## **High Street Surgery Patient Participation Group**

## Minutes of Meeting 16th October 2018

**Present:** Lesley Bruin, Gordon Sewell, Linda Kiff, Lesley Noble, David Siebert, Lyn Harden, Clodagh Tailford, Kerry Overton Healthwatch, Sherrie Halliday, Tracy Neave

Apologies received: Neil Coleby, Baz Bemment

## Matters arising:

**Review of minutes:** quick review of minutes as this is only our second meeting, first meeting was mainly regarding setting up the PPG.

**CCG meeting:** There is a PPG forum on 29<sup>th</sup> October which Lesley will be attending on behalf of the group. Tracy will check with the CCG exactly how many representatives are allowed at each meeting and report back to the group.

**Complaints:** Since the last meeting the practice has received two complaints:

 Patient kept waiting at front reception with only one receptionist at front desk. Patient had previously suggested to Dr Seehra there should be two people

Tracy explained to the group that we have recently changed the way in which we work with more receptionists 'manning the phones' at the beginning of the day due to the number of comments we have received about patients not being able to gain access through the telephones. Once the initial demand is met we now move a second receptionist to front desk and aim to have two people at this work station during busy times. However there are times we are unable to achieve this due to staff absence but we will continue to endeavour to have two receptionists on the front desk when we can.

• Patient requested information for travel vaccinations in April 2019 and was angry his request had not been acknowledged.

We normally do not acknowledge travel vaccination requests until they are being processed in a timely manner to ensure immunisation is achieved for the patient. Most vaccinations are necessary 6 to 8 weeks before travel so the nursing team would process the request and respond in the new year. We will review the process so that patients have an understanding of how we deal with travel requests.

There followed a discussion regarding appointments:

• Some patients do not like being asked for a reason for an appointment especially when it is for a 'personal reason'. Tracy and Sherrie explained that all practices in Great Yarmouth and Waveney are involved with Care Navigation, trying to get the patient to the right place and person. Receptionists all sign a confidentiality agreement when they are employed by the practice and are encouraged by the Partners to ask reasons for appointments. Sometimes patients will say it is 'personal' when it isn't and will slip through to see a GP for maybe a repeat prescription or sick note request: these could easily be dealt with by other members of the team. With the demand on GP appointments we need to ensure that we navigate the patient to the correct member of the team, so will continue to ask the reasons.

- One problem one appointment so the doctors will not continue the consultation if you present with more than one problem: again due to the lack of GPs we need to ensure that we can help as many patients as we are able to. We ask our patients to advise the reception team when they make their appointment that they ask for a longer appointment if need be. We will try to accommodate this.
- I never see my registered GP: it is very rare now that GPs have personal lists where a patient is assigned to one GP. Under the NHS Contract as a practice we are not obliged to offer you an appointment with a named GP and would expect a patient to see the GP who was offered to them.
- I phone in the morning and can't get an appointment, I ring back in the afternoon and there are no appointments left: sadly we only have a specific number of appointments to offer and if there is no appointment is available you would be offered a call back from a GP. We will be looking in to our appointment system to see if we can manage our appointments an alternative way. David suggested online booking, although we could increase the number of online appointments available.

Kerry encouraged the PPG members to communicate the 'news' from the meetings to the patients they know to help the practice ensure that patients are informed about the practice, the challenges we meet and how they can help us to all work together.

**Compliments:** None received by the practice, but the group felt that the Phlebotomy service was working very well. Sherrie confirmed that appointments are readily available to book.

**Booking-in screen:** The new screen is causing problems in that it is not so easy to use as the previous one and some patients have difficulty in using it. Also, you are able to see patient details – name and date of birth. It was suggested that the 'beep' be made louder to help patients realise they have been called in. David asked if there could be a hand gel dispenser nearby which will be arranged. Tracy asked if PPG members would consider coming in to help patients book-in using the screen.

**Patient survey:** Tracy distributed the MORI patient survey results, asking for the group to review the survey and for any contributions/thoughts next time for how the practice could improve on any negatives.

**POD prescription ordering direct:** The POD is new way to order repeat prescriptions by telephone and is a hub at the CCG where a team will process repeat prescriptions and deal with queries. A patient needs to register with the POD which makes the first contact with the POD seem quite lengthy but once this has taken place it is easy to order medications through. Leaflets are available and there is information on the website. Gordon said that the surgery's email is not on the leaflet. Tracy will feed back to the CCG who produce the leaflet.