**NEWTON DRIVE HEALTH CENTRE**

**Patient Participation Group**

**Minutes of meeting held on**

**Monday 7th September – 18.00 – Library, Newton Drive Health Centre**

**Present:** Mrs Linda Endicott (LE), Mr Terry Bennett (TB), Mrs Donna Jackson (DJ),

Mr Mike Martin (MM)

**In Attendance:** Miss Caroline Butler (CB) Admin Manager/APM, Chris Casey (CC) Practice Manager

**Apologies:** Miss Vicky Greenwood (VG)

Mrs Karen Harris (KH)

1. **Actions / Feedback from Previous Meeting**

CC presented the numbers of patients who use the prescription answerphone service. Over a period of 3 months the practice received calls from approximately 650 patients. This represents 18% of patients who are currently on a repeat medication of which there are 3500. MM suggested this is a large proportion of patients who may be affected by this change is service. CC said the practice appreciated the volume of patients who would be affected but is doing everything to ensure patients find an alternative method to order, which may be more efficient for both the patient and the practice. Where patients are struggling to use an alternative system they can still order by telephone in the afternoon, as all the reception staff can process the orders. However, we are not currently advertising this as it is preferred, where possible, that patients use one of the other suggested methods – pharmacy services, online access or ordering at the practice. This information has been sent to patients who regularly use the answerphone service by post and is also on the answerphone voicemail message. We would have like to have discussed this proposal prior to making any decisions, with the PPG, however due to the short timescales involved and the business requirement to change we had to move forward with these plans.

The group checked the information that is published on the website in relation to fees for non-NHS services. This followed from a FFT comment reviewed at the previous meeting. There is information on the website regarding these services and the fees are included, however, it doesn’t make clear how to access these services. **Action: The practice will update the website to include how to access / request these services via the Practice Secretary.**

1. **New Actions**

The group discussed the change of name. There has been one suggestion tabled to change it to Patients Forum and another to keep the name the same. The reason for the change was perhaps to encourage engagement from patients. DJ felt that the current name may lead patients in to thinking that ‘participation’ was required and that a large commitment was needed as well as active involvement in the meetings, this may put some patients off being a member. LE felt the proposed name Patients Forum didn’t explain the role of the group as clearly as the current name. The group agreed that to change the name a unanimous decision was required and as long as the group had good membership and covered a range of demographics the group would continue to function effectively as it has done over previous years. What the group does is more important that what it is called. This agenda item will be suspended until there is further reason to readdress it.

The main phone line script will be amended this week with the inclusion of information regarding the prescription line. The script was agreed at a previous meeting.

CC gave the group information on some new changes to services and also some proposed changes that the practice is looking at. The practice has extended its opening hours from 08:00 to 18:30; this will include the doors being open and phones being accessible. Previously the phone for the first and last half hour of the day had been covered by the out of hours’ telephone answering service. The group agreed that this was a beneficial change for our patients. Our late evening surgery day has now changed to Tuesday for staffing reasons. It provides a longer clinic with more appointments and also means we don’t lose the extended clinics on a bank holiday.

The last suggestion was for a proposal of new triage times. The practice recently audited our activity and found many patients attempting to access triage over lunchtime when it is closed. It is closed as the doctors have visits to do over lunchtime. However, with the addition of a salaried GP it means we may be able to extend out triage times. LE stated that patients may not be aware of the triage system or understand what it means. The practice also felt that patients could be better informed of when and what to request triage for. The practice intends to advertise the service and include this information; it can go on patient prescriptions but needs to state in plain English what the service is. **Action: Practice to confirm any change to triage and advertise the service.**

1. **Any Other Business**

The following comments were received from Kevin Smith for discussion by the PPG. Kevin has recently been in contact with the practice. He has recommended changes to service on a couple of previous occasions. These changes have had a positive impact on patient services and the practice were able to implement these new systems. Since then Kevin has expressed an interest in participating in the PPG discussions but would be unable to commit regularly to attend meetings. As previously discussed at our PPG meetings we decided that having ‘health consultants’ who work with the PPG would be beneficial. As such KS will now be included in the circulation of the minutes. The suggestion was as follows;

*Regarding Childhood vaccination clinics -**We wondered if alternate week arrangements could be in place for this clinic?  We feel that looking at Weds am one week followed by Weds pm the next week would give added flexibility to parents who both work on that day.  With vaccinations, children can feel under the weather after them. We thought a pm clinic would allow parents to finish work early, pick children up from nursery and then return home with them.  In the morning, if childcare is in place, it can cause issues especially if the child ends up feeling poorly as a result of the vaccination.  Another thought was that if parents struggle with the am clinic, or even an alternate am/pm set up, could Newton Drive partner with another surgery in Blackpool that has a clinic on a different day?  Are there any other locations in the area parents can go to?  Having this information to hand when a parent calls in would significantly improve the options for working parents.*

*For some context - although we appreciate that having children means these things happen, neither of us work full time and have 3 full days a week we could attend for appointments.  Having at least some form of choice would help parents to maintain other aspects of life when planning ahead.  Just having the choice of pm would greatly improve this.*

As this was the first time that a patient had contacted the PPG in this way there was a short discussion of how best to respond to these suggestions. The group felt that the suggestions should be minuted and fed back to the individuals, by a member of the PPG. DJ volunteered to do this on this occasion, having already spoken with KS previously about the PPG.

The group discussed KS suggestion but decided due to the staffing constraints the practice would not be able to provide clinics on alternate days / times. They realised this offered little choice to patients as there are no alternative providers of this service. The group felt that exploring the idea of sharing clinics with other practices would be ideal but understood this would be a long term solution as there were many things to consider before this could be made possible. **Action: DJ to contact KS with response from PPG.**

TB gave a brief update on the status of patient participation network group and suggested that there have been some issues arising regarding the involvement of Healthwatch / Empowerment and that they are seeking to clarify the future of the group and any facilitation.

**4 Standing Agenda Items**

**Staff**

A member from both the administration and reception teams has resigned. The admin vacancy has been filled through internal recruitment and one of our current receptionists will take this role. We had two vacancies for reception and we have filled those and the new girls start their training this month.

The practice also had a salaried GP start at the beginning of this month.

**Patient Suggestions**

DJ read out the results of the most recent Family and Friends Test received via the reception box.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Extremely  Likely | Likely | Neither likely or unlikely | Unlikely | Very unlikely | Don’t know |
| 6 |  |  | 1 |  |  |
| 86% |  |  | 14% |  |  |

Again the practice had some very positive feedback which is pleasing. There was one negative review from a patient who had had difficulties obtaining a Fit to Work note. The group acknowledged it would be difficult to investigate without the patient’s details but felt that it was most likely down to a misunderstanding / misinterpretation between the practice receptionist and the individual patient. However the practice should consider publicising the process by which patients should expect to request a Fit to Work note and the group will continue to monitor the FFT suggestions, looking for any trends relating to requests for Fit to Work notes.

**Action: Practice to produce information relating to the process of Fit to Work notes, either via a handout of website link.**

**The next meeting was arranged for Monday 19th October 2015 – 18.00 at Newton Drive Health Centre**