open to those who have a diagnosis of dementia, but also those who experience the symptoms of dementia. They are looking to recruit both volunteer mentors and people with dementia who would be interested in volunteering. Mentors will receive training, including dementia awareness if necessary, and will also undergo a DBS check (formerly known as a CRB check). Volunteer Bristol can cover travel costs. The scheme is funded for 12 months and is the only one of its kind in the country.
If anyone is interested, they can contact Subitha Baghirathan for further details at Subitha@volunteerbristol.org.uk or on 0117 989 7734.
3. **Agenda items raised by the practice:**
 - **Care.data** – This is a new NHS data extraction scheme which was discussed at the previous meeting (see minutes from 15.01.14). Hannah explained that whilst this was originally scheduled to commence in March, the launch has now been postponed due to significant controversy. We are now not sure when the launch will take place. Dr Parrott commented that there were some pilot schemes running in practices across the country to test the system, and that these would only allow coded information (such as diagnoses and test results) to be viewed, not free text such as GPs' records of consultations. If anyone would like to opt out they should do so sooner rather

than later, and can request an opt out form from reception or download it from the website.

- **Reviewing patient feedback** – Hannah detailed some of the required actions of practices that run a Patient Participation Group. Previously this has involved running an annual survey, discussing which topics to focus on, the results and the necessary actions with the PPG. Things have changed slightly this year, and the practice is now required to gather feedback from a variety of sources, identify three key areas for improvement and put together an action plan based on these three areas – this should be done in conjunction with the PPG. We should then update you on the progress of these actions and complete a report on the whole process in March which should be fed into and signed off by the PPG.

In order to achieve this, the following suggestions were made:

- The practice will review patient feedback between now and the next meeting in September. The main themes identified in the feedback will be sent out along with the agenda for all PPG members to consider. At the meeting we will discuss which 3 themes we feel are the most important, and agree on actions to take to improve in these areas.
- At the January meeting we will update the PPG on the progress of the action plan, and ask if anyone is interested in contributing to the final report. Anyone who is interested can pass their names to Hannah, and once the draft report is complete it will be sent out to these individuals for their contribution. All the replies will be collated into a final draft, and one of the contributors will be selected at random to read through and sign off the final report.

It was agreed that this was a reasonable approach to take, and so this is the plan we will take forward.

There was a question raised about the email group, and it was explained that this group offered an alternative way for patients to engage with the practice, with information and feedback forms sent out 4 times a year. It was suggested that it would be interesting to note how popular the different forms of feedback were, and it was agreed that it would be a good idea to gather information on this.

- **Friends and Family Test** – Hannah explained that this is a national initiative which will be rolled out across all GP practices towards the end of the year. It is a very short survey which asks patients about their experience at the practice. The main question asks whether or not you would recommend the practice to friends and family, then you will be asked for a reason for your answer, and details of who you have seen today. There are also questions about your age, gender and ethnicity – you will not be identifiable from the information you give. The practice is currently taking part in a pilot of the scheme, and you can take

part by using the touch screen computer situated just to the left of our reception desk. This will be in place for a few weeks.

- **Software upgrade** – Angela talked about our approaching clinical software upgrade. This is the software in which we record consultations, diagnoses, medications and all information relating to patients' medical records. It is a necessary upgrade, but may unfortunately cause a little disruption whilst we get used to the new system and smooth out any issues. It will take place on 23rd July, and information notices will be displayed in the practice and on the website to inform patients of what to expect. There was some discussion here of queues in the morning getting longer, and Mr Akbar felt that there was sometimes an issue with patients completing registration forms at the desk in the morning and holding up the queue. Angela said she was not aware that this was a regular issue, but would check the situation with reception.
- **Rebuild** – Angela reiterated that the change in ownership of the land has caused big delays in the process of purchasing the land, which are ongoing. The 2 main issues are the length of time the process is taking (as companies have been tendered to carry out the work and there is only a certain timeframe in which this can commence) and also the debt incurred – the practices are in discussions to address this. It is a very frustrating and stressful situation, and Angela and Jeff stated that further action may be necessary if there is no progress soon. There is support from the Council, CCG, NHS England, our local MP (Kerry McCarthy). The PPG members present expressed their disappointment and frustration at the situation the practices have been placed in, and agreed that they would support any further action that was taken.
- **AOB** – Mrs Packer raised the issue of difficulty getting appointments, but said that she felt using the online appointment booking system would be a help. Mr Akbar expressed his belief that if a patient has made the effort to come down to the practice first thing in the morning but all the same-day appointments have been taken they should be given an appointment for the next day. Angela and Jeff both sympathised but explained that this would not be possible, as it would only lead to a shortage of appointments for people coming down to book the following day. It was acknowledged that it is impossible to offer appointments in a way that suits everybody, and that whilst the number of appointments has increased over time unfortunately the demand for appointments has seen a greater increase. Jeff talked about work that the practice is doing to try and see more patients in a safe and satisfactory way. This will most likely involve more appointments with our prescribing nurses who can see common conditions and ailments, whilst GPs continue to see the more complex patients. Telephone consultations have increased in number, and it was agreed that these can be very useful. Ms Baghirathan commented that there were a large number of

community and charity organisations that can support people as well now, and mentioned the website Well Aware, which allows people to search for a particular service in a particular area – www.wellaware.org.uk. There was discussion of reception being more strict in insisting that patients see the Nurse Practitioner instead of a GP if their problem is one that can be dealt with by them – however Jeff commented that he would never ask receptionists to say no to a patient that wanted to see a GP, as there may be other reasons for their visit that they do not want to reveal to the receptionist.

Patients who do not attend their appointment and do not cancel do cause a problem. Text reminders help with this, and any repeat offenders are sent a warning letter and removed from the list if they continue.

It was suggested by Ms Baghirathan that information about the types of conditions that can be treated by the Nurse Practitioner could be displayed on the online booking pages – it was agreed that this would be a good idea and it will be looked into.

Thank you to everyone who came along!