

**Rother House Medical Centre
Patient Participation Group Meeting
Wednesday 10th February 2016
18:30 Rother House waiting area**

Present: Elizabeth Dixon, Liz Skelton, Laura Fulcher, Russell Young, Heather Golding, Jane Vance, Peter Toozer, David Capron, Chris Strangwood, Annette Smith, Tom Ganner, Shelagh Williams, Linda Pollock, Dr Peter Hutchinson, Dr Cristina Ramos, Janet Spencer.

Apologies: Tony Jefferson, Dr Sam Khan, Dr Katharine King, Dr Tim Crook.

Minutes of Previous meeting:

The Minutes of the previous Patient Participation Group Meeting held on 21.10.16 had been circulated by TG. It was agreed by those present that they were an accurate record of that meeting.

Matters arising from minutes not covered in agenda -

Items for AOB (Chair to filter) -

Introductions: Some new attendees so everyone introduced themselves and their role in the group for the benefit of new members.


Introduction to Laura Fulcher – Lay Chair – Patient participation for South Warwickshire Clinical Commissioning Group governing Body.

Laura sits on the Governing Body and joined a year ago. She attended tonight's meeting as she is visiting practices to see what is being talked about at PPG meetings. Laura needs feedback from practices to take back to SWCCG. Practices can feed information directly to her or through Elizabeth. The CCG are running a 'Have Your Say Day' at end of March/beginning of April. Laura will confirm date.

Tom confirmed that patient engagement is important. We rely on feedback and it is important for us to feedback in turn on services. Patients can email Tom and Elizabeth with feedback.

Update from SWCCG PPPG (ED)

ED continues to send everything relating to the PPPG meetings to Tom for circulation. She is still attending the Gateway meetings and is leading a new sub group for the CCG and 111. LF mentioned that if there is any particular issue or service that patients want to get involved in let LF know. The CCG has the power to get groups talking.

 16/6/16

Healthwatch Visit (ED)

The Practice had an 'Enter and View' visit from Healthwatch Warwickshire on 26th October 2015. The report can be viewed on their website:

www.healthwatchwarwickshire.co.uk

One of the actions to come out of the visit was that we didn't have a notice board for the Patient Participation Group. We now have two new notice boards, one of which is devoted to items of interest to the PPG.

LP mentioned she had a notice to put on the board.

We achieved a "good" in all domains.

Patient Engagement meetings (CR)

CR reported that a Patient Engagement meeting had been held at Warwick around GP services to give patients an opportunity to speak about community services. About 100 people had attended. People are keen to be involved.

Meetings will be publicised in the local media but patients have to book places.

HOPE TO SEE SOME ROTHER HOUSE PATIENTS THERE NEXT TIME.

Tom commented that Warwick Hospital are a provider of services, the CCG commission services and it is important they work together with the public to provide the services most needed. "Expert experience and patients' wishes are what makes it happen".

CR said it was set up by the local authority and the GP Federation to look at how we go forward with community services and to get a clear idea of patient expectation.

Online prescription ordering service (TG & JV) Update (Patient access)

The old online system for requesting repeat prescriptions has now been switched off following several months of prior notification. Despite this a few patients had said they didn't know about this so there have been a few teething problems but these are now tailing off. As Patient Access has been introduced it is necessary for patients to register to be allocated a username and password in order to use the system. JV commented only repeatable items are visible; If an item is not authorised by a GP Dispensary cannot authorise it; there is a free text box for any queries. JV said that although the EPS system is electronic it is not instant and patients still need to allow 48 hours notice before collecting a prescription. The request goes into the patient notes and then to a GP to be electronically signed off and sent to the Pharmacist. This does not all happen immediately.

HG had experienced difficulties when ordering for herself and then her husband. Tom thought may be a browser issue. Tom suggested coming out of system and back in again.

LP mentioned that at Rosebird pharmacy even when specifying only certain items required, she is being dispensed full items which she feels is a waste

 16/10/15

although she appreciated the pharmacist is being helpful. Tom will check up on this. CR says send message to all pharmacies as it was felt this is a widespread occurrence.

Tom commented that the old service involved a lot of manual interaction and there were security issues around it. With the advent of Patient Online Access to medical records there were Information Governance issues which necessitated protection with passwords. Tom feels the new system is safer and quicker and satisfies data protection and HSCIC requirements.

For patients with newer smart phones a patient access app is available via the itunes app store. Down loading this should allow access to booking appointments etc. whilst on the move. It is free to download and use.

Texting Services (TG & JV)

At the last meeting Tom talked about introducing the texting system. This was now up and running and Tom welcomes feedback on the service. At the moment a text is sent to confirm the appointment when booking. 24 hours prior to the appointment a reminder text is sent. Approximately 2 hours following the appointment, a request to complete a Friends and Family survey is sent.


In an attempt to reduce costs and make communications quicker texts may be sent in certain situations instead of letters. This is a dramatic cost reduction and is much quicker to transact. Letters will still be sent to those patients who do not have a mobile phone number on their records.

AS said had made an appointment a month ago and received first text one week before appointment which she felt was doubtful as to value as a reminder. Tom commented the first text is usually received shortly after booking as a confirmation of the booking. Occasionally if a change to the appointment book had been made by Rother House this may trigger another text.

SW asked if patients without smartphones are being disadvantaged? Tom replied that it is an option for those who have provided a mobile number as issues with confidentiality re answerphone messages would make it impossible for us to provide this service to patients without mobile numbers. Tom commented that the texting system was not a replacement for existing methods of contacting patients but that it did enable us to reach the younger population group who increasingly use smartphones as a preferred way of communicating, many not having land lines anymore.

We used the texting system for reminders re Flu vaccinations and this worked well.

There had been some confusion in the early days of introducing the system about whether appointments were at The Branch Surgery or Rother House but this problem was quickly resolved.

 16/6/16

It is important that our records of patients' mobile telephone numbers are kept up to date so please let Reception know of any changes.

GP Workload pressures as published in media (AS)

AS had requested this as an item as following negative media presentations re NHS Services, she wondered if the Practice had any burning areas of concern about services generally regarding GPs being under pressure and not getting new GPs coming into the profession and what can the PPG do to help?


PJH replied that the biggest problem is the increasing elderly population. Patients on 4 or 5 medications with multiple problems are difficult to see in a 10 minute slot. He said that realistically, putting more money into primary care – nurses etc could help. Pressure also arises from huge amount of admin patients generate and GPs regularly spend weekends working to catch up. (LP commented that patients used to be able to book double slots. CR commented that this has been thoroughly reviewed and doesn't work). CS felt that Community based services could do more to help with the elderly. CR agreed that looking at how we work with communities and providers is way forward. She added there is no simple solution. We have tried to protect ourselves and are better staffed than other surgeries. Patient expectation has become the biggest problem over recent years. Media have negative campaign against GPs.

ED – suggested more of a triage system for elderly people.
CR said this already happens in the community. A lot of things in NHS have for years relied on goodwill.

PJH – Baseline number of GPs is going down. Jeremy Hunt's new contract means Junior Drs will take a significant decrease in pay if they come to work in General Practice. They will still put in 45 – 50 hours a week + educational time and their income will decrease by one third under the new contract.

PT asked if Practice has capacity for more patients?
Problem is revenue and yearly cost of rental for these buildings. Rother House does not have the option to extend the building any further. Restrictions because of tree preservation orders etc. PT suggested targeting younger patients groups to register. Tom replied that the new 'Out of Area Registration system' can have an impact on attracting younger patients as they may work within the practice area but live elsewhere. This helps provides better services to this group of patients.

JV mentioned from a Pharmacy point of view patients attend GP appointments with lots of minor ailments which the Pharmacist could help with.

 16/6/16

PJH replied that he didn't get a lot although there is often a high expectation for antibiotics especially from patients from different cultural backgrounds who are used to being able to buy antibiotics over the counter.

Tom summed up by saying that Rother House is passionate about providing a high quality service, and are well engaged in meeting the challenges of increasing numbers of patients. Many with increasingly complex health needs within a generally static financial backdrop. The appointment of a number of apprentices has helped us to provide better phone answering and reception services.

Tom re-iterated that Laura Fulcher is the link into the Governing Body where decisions get made. He encouraged everyone if there is anything we need to be looking at to let us know. We welcome opportunities to do things better.

AOB:

LS and RY made some very complimentary comments about the Practice and all the staff and made comparisons to previous experiences at their previous practices.


SW had received a comment that a patient didn't like the music played in the waiting room. Tom responded that it is difficult to please everyone but it is necessary to have the background music as it helps provide greater confidentiality at the Reception desk. Rother House does try and alternate different radio stations and styles of music so that it is not always the same.

HG said there had been a mention of our car park on the Stratford Upon Avon Forum Group Facebook page to do with LPS. Tom stated that we own the car park but it is managed by LPS. No staff are allowed to park here except for the Duty Dr, late nurse and late Receptionist, all other staff park off site. Rother House does the best it can within the constraints of the limited spaces available.

It was asked if a Dr is running late could a message come up on the waiting room screen. Tom explained this wasn't possible but the Receptionist can tell you if a Dr is running late and can issue an extended car parking ticket if necessary. A new checking in system is in the pipeline and it is hoped that this facility will be included.

HG asked about the land between the car park and the building site. Tom said it is part of the new site and plans are for a small grassed area with a seat – a 'Pocket Park' It is unlikely that this will happen until the whole site has been developed, so could be a year or two before completion.

JV asked about the number of newsletters required to be printed. It was agreed that one for the notice board was sufficient as it is available on line. However, paper copies would be provided on request. JV is preparing the next newsletter

 16/6/16

and the PRG would like to thank her for doing this. LP suggested that we should blow our own trumpet more in the newsletter.

Date of next meeting Wednesday 1st June 2016 18.30 to take place before SWCCG PPPG meeting.

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