

## **CLARENDON LODGE PATIENTS PARTICIPATION GROUP**

### **MINUTES OF MEETING 21/05/13**

**Present:** Michael Pearson (Chair), Brian Gould (Secretary), Maureen Hirsch, Kate Sayer, Anthony Cox, Martin Merson, Sally Jury, Sam Grover, Ann James, Bridget Winn, Emma Hadden (Reception Manager), Stephen Gallagher (Practice Manager), Dr Tom Harper (GP Partner).

**Apologies:** Gerald Haseldine, Ron Buyers

The Chair opened the meeting by welcoming back Sally as she was unable to come to the last meeting due to illness.

He stated that we had been approached by some practice patients wishing to know more about the PPG. One person had shown an interest after reading the constitution and it was agreed to invite him to the next meeting. **Action:** Chair

The Chair stressed that it was important to keep the total number of members of the core group to those agreed in the terms of reference. At present that stands at 12 patient members and up to three practice members. However patient members could still be recruited on a co-opted basis if they could assist the group in achieving its objectives. The Chair said that the primary purpose of the group was to enhance the work of the practice and ensure patient feedback was available to the CCG.

Members must not use the group to pursue single issues as the group had to reflect the needs and concerns of the whole patient population.

The reference group (to be discussed later) would enable an unlimited number of patients to provide feedback to the core group.

#### **Minutes of last meeting and matters arising**

The minutes were approved

The Chair informed the meeting that as the group had agreed to meet for just an hour and a half it would be necessary, in future, to restrict the agenda items to just one main topic. This topic would alternate between Practice based issues and then wider issues such as the CCG. Work-planning and projects would remain as a standing item. This was agreed and the Chair would invite a CCG board member to attend the next meeting. **Action:** Chair

#### **Meetings attended by members**

No-one present was able to attend the last CCG Patients group meeting but it was agreed that the Chair and Maureen would report to the Group regarding future CCG meetings they may attend.

#### **Work Planning**

**Practice/PPG Web Site** - Having talked to the web site designers Sam produced copies of two examples of web pages from other surgeries. It was decided to begin with a one page design which could be increased at a later date. Sam will bring a suggested design at the next meeting. Martin

hoped that it would be 'attractive and eye catching.' The Chairman thanked Sam for the excellent work he had done so far.

**Action:** Sam

**Reception areas observation report** – Sally gave a verbal report regarding the waiting areas and her talks with patients and found that:-

Lower waiting room – Plants are depressing – a more colourful artificial plant would be an improvement.

Magazines are of a very poor quality.

Patients would like a water dispenser provided.

Hand wash should be on opposite wall where it would be more visible.

Complaints of receptionist calling patients by their first names

Upper waiting room - Another hand rail needed.

Magazines poor

Better plants needed

Too many notices and they are too high to read.

Patients not aware that there was a toilet upstairs.

Hand wash needed.

The Chair thanked Sally for her work on this and asked if she could provide a written report to the Practice so that they could provide a response at the next meeting.

**Action** - Sally

There was also a discussion about the Practice premises and how they were not really "fit for purpose". The building which is of a considerable age has little parking space, no lifts and cramped reception areas. The Chair suggested that he write a letter to the appropriate authority on behalf of the PPG requesting that this issue be addressed. Stephen agreed to let the Chair have information on who to contact.

**Action** - Stephen

**Patients Reference Group** – There was some concern that the virtual PRG group set up by the Practice would not be able to continue because of lack of funding. The meeting agreed that it would be appropriate to ask the members of this group if they would be willing to join the new PPG. They could then form part of the PPG reference group as described in the Terms of Reference.

The group stated that they were committed to expanding this reference group in order to achieve a wide representation of Practice patients. Members agreed to recruit as many people as possible to this group.

**Action:** All

Stephen said that if the Chair could provide him with a form of words requesting PRG members to amalgamate with the PPG he would send this out using the PPG email list.

Emma said that there were lots of patients in care homes in the area who could be approached and suggested that , Samantha, the community nurse, would be the best person to talk to as she visited these homes on a regular basis. Stephen agreed to follow this up. **Action:** Stephen

**NAAP awareness week** The meeting agreed that the awareness week would be a good time to raise the profile of the PPG. The Chair suggested that fliers could be designed for GPs to hand out to patients following their consultation. The fliers would ask if the patient would be willing to join the PPG reference group through an e mail system so that regular feedback could be obtained. The Chair also suggested that a regular newsletter could be produced for reference group members. Anthony agreed to assist the Chair with this task. Sally was concerned about patients who had no access to computers. The Chair said that this would be taken into consideration and a system developed to cope with this issue. **Action:**

Chair/Anthony

**Appointment System** Dr Tom Harper , a partner in the Practice, was welcomed to the meeting and gave an explanation of the proposed changes to the appointment system. At the moment appointment slots were allocated with 80% book on the day and the remainder on an advanced book basis. It is proposed to change this ration to a 50/50 basis. When the 50% on the day capacity has been used up, patients will be triaged by the Duty Doctor to establish if they need to be seen and if so, by whom(nurse/GP). Ideally, if they needed to see a GP, the Duty Doctor would book with their usual GP, however, this could always be guaranteed. Some appointments that currently result in a GP appointment could be dealt with over the phone – e.g., medication requests. The objective was to use our resource smarter to the benefits of the patients and the practice. Emma felt that it will take two to three months to get the new system understood and adopted by patients and that the PRG could help in advertising this.

**Patient Questionnaire Analysis** – As Gerald was not present at the meeting there was no progress on this. Secretary to contact Gerald for an update. **Action:** Secretary

**Date of next meeting** Tuesday 25<sup>th</sup> June at 6.15pm

Next proposed dates Tuesday 23<sup>rd</sup> July at 6.15pm, 20<sup>th</sup> August 2013.

