**ST. THOMAS’ ROAD SURGERY**

**PATIENT PARTICIPATION GROUP**

**MINUTES**

**Thursday 5th March 2015**

**1. Present:** Dr. D. Roberts, Nick Brown, Practice Manager, Jan Power, Chairman, Christine Gill, Secretary, Margaret Roberts, Janice Cameron, Tony Lumb, Mick Clayton.

**2. Apologies:** Graham Isherwood, Dick Taylor

**3.** The Minutes of the previous meeting were approved as being a true record of that meeting.

**4.** Matters Arising: The Results of the Patient Response Survey were reviewed. Christine presented the results of the Survey, giving responses from 104 patients. Question number 2 which asked ‘Did you have to wait after your stated appointment time before seeing the Healthcare professional?’ gave the response of 52 people saying ‘yes’ and 50 people saying ‘no’ with 2 people not replying. There was concern as to why people had had this wait, and how long did they consider ‘long’. The notice screen asks people to enquire from the Reception staff why there is a delay if they have waited more than twenty minutes after their appointed time. It is possible that some patients arrive early for their appointment and therefore think they have been waiting longer after their appointed time than they actually have. However, it was agreed that the Reception staff should keep patients informed if there is a delay, explain the reason for the delay, (if possible), and keep them informed of any further changes. It was understood that not everybody can stay long after their allotted time, especially if they have to go to work or collect children from school. This problem would be looked at sympathetically.

**5.** It was agreed that a patient Newsletter should be produced in the near future. A discussion took place as to what should appear in the publication. We felt that patients should be made aware of the fact that, each time they visit the Accident and Emergency department of the hospital, the Surgery is charged a minimum fee of £55. Patients are not aware of this and it was felt that they should be advised only to go to A&E if it is an emergency, or as a result of an accident. It would seem that some patients are visiting A&E because they cannot always have an immediate appointment with a doctor. The use of the ‘Doctor Call-Back service should be widely publicised in an attempt to alleviate this problem.

Items for inclusion in the Newsletter could include staff changes, items by members of staff, ‘A day in the life of....’, useful contacts, notification of the web site and the web address.

Doctors’ specialities could be mentioned. Dr Alba now performs injections for arthritis, Dr. Roberts performs minor surgery and also runs a ‘Vertigo clinic’.

**5.** Photographs of staff members could be displayed in the waiting area so that patients could identify which member of staff does what job.

**6.** A Notice Board was to be made available for the Patient Participation group so that patients could be kept informed as to what we do and who we are.

**7.** It was stressed that, even if attendance was small, PPG meetings should still be held to deal with any outstanding business.

**8.** The meetings were to be held bi-monthly.

**9.** There was no further business.

**10.** The next meeting is to be held on Thursday 14th May at 12.30 p.m.