

CLARENDON LODGE PATIENTS PARTICIPATION GROUP

NOTES OF MEETING 28/11/2017

Present : Michael Pearson (Chair), Ann James, Marcia Davis, John Pickering, Dorrette McAuslan, Maureen Hirsch, Stephen Gallagher (Practice Manager), Dr Oliver Lawton.

Apologies: Sam Grover, Martin Blows, Bridget Winn

Notes of last meeting

These were looked at by the group. There were no outstanding actions.

AoB

None

Meetings attended

Michael reported on the Healthwatch meeting he had attended with Bridget. The intention is to set up a standing conference for patient groups independent of other bodies. A steering group is to be chosen to organise this with another conference planned for February/March next year.

Dorrette reported on a meeting she attended about extended access. This was organised by the GP Federation who are hoping to win the contract to provide this service to patients in Warwickshire. The contract is worth £1.7 million over three years.

Friends and Family

Michael thanked Stephen for providing all members with the latest Family and Friends statistics.

These were the first ones produced following the introduction of the new system. These were largely favourable in support of the new system. Only four negative comments were received about appointments and not being able to book in advance. There were no complaints about the telephone system or getting an appointment if needed. Although early days, it looks like the major complaints about the practice (i.e the difficulty of getting an appointment by telephone) have been resolved.

Two complaints were received about the music in reception areas. John P agreed to sort out a playlist on a memory stick. PPG members agreed to submit songs or playlists to John.

Blood tests were also mentioned by a patient as difficult to get quickly. As only the two Health Care Assistants carried out these tests there was sometimes a long wait for patients. In future patients would be offered the option of going to Warwick Hospital for the tests. It was suggested that the next newsletter should explain the difficulties with arranging prompt blood tests.

Practice Managers Report.

The IAPT therapist has not yet started at the Practice. These therapists are not directly employed by the Practice. PPG members expressed concerns about the qualifications and competence of these practitioners.

Dr Loveder will be off for a year on maternity leave. She will be replaced by Dr Beswick.

The satellite surgery in Russell Street (Gainsborough Hall) has been supported in principle by the CCG and negotiations are proceeding.

The Nursing Home reminiscence programme will be continued as soon as the publicity is completed.

WiFi (an NHS directive) will be introduced into the Practice by 5 December subject to the infrastructure being in place. This network will be a public one and not secure.

Practices are being encouraged to cooperate within place based teams. Clarendon is linked with Cubbington and Sherbourne. It is hoped that community, hospital and primary care services will

achieve a level of integration leading to better outcomes for patients. The PPG welcomed this initiative but we concerned that the patient voice might not be heard.

NHS Survey

The previous meeting decided to go ahead with an in house survey to mirror the one produced annually by the NHS. for consideration. The last survey results were disappointing for the Practice. Dr Lawton asked that the PPG be pro active in encouraging patients receiving the questionnaire to fill them in. A poor survey result could impact on the Practice financially. Stephen would like to go ahead with planning a survey of our own mirroring the NHS one. The PPG were keen to get involved with this. Michael will speak to Martin and Sam about meeting with Stephen to develop a plan. One idea would be to send out a PPG message by email to encourage patients to fill in the questionnaire by stressing how important it was to promote the Practice.

Extended Access

If the GP federation wins the contract for extended access then it is likely the service would be operated across six hubs. Decision about what services to be provided was a difficult one as SWFT, GP Federation and the CCG had different priorities. The commissioned service would operate in the evenings and at weekends. The PPG felt that it was important for patients to be involved in planning these services and for the PPG to promote the service within the registered patient list.

Demand led system feedback

The PPG questionnaire feedback had been successful and the patient comments analysed by PPG members. A brief report had been produced by Michael to assist the Practice in responding to the main concerns of the patients. A number of patients were unhappy about the call back arrangements feeling that there needed to be a more precise time given. Stephen said this was being addressed and two hour slots may be introduced shortly. Stephen produced a graph for the meeting showing predicted and actual demand. Currently the system is holding up well. Where pinch points show up action can be taken to increase capacity due to the flexibility of the system.

Dr Lawton described a typical day for the GPs. They now felt in control of their workload and now only seeing patients that needed to be seen. The conversion rate from number of calls received and number of patients seen was about 30% - a remarkable achievement. The Reception team were undergoing training to ensure that patients needs were met when telephoning the surgery. At present there were some slight inconsistencies which will be addressed in the training.

Stephen said that the system was under constant review and the PPG had an important role in feeding back patients views and comments.

Stephen was thanked for providing the mince pies!

Summary

The meeting identified a number of important tasks for the PPG in 2018 and the next meeting will need to plan a way forward on the issues:-

- Take action on the annual NHS survey by encouraging patients to fill in the questionnaire and organising an identical questionnaire to be managed in house.
- To be involved in the extended access project and ensure patients views are canvassed and noted by the Federation (assuming they win the contract)
- To continually monitor the new system to ensure it is meeting patients needs and to encourage the use of the on line booking for a GP call back.

Meeting closed at 7.55 pm

Next meeting - TBA January 2018 (Michael to send out possible dates asap)