

The Glen Medical Group

Minutes of Patient Reference Group

Held on Tuesday 25th February 2014

Present: Dr Simon Hutchinson
Mrs Lynn Crutwell (Practice Manager)
Miss Kate Woodhouse (Secretary/ Administrator)
Mr Martin Simpson PRG member
Mrs Jackie Richardson “ “
Mrs Vicki Sutherland “ “
Mr John Sutherland “ “
Mr Cyril Daniels “ “

Apologies for absence: Mrs Jeanette Mullen (Asst Manager), Mr Adam Roberston, Mrs Mary Ross, Mr Gerald Fionda, Mrs Theresa Robertson, Mrs Denise Hetherington, Mr Michael Harte, Mr Mark Kavanagh and Mrs Angela Lamonte.

Review of previous minutes

A&E Attendances Survey

Those with high attendances are still discussed regularly.

Emis WEB

LC apologised for any delays or inconvenienced caused due to the change in system.

Altogether Better – Practice Champions (Speaker Carol Robertson)

Carol Robertson informed the members a little more about the Altogether Better – Practice Champions and outlined the objectives and goals.

She informed members that the Practice had a very successful information day and 9 Practice Champions had already been recruited. Their training would begin on Wednesday 26th February and a second training day on the 5th March 2014 which LC and SH will attend.

Mr Sutherland raised the question that it all sounded similar to the U3A which Carol replied that it was similar but no restrictions applied and anyone could join. The goal is to achieve a sense of community.

LC added that when more people were involved this would bring new ideas into the Practice. Carol Robertson then advised the members that it would be a joint effort from the Practice and the volunteers, we would learn together.

Mr Sutherland queried that once, say a photography group became established, where would they meet? Carol Robertson replied that it would be anywhere of their choosing as it was up to the volunteers and their ideas and that the scheme was funded by the National Lottery. Mr Sutherland queried about having the meetings here as everyone knew where it was and could travel with little difficulty. LC confirmed that the Practice would be happy to facilitate if rooms available here but otherwise venues would be booked through the trust.

Mr Sutherland then queried how would details of the groups available be advertised and how would more people be recruited or volunteer? Carol Robertson again advised that funding was available so using the skills and materials available it would again be up to the volunteers choosing on how to spread the word. LC confirmed that the notice board in reception could be used. Members confirmed this would be a good idea rather than the leaflets currently in reception. LC also advised that the clinicians and staff would be involved and would be able to discuss with patients and point in the right direction.

SH added that this project was new to all of us and a little unknown, therefore it is difficult to predict an outcome. It would be a learning process for all of us.

Overall aim is to recruit 40 Practice Champions. Members queried that this was a high number and would it be achievable. Carol Robertson was quite confident in this number and reassured that she had never known any Practice not to have enough.

LC asked whether there would be limits to the groups or how would this be controlled. Carol Robertson advised that this would be dependable on the type of activity, venue, timescale etc but that they have never had a problem with this before.

Mrs Richardson commented that she was interested in becoming a Practice Champion but was unable to make dates due to other commitments and asked whether a speaker would be invited from Leeds where this scheme has been ongoing to discuss their experiences and explain more of what it is about as this would be beneficial. Carol Robertson advised that this was possible but would have to ask.

Mrs Sutherland queried what training was involved. Carol Robertson advised that this would be team building exercises at first as the team would not know each other before hand. It would then be to discuss what the objectives and goals were and how this was to benefit the community.

Next recruitment day would be held in May. LC confirmed that we would again send out text messages from the Practice.

Practice Updates

LC informed members that Dr Tom Gorman, GP registrar had now left us and been replaced by Dr Richard Ellenger, GP Registrar who will be working full time with Dr Hutchinson as his GP trainer for the next 6 months. LC explained that Registrars work on a 6 monthly rotation.

LC confirmed that the Practice was still actively looking for a new GP to replace Dr Elwell and that Locum GP's would be employed until then. Following this LC apologised for the lack of appointments but reassured that the Doctor on Call was still available for those with urgent problems.

Mrs Sutherland queried whether Dr Burns was back permanently. LC advised that as Dr Burns was semi retired, he was just helping out the Practice until a new GP was found. Mrs Sutherland then asked who the main GP of the surgery was. LC confirmed that this was Dr Kerstin Akporehwe and Dr Simon Hutchinson.

LC informed members that the Apprenticeship Scheme is very successful and LC happy to announce that CF has been offered a full time position with the Practice after successfully completing her Apprenticeship. LC also announced that the Practice had taken on 2 new apprentices LE and BS.

GPES (General Practice Extraction Service)/ Summary Care Data

LC outlined the differences between GPES and Summary Care Data.

Summary Care Data

This is data including allergies, current medications and active problems to be uploaded to the national spine. This is to be used for accidents or emergencies when in another part of the country. LC confirmed that only half the Practices in South Tyneside have went live with this due to funding issues and the PCT changing to the CCG.

GPES

GPES is currently being discussed on the news and has been delayed for 6 months.

Mr Simpson confirmed that the current issues and reason for delay is due to the potential selling/access of data.

LC again confirmed what type of patient information is to be extracted and what that information may be used for. Patients have the right to decline their information being used. They will need to inform the practice and their records coded accordingly. Any concerns to contact Practice.

Practice Survey

The patient survey was sent to 200 people in the post and also 300 given out to those presenting to reception in December 2013.

LC apologised in delay for producing the survey results.

LC advised that those attending the meeting were welcome to take the survey away with them and that for those unable to attend tonight a copy would be email or sent in post. Members are to make any comments by 7th March 2014.

LC gave an overview of the results (*a full copy is available on the practice website*) and confirmed that there was not much difference in answers to that of last year and disappointment in that there are still issues with the phone lines. Mr Sutherland confirmed that he had great difficulty in getting through at 8:30 on a morning, LC confirmed that there are 4 to 5 lines being answered each morning and that unfortunately that is one of the busiest times. This also may have been impacted by the change in appointments not being released daily.

Comments had been made regarding the difficulty in reaching the Prescription line. LC confirmed that this is something that would be extend or change in the future.

In regards to comments made to reception, a bell has been tried but was ringing without a patient there and we have now tried to make more staff available to help the queues at our busiest times.

The numbers of patients who said they would use social media were not as high as we thought they may be. However this is still an ongoing process as LC unsure with twitter as there are some issues around its appropriate use in General practice but if these can be clarified then it was agreed with the PRG the practice would run it for a trial period. It was agreed the face book page is easier to monitor as can be used for outgoing information only, almost as an electronic newsletter. One of our members agreed to help setting the page up.

SH and LC confirmed aware of complaints and that all comments would be taken on board and in house audits may be taken to see how it can be improved.

As a result of discussions and consultation with the PRG and taking in to consideration the survey results and comments the Practice plan to implement the following changes:

- Make improvements to the way we communicate with our patients making sure information is current and easy to access both within the surgery i.e. displayed in waiting room, newsletter available to take away and using the electronic send in screen to its full potential.
- Update and improve website adding extra information i.e. clinic times, local services and useful links to Dept of Health information as suggested in the survey.

- Add and actively promote the use of social media as an alternative way of reaching possibly a different demographic of patients who may not access the website but would look at a face book page or follow on twitter.
- Telephone Access continues to be high on the agenda and although we made significant changes to staff working and numbers answering the phone in busy periods we take on board the comments from the PRG and survey. We hope that increased promotion (using social media and all of the above) of on line booking and ordering prescriptions online giving patients a choice of how to contact the surgery this may also improve telephone access. We plan to do an in house survey to monitor the telephones later in the year.

The group agreed that these are areas which could be improved and implemented, a couple of group members offered to help with the IT side of getting the social media up and running.

Any other business

Walk in Centre at Palmers

There are rumours of the Walk in Centre closing. LC confirmed that she had nothing confirming this.

Next meeting will be held at the end of May, confirmed date to follow.

Mrs Sutherland requested that this date would not fall on the second Tuesday of the month as would be unable to attend.