

**Walderslade Patient Participation Group  
Minutes of Meeting 11 June 2015**

**Present:**

Cynthia Shaw (Chair)  
 Julie Sabin  
 Barbara Sabin  
 Jean Gibb  
 Kevin Doyle  
 Pat Gregory – Patients Liaison / Communications Manager  
 Jayne Hackleton – Practice Manager  
 Dr Andrea Ward  
 Steve Hanstock  
 Philippa Law  
 Christopher Corker  
 Margaret Dennison  
 Jane Love  
 Iris Higginbottom  
 Karen Gallagher - Administrator

1.	<p><b>Apologies –</b></p> <p>1. Linda Bond, Susan Donnelly, Richard Welburn (resigned membership of PPG on 29 May 2015).</p>
2.	<p><b>Matters Arising from previous meeting held 12 March 2015:</b></p> <p>CS opened the meeting and welcomed all new members.</p> <p>1. Item 3.1 CQC Inspection Report – A copy of the CQC inspection report was sent to all PPG members and is currently displayed in the surgery and on the website.</p> <p>CS took the opportunity to thank all those involved in achieving a ‘Good’ outcome.</p> <p>2. Item 5.1 Did Not Attend (DNA) appointments - JH provided the latest statistics for one month (20 working days). The June 2015 surgery newsletter highlights the number of DNA’s and quantifies the GP and nurse time wasted due to these. Measures the practice is taking to reduce the number of DNA’s were discussed.</p> <p>Pat Gregory will continue to monitor DNA’s and gather feedback from patients. Statistics will be reported back at the next PPG meeting. <b>PG to action.</b></p> <p>3. Item 6.1 PPG meeting times - JH confirmed that future meeting will be arranged at different times of the day to enable all group members to attend. 2016 meeting dates will be confirmed at the next PPG meeting.</p> <p>4. Item 9.1 on street parking (Highcroft) - CS provided details of correspondence following her request to the local highways authority to consider the installation of double yellow lines to prohibit parking/waiting in the interest of pedestrian safety.</p> <p>Despite numerous letters, the highways authority concluded that a Traffic Regulation Order (TRO) would be required in order to legally enforce a waiting restriction on Highcroft. Unfortunately the highways authority confirmed that they did not have the funding resources to implement a TRO. They confirmed that the issue of vehicles parking on the pavement and causing a danger to pedestrians</p>

	<p>was a matter for the police to enforce control.</p> <p>After some discussion it was agreed that Kevin Doyle and Philippa Law would lobby local Councilor's to seek their support in perusing a TRO. KD and PL are to report back at the next meeting. <b>KD and PL to action.</b></p> <p>5. Item 9.2 Installation of pedestrian gate adjacent Cohen's chemist – this item was deferred to a future meeting.</p> <p>6. Item 11.4 Doctor to answer a question regarding the practice policy on prescribing statins – In response, attending Doctor Ward outlined the policy produced by the National Institute for health and Care Excellence (NICE) and confirmed the current guidance on risk factors and statins. However she stated that medicine management was also at the discretion of the General Practitioner in consideration of other medical conditions and the benefits to the patient. The PPG member who raised the question was satisfied with the answer received.</p>
3.	<p><b>CQC Barnsley Hospital NHS Foundation Trust Listening Event (JH)</b></p> <p>1. This item was for information. JH outlined this forthcoming Care Quality Commission event which is scheduled to take place in Barnsley on Monday 13 July 2015. Notices are displayed in the surgery or for further details visit the CQC website <a href="http://www.cqc.org.uk/content/listening-event-barnsley-hospital-nhs-foundation-trust">www.cqc.org.uk/content/listening-event-barnsley-hospital-nhs-foundation-trust</a></p>
4.	<p><b>CQC Inspection and Report (CS)</b></p> <p>1. This item was covered under item 2.1 above.</p>
5.	<p><b>Staff Update JH)</b></p> <p>1. JH confirmed the following:</p> <ul style="list-style-type: none"> <li>• Doctor Lockwood will be leaving the practice and the Barnsley area in September 2015.</li> <li>• Doctor Cartwright-Terry will be on maternity leave from 18 June 2015.</li> <li>• Two new doctors have been recruited to improve patient access to more GP's. Doctor Olasimbo and Doctor Ness will start in post in August and September respectively.</li> <li>• A new Health Care Assistant, Catherine Lowe started in post on 25 May. This gives the practice a full complement of nurses and HCA's.</li> </ul>
6.	<p><b>Friends and Family Test – feedback (JH)</b></p> <p>1. This ongoing NHS (England) initiative is for patients to complete a simple card questionnaire which asks, in their experience, how likely they are to recommend Walderslade practice to friends and family if they needed similar care or treatment.</p> <p>The questionnaire is available on the surgery website, hard copy in the surgery entrance lobby and is being sent out as a text message following a patients' appointment. However the number of questionnaires being returned is falling.</p> <p>JH advised that overall responses from patients were positive. Examples of recent comments were dictated to the group. The negative issues highlighted in responses are constantly being looked at.</p>
7.	<p><b>Review of Action Plan</b></p> <p>1. The group reviewed the following action plan points:</p> <ul style="list-style-type: none"> <li>• Did Not Attend (DNA) appointments.</li> </ul>

- Telephone Access
- Appointment Access

**DNA Appointments** – The Practice will continue a policy of contacting patients for feedback as to why they failed to attend their appointment. Statistics will be reported back at the next PPG meeting.

**Telephone Access** – Patient Partner (PP) is the new automated service which enables patients to book, check or cancel an appointment at any time of day or night without having to speak to a receptionist.

JH advised that the practice is currently trialing this service and, as with all new systems, there are 'teething' problems. Technical issues on sequencing calls directed to receptionists have been encountered and the practice is working with PP to resolve this.

The most common causes of a caller failed encounter with the system are:

- Callers' not waiting to 'confirm' their appointment (or action) at the end of the automated message.
- Unrecognisable patient details - in order to proceed through the automated system, the details entered by the caller must match those held by the practice i.e. up to date telephone contact details (mobile or landline) and correct date of birth entered. CS commented that the correct format for date of birth was required i.e. DD/MM/YY.

JH provided statistics showing appointment availability and caller access over a one week period. Overall a high percentage of callers / patients are using the system successfully.

From the statistics, 28 patients had cancelled their appointment. The facility to cancel without having to speak to a receptionist will hopefully help reduce the number of DNA appointments.

170 appointments were 'not found by the system' – JH will confirm the definition of this statistic.

To ensure that callers get the right appointment the practice proposes to make more pre-bookable appointments available via the automated system. This will be on a trial basis and the effects will be monitored. JH will report back with details at the next PPG meeting. **JH to action.**

A member of the group asked about the call charge for using the system. JH confirmed it was at a 'local' rate.

**Appointment Access** – Improvements to accessing appointments are anticipated with the recruitment of two GP's and the new HCA.

A member of the group asked about Patient Online Access. JH advised that in addition to Patient Partner, patients are being encouraged to use this on line access to book an appointment, order a repeat prescription and view their medical records. Information and details on how patients register for online access is being promoted in the surgery and on the practice website.

JH confirmed that a patients' consent is required for each service they register for

	<p>i.e. online patient access and the MJOG messaging service. This is to protect patient data and confidentiality.</p>
8.	<p><b>Voice Connect – Patient Partner</b></p> <ol style="list-style-type: none"> <li>1. CS reported that she had received positive feedback from those she knew had used the system; it had worked well.</li> </ol>
9.	<p><b>Walderslade Surgery Newsletter (JH)</b></p> <ol style="list-style-type: none"> <li>1. A member of the group asked if future newsletters could be printed in either yellow or green to assist reading by people with dyslexia. It was agreed that a laminated master copy would be available in green.</li> <li>2. JH advised that a newsletter would be produced every month on the last day of the previous month. If PPG members have any item for inclusion please forward to Karen Gallagher or Pat Gregory by the third week of the previous month.</li> </ol> <p>A member of the group asked if the parking issue on Highcroft could be included in the July issue. <b>JH to action.</b></p>
10.	<p><b>CCG Celebration of Patient Reference Groups Event – Feedback (PL)</b></p> <ol style="list-style-type: none"> <li>1. Two members of the Walderslade PPG attended this event held by Barnsley CCG on 3 June 2015. Feedback was that the event was useful and, after discussion with other members at the event, PL felt that the Walderslade PPG was working very well in representing and supporting its patients.</li> </ol> <p>PL commented that general confusion about the names ‘Patient Reference Group’ and ‘Patient Participation Group’ was discussed at the event and it was agreed that in future groups in the Barnsley area would be referred to as Patient Participation Group (PPG).</p>
11.	<p><b>I Heart Barnsley – Improving Health, Equality, Access, Responsiveness and Treatment in Barnsley (JH)</b></p> <ol style="list-style-type: none"> <li>1. JH advised that Barnsley Clinical Commissioning Group (CCG) is currently working with GP’s in Barnsley to bring plans detailed within the Prime Ministers Challenge Fund bid to life as part of a twelve month pilot project.</li> </ol> <p>One of the areas being developed is the amount and type of GP and nurse appointments available to patients. Plans are to do this by offering more bookable routine appointments outside of normal practice hours (evenings and weekends) at two locations across the borough as well as offering different ways to access these additional appointments.</p> <p>The CCG is seeking feedback from the public and a questionnaire is available to complete and return to NHS Barnsley CCG. Hard copy questionnaires are available in Walderslade surgery waiting rooms or alternatively patients can choose to fill it in online by visiting <a href="http://www.barnsleyccg.nhs.uk/get-involved/consultations">www.barnsleyccg.nhs.uk/get-involved/consultations</a></p> <p>Questionnaire ‘Equality Monitoring Form’ - PL commented that the age ranges on the hard copy of this form were incorrect. This had been pointed out to the CCG and amended on the online version of the form but not on the hard copy. All to note.</p> <p>The results of the questionnaire survey will be reported back to the PPG when available.</p>

12.	<p><b>Barnsley Shared Lives; Raising Awareness (JS)</b></p> <ol style="list-style-type: none"> <li>1. A member of the group gave a short presentation about the BMBC Shared Lives service. Hard copy information packs were handed round the group. PG will circulate information to Walderslade staff and clinicians to raise awareness of the service.</li> </ol> <p>Barnsley Shared Lives is a service provided by individuals and families across Barnsley who wants to offer a person with a learning disability a short break or longer term care in their home. It can also support adults with a learning disability to access other services including day opportunities and outreach services.</p> <p>The service aims to provide a nurturing family environment where Shared Lives carers enable people to fulfil their potential. This can be within the family home and by accessing the local community.</p> <p>There is a charge for the service depending on the level of support and guidance the individual needs. Charges are means tested.</p> <p>The selection process for carers is similar to the fostering application process and can take up to 6 months to complete. Shared Lives carers must undertake mandatory training as part of their ongoing assessment and employment.</p> <p>For further information visit <a href="http://www.barnsley.gov.uk/sharedlives">www.barnsley.gov.uk/sharedlives</a></p>
13.	<p><b>AOB</b></p> <ol style="list-style-type: none"> <li>1. Patient Council – MD advised that she will continue as a member of the Patient Council and will represent Walderslade surgery. The Council holds informative sessions with various organisations giving presentations. MD will report back to the PPG with any relevant information.</li> </ol> <p>MD was thanked for her representation.</p> <ol style="list-style-type: none"> <li>2. A member of the group asked if the practice had an ECG machine on site. JH confirmed that there is a new machine and members of staff are awaiting training.</li> <li>3. A member of the group commented on health and social care services promoted by Rotherham Hospital. Health care professionals visit local communities to provide information and raise awareness i.e Alzheimer’s or post stroke. CS asked if similar services would be beneficial to the practice. After some discussion it was agreed that this was already being implemented with many services booked into the practice i.e. Alcohol Awareness Day 18 June.</li> <li>4. A member of the group asked if the practice was implementing the Electronic Prescription Service (EPS). JH advised that the Practice intends to go live with this in September; however it should be noted that not all drugs can be issued in this way.</li> </ol>
14.	<p><b>Future meeting dates:</b></p> <ol style="list-style-type: none"> <li>1. Thursday 17 September, 2015. 10.30am at the surgery. Volunteer to chair required.</li> <li>2. Thursday 8 December, 2015. 2.00pm at the surgery.</li> </ol>