

**Walderslade Patient Participation Group  
Minutes of Meeting 23<sup>rd</sup> October 2014**

Present:

Rev Dennison (Chairperson)  
Cynthia Shaw  
Kevin Doyle  
Philippa Law  
Gordon Sinclair  
Valerie Beeson  
Jane Love  
Christopher Corker  
Dr J Lockwood  
Dr G Taylor  
Jayne Hackleton – Practice Manager  
Pat Gregory – Reception Manager

Apologies:

Richard Welburn  
Susan Donnelly

1.	<b>Apologies – see above</b>
2.	<p><b>Patient Feedback</b></p> <p>On the morning of Monday 8<sup>th</sup> September 2014, Cynthia Shaw a member of the PPG was present in the surgery to gather patient feedback on our services. The comments gathered were documented and formed the basis of our discussion during this meeting (copy of document attached).</p> <p>We discussed some of the comments in detail to explore whether or not any action can be taken, below are the outcomes:</p> <p><b>Agreed actions (You said – We did)</b></p> <ol style="list-style-type: none"><li>1. To display notices advertising room available for private discussions with a receptionist. <b>Actioned.</b> We did discuss the possibility of having a screen to divide the waiting area from the reception desk but this is not feasible as the receptionist does need sight of what is happening in the waiting room.</li><li>2. Employ more reception staff to help with answering telephone and cover reception desk. The partners have authorised recruitment of additional staff. <b>Recruitment process has commenced.</b></li><li>3. Explore possibility of introducing direct lines to divert some of the calls away from the main number. <b>Jayne Hackleton to action</b></li><li>4. We acknowledge there is a problem with access to the practice and we have scheduled a practice meeting to discuss workforce issues and the appointments system (we need to make it clear there is no immediate</li></ol>

	<p>solution but we are looking at a long term plan).  <b>The meeting is scheduled for January.</b></p> <ol style="list-style-type: none"> <li>5. List of Doctors names and which room they occupy to be displayed next to the self check-in machine.</li> <li>6. Display notice to explain why the receptionist may ask what your reason is for requesting an appointment with the GP or nurse.</li> </ol> <p>There was some concern from members of the group that our reception team are not always consistent with their approach.</p> <p>A patient should be asked the reason for booking appointment every time the purpose of this is to help the receptionist decide:</p> <ul style="list-style-type: none"> <li>o The most appropriate healthcare professional to deal with the problem</li> <li>o The length of appointment required</li> <li>o The urgency (especially when a patient is booked on to the telephone list of a GP as this will help the GP prioritise his calls)</li> </ul> <p>Dr Lockwood reassured members of the group that there is a good reason for doing all of the above, it is not just the reception staff being nosey. The question is asked on behalf of the GP's, it is what they have requested.</p>
3.	<p><b>Practice Boundaries</b></p> <p>The practice was asked if we advertise our boundaries and whether or not we will be participating in the out of area scheme that NHS England is introducing.</p> <ol style="list-style-type: none"> <li>1. The practice boundaries are displayed in our practice leaflet.</li> <li>2. Participation in the 'out of area' scheme is optional and the practice has not made a decision whether or not to provide 'out of area' registration. NHS England planned that practices would sign up to this project with a view to starting in October but this has now been postponed until January. We are waiting for further instruction on how the practice will be expected to deliver the service before a final decision is made but it is most likely the practice will not participate.</li> </ol>
4.	<p><b>Are GP's receiving payment for patients no longer requiring the service?</b></p> <p>This question was asked by a member of group due to the information printed in the press about practices not notifying the local area team when it was known that a patient had either left the practice or was deceased.</p> <p>This is something that usually happens when patients leave the country as quite often the records are not recalled to be sent on elsewhere.</p> <p>We have a system in place at Walderslade where no records are held for patients who have notified us that they have emigrated. If records are not recalled they are sent back to the area team anyway, provided we know for definite that the patient no longer requires our service.</p>
5.	<p><b>Named Accountable GP</b></p> <p>All patients aged 75 and over have been informed of their named accountable GP. The letter is very clear about the patient having the choice to see any GP at their registered practice.</p> <p>The Named Accountable GP Scheme was a contractual requirement that NHS England enforced upon all GPs. The members we reassured that this scheme does not in any way affect the way patients receive their care at the practice.</p>

6.	<p><b>Can patients be struck off the list?</b></p> <p>Yes patients can be struck off the list. It was explained to the group that the only time this would happen is when a patient has been violent or abusive whilst on the premises or towards a member of the team. We do not tolerate patients who are violent and aggressive.</p> <p>The practice was asked if we have a defaulter's policy in place. We monitor non-attenders and those who frequently do not attend may be sent a letter to inform them they could be removed from the list if they continue to waste appointments.</p>
7.	<p><b>NHS Friends and Family Test</b></p> <p>In December 2014 it will become a contractual requirement for general practices to ask their patients to answer the question in the friends and family test.</p> <p>The standard question that all practices must ask is: We would like you to think about your recent experience of our service. How likely are you to recommend our GP practice to friends and family if they needed similar care or treatment?</p> <p>In addition to this the practice must ask one further question and we discussed what that question should be. It was agreed that the most appropriate question to ask is the reason the patient has given the answer they have given. It was also suggested that we ask patients for their suggestions about any improvements they feel could be made.</p> <p>We also discussed the best way to make the questionnaire accessible to the hard to reach patients.</p> <p>The questionnaire will be available:</p> <ul style="list-style-type: none"> <li>• In the reception area</li> <li>• Attached to prescriptions</li> <li>• In the reception lobby for those patients that do not need to come to the reception desk</li> <li>• Online</li> </ul> <p>Consider:</p> <ul style="list-style-type: none"> <li>• Asking the local pharmacies if they can hand out copies on our behalf.</li> </ul>
8.	<p><b>AOB</b></p> <p>.1 <b>EPS</b></p> <p>The Electronic Prescription Service is a system where prescriptions are signed and sent to the patient's pharmacy of choice electronically. There will be no hard copy of the prescription printed which will save resources and it will cut out the need for patients to collect their prescription from the surgery. We were asked by a member of the group whether we will be signing up for the EPS. The practice does not expect to introduce this service until next year.</p> <p>.2 <b>Dementia</b></p> <p>Over the last couple of days the media headline has been 'GPs will now receive payment for diagnosing dementia'. Members of the group were informed that our GP's and any other good GP will</p>

	already be diagnosing dementia or taking action on patients they consider to be at risk of dementia, regardless of payment.
.3	<b>Waiting Area</b> Members of the group were asked for their opinion on the new layout of the waiting room – positive feedback was received.
.4	<b>Patient Letters</b> A member of the group commented on the wording on a letter she had received from the practice and asked we would consider making an alteration to the template. It was agreed to rephrase the letter template to make it easily readable.
	<b>Date &amp; time of next meeting: TBA</b>