Patient Group Meeting Minutes 18 September 2013

Rockwell Medical Centre 5.00 pm – 7.30 pm

Present

Rachel Thompson Chair

Dr Gavin GP representative

Jeanette Armistead Rockwell Receptionist

Sue Whytell Rockwell Receptionist

Elizabeth Milwain Brainscapes (Idle Baptist church memory club psychologist)

|  |  |
| --- | --- |
| Rockwell Patients | Wrose Patients |
| Mrs PM | Mr KJ |
| Mr JH | Mrs CJ |
| Mr GS | Mr TM |
| Mrs AH | Mrs JM |
|  | Mrs MS |
|  | Mr MH |
|  | Mrs BH |
|  | Mrs MM |
|  | Mr DC |
|  | Mrs MA |
|  | Mrs MC |
|  | Mr MB |
| Apologies: Mrs PS | Apologies: Mrs SF |

1. Review of last meeting
* Dr Bhat returns on 30 9 2013
* Dr Winn retires on 31 3 2014
* We looked at the “enhanced sharing model” which allows patient records to be shared who other health care professionals involved in their care. RT reported that the new system is working very well with many patients finding it advantageous to their care, however this is still an opt in service.
* Day in the life of Dr Haddad
1. Brainscape - Dr Elizabeth Milwain

Dr Elizabeth Milwain explained that she is is a Doctor of Psychology with an interest in Dementia and runs the Memory club at Idle Baptist Church (and various other venues) alternate Tuesday mornings for Dementia sufferers and their Carers. [Join a memory club](enhanced%20services/patient%20participation%20Des%202011%202012/DES%202012%20-%202013/2013-2014/Join%20a%20Memory%20Club.docx)

Dr Milwain presented slides to help patients understand.......

* What is Dementia
* What causes Dementia
* The difficulties of having Dementia
* What can be done
* When to seek the help of a GP

Feedback and Questions were welcome with many paitents reporting that the talk was informative and useful and several interested people had made enquiries about the Memory Club .

1. Feedback from Patient Representatives and Wider Patient network groups.

Patient Rep meeting: RT held a meeting with Patient reps on Friday 23 August 2013 and discussed the following

**Suggestion boxes :**  There is now a suggestion box at each branch with a supply of paper and pens. Mr Ken Jones, Patient Rep is in “charge” and will empty the box every 2 – 3 weeks , feeding back the messages to RT. If anonymous, RT will take to the GP meeting and report back to the group, if signed then RT will engage with the patient. To date, one message from each box has been left – both relating to the waiting room being extremely HOT and uncomfortable (both anonymous). Whilst Air Con was requested, RT explained that it will not be installed by NHS services or our Landlords. Patients are advised that they can request for the door to be propped open, or a glass of cold water. RT said the aim is to ensure that no patients are kept waiting longer than the “tolerance level” of 20 minutes. RT also stated that Summer 2013 had been usually hot.

Wider patient Group meetings : Several patients are now attending the wider Bradford patient group network meetings and beginning to understand how the NHS works. The next meeting is at Shipley Library on Thursday 19 9 2013 and any patients can attend – Dr Haddad will be speaking. Both Mrs MM and Mr MH had found these very useful in the past.

Mrs MM attended one of the CCB Public Board Meetings, however she felt it was not sufficiently engaging and would not recommend attending another one.

1. Review 2012/2013 action plan

Action plan from previous year

* INFORM PATIENTS IN TIMELY FASHION IF GPS ARE RUNNING LATE
* PROVIDE LEAFLETS AND NOTICES IN LARGER FONT SIZE FOR VISUALLY IMPAIRED PATIENTS – *TO BE CONSIDERED*
* SEND SMS TEXT REMINDERS ROUTINELY FOR ALL BOOKED APPOINTMENTS
* INCREASE EMAIL COMMUNICATION BETWEEN PRACTICE AD PATIENTS
* ALLOW PATIENTS TO TELEPHONE FOR REPEAT PRESCRIPTOINS DURING WINTER MONTHS – *TO BE CONSIDERED*?
* INCREASE NUMBER OF ROCKWELL PATIENTS REPRESENTED IN THE PATIENT GROUP

RT went through each action point in turn to review the progress against each domain

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| --- | --- | --- |
| Action Point | Achieved yes/no | Further action required |
|  INFORM PATIENTS IN TIMELY FASHION IF GPS ARE RUNNING LATE |  yes | Waiting times for appointments are about 9 minutes which is within the previously agreed tolerance time ( proven by audit) |
|  PROVIDE LEAFLETS AND NOTICES IN LARGER FONT SIZE FOR VISUALLY IMPAIRED PATIENTS – *TO BE CONSIDERED* | no | Whilst this has not been possible it has raised awareness of sight disability and staff are trained to respond. |
| SEND SMS TEXT REMINDERS ROUTINELY FOR ALL BOOKED APPOINTMENTS | yes | This service is available for all patients who want it ( via registration) *\* patient must keep phone switched on to accept the text* |
| INCREASE EMAIL COMMUNICATION BETWEEN PRACTICE AND PATIENTS | yes | This is work in progress. More emails are being sent directly but practice still has problems regarding data security and protected server. |
| ALLOW PATIENTS TO TELEPHONE FOR REPEAT PRESCRIPTOINS DURING WINTER MONTHS – *TO BE CONSIDERED*? | yes | We do not wish to place vulnerable patients at risk of fractures/falls and will accept some telephone requests in adverse weather. |
| INCREASE NUMBER OF ROCKWELL PATIENTS REPRESENTED IN THE PATIENT GROUP | yes | Number of Regular Rockwell Patients attending the PPG has risen from 0 to 5 – well done |

Following the review the PPG expressed satisfaction with the action plan results and achievements to date.

1. Patient Survey 2013 – 2014

In contrast to the last few years when the practice traditionally did a comprehensive survey in October, RT explained that the GPs had recently completed a full practice experience review survey for their own GP validation (exercise that GPs must perform to maintain accreditation). RT proposed that the results of this survey which is very similar be reviewed and used to create an action plan for improvement for 2013 – 2014. Patients in attendance indicated this was acceptable and therefore RT presented the results [as follows](partners%20meetings/IPQ%20-%20The%20Rockwell%20%20Wrose%20Practice%20-%2036958.pdf).



RT suggested that the group focus on the ***five lowest scoring elements*** on the survey to steer the forthcoming years improvement action plan . Approved.

1. Waiting times
2. Seeing Practitioner of Choice
3. Seeing a GP within 48 hours
4. Speak to a practitioner over the phones
5. Comfort of the Waiting room.

Group Discussion.

**Waiting Times** ( sitting in waiting room waiting for doctor) – RT produced an audit form the practice computer system which showed the average waiting time was 9 minutes. Group discussed this and agreed that as this was well within the 20 minute tolerance level agreed in earlier meetings there was little room for improvement here.

**Doctor of Choice**  The group discussed this and suggested this was not a problem. The practice has a lot of new doctors are popular and advance booking is relatively simple.

**Seeing a GP within 48 hours**  This is no longer a problem since the introduction of Triage

**Speak to a doctor of the phone** This is no longer a problem since the introduction of Triage

**Comfort of the waiting room** Many patients comment that Rockwell waiting room chairs are uncomfortable and lack “arms” making it difficult for patients to get out of the chairs. RT explained that the chairs are wipe clean and retain a “nice finish” despite being many years old. Given that most patients do not have to endure sitting on them for long periods, the practice believe they are acceptable, however will put this as an action point to get some softer and higher chairs with arms for elderly pts.

1. Open Floor

RT and Dr A Gavin invited patients to raise concerns or comments about the practice as must produce an improvement action plan for 2013 – 2014.

Several patients praised the practice for its efforts and the new appointments system.

Nil comments raised regarding making improvements.

RT mentioned that there had been a couple of patients upset at receiving the DID NOT ATTEND letters and stating that the tone is offensive and too harsh.. RT invited the group to consider the wording and tone and read out the letter. Outcome ; keep the DNA policy as it is.

1. Action Plan 2013 2014

**Improve the seating at Rockwell medical centre waiting room**

**Supply disinfectant Gel for patients**

**During very hot weather – offer patients a glass of HOT water**

1. Care.Data

RT announced a new project called Care Data and informed all patients that the government is entering a period of consultation from September for 8 weeks to extract data ( medical information) from GP records to help to plan for health care in the future. Patients Names, address and dates of birth will not be pulled through as this is confidential, however NHS number and disease registers will all be included.

A Patient leaflet about [Care Data](IG%20policies%20and%20documentaion/Care%20Data%20Poster%202013.pdf) is on the website or in reception area.

And Finally

**IPODS** – Dr Haddad has managed to get a couple of machines for the waiting rooms on loan that will weigh, measure and take blood pressure whilst patients wait.

**SHINGLES VACCINES** – From this September any patients aged 70 years or 79 years will be offered a shingles vaccination alongside their flu vaccination

**PNEUMONIA VACCINE** - Any patient aged 65 or over should also have a pneumonia vaccination

**FLU VACCINATION FOR CHILDREN** – Flu vaccines for young children aged 2 – 3 are being offered this year as routine.

**RESEARCH IN PRIMARY CARE** - We are often approached by research companies who wish us to do trials or canvas patients to take part in research. Rockwell and Wrose have always resisted, however we would like to canvas the group to see if they would like to take part in clinical trials or research projects. Outcome : patients felt they needed to know more before committing and did not want doctors to have to do any more work.

NEXT MEETING DATE

MONDAY 20 JANUARY 2014

THANK YOU EVERYONE