

**Minutes of Patient Participation Group Meeting 3 November 2011 @18.30,
Avenue House Surgery, 109 Saltergate, Chesterfield**

Present

Ian Anderson, Piushi Rawat, Derek Ashmore, Bill Richards, Clive Archer, Michael Crossley, Rita King, Bernadette Joynes, Alexis Diouf, Katie Adams, John Ross, Janette Moran.

Attendance

Janette thanked everyone for attending

Minutes

The minutes from the previous meeting were agreed as a true record.

Aim of this meeting

The aim of this meeting was to format a group structure, in order that the group become independent, autonomous. The first step was to nominate and elect a Chairperson, John was nominated and elected, however it was stated that the group could rotate the position. The group felt they were not yet ready to decide upon a Secretary.

It was decided that the “core group” should consist of between 12 – 15 members who would be able to call on the services of a wider more diverse population (virtual group) when the situation required.

It was agreed that members of the “core group” would carry out a patient questionnaire based on the group’s priority issues. The questionnaire would be carried out by members of the group doing face to face surveys in the surgery waiting room.

Review of Initial Points Raised and their Priorities

- Reception – issues of privacy and potential for change were discussed. It was agreed that this was not on the list of highest priorities and the practice was restricted in what alterations could be made without adequate funding.
- Future of the Practice – The group agreed with the central ‘mission statement’ of the practice and felt that the practice should publicise this material as much as possible. The group very much valued the ability to quickly access appointments and continued care from a ‘family doctor’ as opposed to a large impersonal building with little continuity of care. Dr Anderson noted that the practice had indeed faced threats over the last few years from surgery ‘new builds’ and the mergers of practices within the locality. The group members felt they would like to be involved in the

future strategic development of the practice and local health services and this was a definite priority area.

- Opening Hours – Janette discussed the current opening hours and explained that extended hours were based on practice list size and that the practice should provide 5 hours per week extended services which were done in the following manner: Monday evening 2 hours, Tuesday, Wednesday and Thursday morning 1 hour each. The general opinion of the group was that patients were happy with the opening hours, this being reflected in the patient survey which indicated 87% were happy with these hours.
- Patient Education – the group discussed ways in which the practice could educate patients about the importance of informing the surgery when unable to attend an appointment. A considerable number of appointments were wasted each week when patients failed to attend. Information could be passed on by using the repeat side of the prescriptions, utilising posters in the waiting room, putting information on the website and distributing via free papers. It was also noted that some posters in the waiting room were out of date. Methods such as the use of Television screens in the waiting room were also discussed.
- The Telephone System was discussed members felt that the message was not as clear as it could be this may be due to the wording of the message. The ability to get through on the phone was variable. Members also said they were not happy to be asked what was wrong and they would feel happier if staff asked if they felt that their problem could be dealt with by a Nurse Practitioner.
- Test results – It was stressed that when staff tell patients test results the doctors have seen the results.
- Prescriptions –Members felt that they would prefer repeat prescription reviews to be done while the patient was present. Some members had experienced problems with errors on their prescription whilst others were happy with the service. It was felt that being able to order prescriptions via e-mail was useful.
- Annual Reviews – The group indicated that they would prefer annual reviews to be synchronised in order to cut down on visits to the surgery.
- Dentistry – There is no room in the surgery for a dentist.
- Continuity of Care – This was discussed in relation to the Community Matron, the group were assured that another part time matron had been recruited and would work the opposite shifts to the existing matron.

Janette explained that the Community Staff are not employed by the Practice so the Practice has limited influence over planning of these services.

- Car Park – Options available to the practice were discussed, several suggestions were put forward including approaching the Royal to see if it would be possible to park at Saltergate.
- Reception Queues – The group said that they did not like to be kept in a queue behind pharmacy staff picking up bulk prescriptions.

Actions

The following are to be included in a wider survey of patients:

- Future of the practice
- Increased awareness of missed appointments
- Telephone system and questions asked when patients ring in
- How patients would like to receive results
- Wider Prescription Service

The practice will begin to look at the following:

- Car Parking
- Annual reviews/ Health checks—look to synchronise

Date of next meeting

The group agreed that meetings should be bi-monthly on the first Thursday of the month the next being Thursday 5 January 2012 at 18.30