

PATIENT PARTICIPATION GROUP MEEETING

The Northolme Practice

Monday 14th January 2013

Present:

RC	AB
DB	DS
JH	JR
JA	PB
PG	DN
EM	KH
GR	

Agenda Items:	Decision/Agreed action	Action
1 Apologies:	MF, PH, PL, WM & AG	
2 Welcome and Introductions	Everyone introduced themselves and welcomed new members to the Group.	
3 Minutes from last meeting	Minutes agreed as being accurate reflection of the meeting	
4 Matters arising	<ul style="list-style-type: none"> • Text messaging service (See point 6 on agenda for discussion and action) • Practice telephone system (See point 6 on agenda for discussion & action) • The practice would like to thank the Patient Group representatives who volunteered to hand out Patient Survey Questionnaires and direct patients at the flu clinics. This had encouraged patients not only to complete the questionnaire, but also assist those who were unable to complete. This resulted in 602 completed questionnaires. 	
5	<p>Patient Survey Results</p> <p>Results of the survey had been circulated prior to the meeting.</p> <p>The Group discussed the patient survey report and agreed that the results clearly demonstrated, overall good clinical care from the practice.</p> <p>The Group felt that, whilst a number of issues</p>	Practice to review the

	<p>had been identified through the survey, it was not possible to address them all at this time. Therefore the Group agreed the following as the main priorities:</p> <ol style="list-style-type: none"> 1. Information and Communication. Sharing of information with patients. Provide patients with access to services and information. Initial proposals by the Group suggest Make better use of the screens and linear information display already installed in waiting rooms and recorded messages on the phone system giving information whilst a call is waiting to be answered. 2. IT technology Increase use of technology and multi media Use email to contact patients 3. Telephones & appointment system (also see point 6 on the agenda) Present telephone system outdated. Replace current telephone system to improve telephone access for patients. Survey indicated patients: <ul style="list-style-type: none"> ➤ Have difficulty getting through on the telephone at 8am and 11am. ➤ Pre-bookable appointments 4. Reduce DNA appointments (also see point 6 on the agenda) Challenge people who DNA (did not attend) their appointments (See point 6 on agenda) 5. Blood test results for patients. Patients would like to be able to receive the blood tests results via text message 6. Repeat prescription requests 	<p>current mechanisms in place to communicate with patients and incorporate advances in technology.</p> <p>Advertise and promote the above to patients</p> <p>Practice to review current use of IT technology and improve information available for patients and communication with patients. This includes text messaging, practice website, email, internal TV system, call board sign,</p> <p>Replacing telephone system.</p> <p>Practice to introduce and collect patient email addresses</p> <p>New telephone system to inform patients when held in a queue and incorporate messages & information whilst on hold.</p> <p>Additional telephone lines required to free up lines.</p> <p>Raise awareness, of pre-bookable appointments. Advertise and promote.</p> <p>To be discussed at the next Drs meeting</p> <p>Introduce text messaging service where appropriate Update clinical system to enable blood test results to be sent via text message</p> <p>Introduce system for</p>
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	<p>patients would like to be able to request repeat prescriptions online</p> <p>7. Wheelchair access & parking at Kos Clinic Currently the disabled parking space is at the opposite end of the car park to the ramp that runs to the main surgery door.</p> <p>8. Resurface road surface at Kos clinic.</p> <p>Parking – Whilst this had been identified as an issue from the survey, it was felt that given the location of both surgeries that little could be done at this time</p> <p>An action plan will be developed to support the above recommendations of the Patient Group. This will be shared with the Group for agreement.</p>	<p>requesting repeat prescriptions online</p> <p>Practice to add an additional disabled parking space at Kos clinic so that there is a space at both ends of the car park</p> <p>Work completed</p>										
6	<p>Text messaging service is working well and patients seem to like the service. “Did Not Attend” figures have fluctuated throughout 2012:</p> <table><tr><td>January 184</td><td>September 121</td></tr><tr><td>May 124</td><td>October 198</td></tr><tr><td>June 163</td><td>November 184</td></tr><tr><td>July 154</td><td>December 139</td></tr><tr><td>August 137</td><td></td></tr></table> <p>A reminder text message is sent at 1pm the day before the appointment</p> <p>Discussion: The Group felt the practice should challenge patients who DNA their appointments. Currently, this does not always happen. The Group felt that the practice should be more proactive in challenging patients as it was felt the number of DNA’s was not acceptable. This would be discussed at the next Drs meeting.</p> <p>Telephone system The present telephone system is out dated. Currently there are two incoming lines and two staff to answer the phones at each surgery.</p>	January 184	September 121	May 124	October 198	June 163	November 184	July 154	December 139	August 137		<p>To be discussed at Drs meeting</p> <p>Practice to consider replacing present telephone system</p>
January 184	September 121											
May 124	October 198											
June 163	November 184											
July 154	December 139											
August 137												
7	<p>Supporting Independent Living and Quality of Life A member of the Group expressed concern</p>											

	<p>over “peoples (including practice staff) inability to provide information and support to independent life and quality of life, due to “restrictive rules” imposed by PCT. Much of the information is readily available to the PCT, but “restrictive rules” prevent this being made available to practice staff and patients.</p> <p>Also, more information could be made available on the Practice Website to enable and support independent living and quality of life e.g. links to William Merritt Centre Disabled Living Centre and Mobility Service</p> <p>It was suggested that this would be an opportunity for members of the Group to feed this issue into the Calderdale Health Forum. The next meeting is due to take place on 16th January.</p>	<p>Practice to arrange a link on the practice website to the William Merritt Centre</p> <p>Additional practice representative to attend the meeting</p>
8	<p>Calderdale Health Forum</p> <p>The next meeting is due to take place on Wednesday 16th January. Three patient representatives from practice have volunteered to attend the meeting.</p>	
9	<p>Changing Health Campaign are looking for stories of real life examples that highlight how changes in health care and treatments are leading to better results for patients nowadays. They are seeking stories that really highlight the difference in treatments provided nowadays compared to 10 – 15 years ago</p>	
10	<p>News from the practice</p> <ul style="list-style-type: none"> • Flu clinic – to date 2,521 patients have had a flu vaccination. • Atrial fibrillation screening at flu clinics. Pulse checks taken at the flu clinics have identified a number of patients who have been diagnosed with the condition. Further details will be available at the next meeting. • Dr R will be going on maternity leave in April. • Christmas raffle. A total of £182.50 has been raised for Parkinson UK and Yorkshire Caner 	Update for next meeting
AOB	None	
Date of next meeting:	Date and time to be confirmed	