

MINUTES OF PATIENT PARTICIPATION GROUP SESSION

HELD ON WEDNESDAY 16 MAY 2012

Present: Patient Participation Members x 8
Dr N M Nabi, Partner
Brian Doyle, Practice Manager
Janet Carmichael, Assistant Practice Manager

This was the second meeting of the patient participation group session whose aim is to engage with patients and feedback patients' to the GPs and also to the wider health service enabling the practice to ensure we give the best service to our patients.

1. Minutes from last Meeting

Agreed.

2. Action points from last meeting

- **Speak to bus companies regarding bus routes to the Centre** – Brian has spoken to Stagecoach who have stated the more residents request a change in the bus route the more feasible this will be. It was suggested that cards could be sent out for people to complete and send to the bus company.

The possibility of the WRVS becoming involved in a “taxi service” is still being explored.

- **Appointments** – More nurse practitioner appointments have been made available on line.
- iii. **Walk-in flu clinics** – The walk-in flu clinics were a great success last year and we will continue to do them this year
- iv. **Telephone message** – The telephone message was now been changed and it was felt that the order of options was a lot better.

3. Medicine wastage

Medicine wastage costs the NHS quite a lot of money (e.g. re-ordering of medicines when not needed). Unfortunately once medicines have been issued to a patient they

cannot be returned even if not opened. Medication can be ordered from us by the patient or can also be ordered by the chemist.

Dr Nabi stated that the GPs do try to keep an eye on patients' medication and if something comes to light will bring this up either with the chemist or the patient.

The participants of the meeting were asked about their thoughts and experiences. It was stated by one member that sometimes the chemist takes no notice when asked not to order a specific drug from the GP. Most agreed that the patients share the responsibility to ensure that only needed medication is requested when re-ordering prescriptions.

Agreed action:

- At patient's six monthly/yearly reviews it should be questioned whether they need the medication on repeat.
- A statement should be put on the bottom of repeat prescriptions and an information notice put up.

4. Flu clinics

The flu walk-in clinics were very successful last year and we will continue to do these probably starting in September. Brian asked if the participants had any ideas how to reach patients such as those who have problems with the language, learning difficulties, people who do not engage regularly, pregnant women. Discussion followed.

It was suggested that the midwives recommend the flu vaccine when pregnant women attend the clinic. Brian is to find out what the midwives tell patients regarding the vaccine. Also suggested was sending letters, telephone, display notice targeted for pregnant women in reception when the antenatal clinic is on. More general information about flu should be put out in reception for all patients. It was also suggested that information is made available at Common Ground.

It was suggested that we may like to use the Walker Park notice board to advertise the dates.

Agreed action:

- Brian to discuss flu vaccination with the midwives
- Send out letters to vulnerable patients
- Telephone patients
- Put up a notice targeting pregnant women when antenatal clinic is on
- Put out more general information regarding flu
- Contact Common Ground
- Brian to contact council regarding use of notice boards in Walker area.

5. Waiting room

The participants were asked what they would like to see in the waiting area. The group were very happy with the television and it was mentioned that the information on certain diseases was very interesting. It was suggested that we put more leaflets beside the front door. Using mobile phones in the surgery was an issue mentioned

and it was felt that a notice requesting not to use them in the surgery should be more prominent.

We have recently invested in some new notice boards and have one situated by reception requesting that patients do not go beyond it until their turn for confidentiality. It was commented that it does seem to work for some people.

Dr Nabi suggested that we have an index/library for information leaflets kept in the waiting room and that the leaflets be requested from Reception

It was suggested that information about the patient participation group be put on the notice board (e.g. when next meeting is).

Agreed:

- Photographs of GPs to be put on notice board
- Have more information available
- Advertise in waiting room flu clinics etc
- Advertise Patient Participation Group
- Index for leaflets to be available
- More health related posters
- Confidential area works better
- Young people area works
- Reception staff to inform patients if GP running late

6. Development of nurse appointments

The practice would like to expand the amount of nurse appointments available on a Monday to help people who are working and to try to provide a better flexible service for patients. The group agreed this was a good idea.

Action:

- To expand nurse appointments on a Monday evening

7. Appointment system

The practice would like to try and make the appointment system work better as we realise there are problems with the present system. Brian explained the present appointment system regarding embargoes and asked the group for their views.

One problem highlighted was when patients cannot get an appointment with the GP of their choice they are often asked to “phone back tomorrow”. The GPs themselves are unhappy with this situation. Dr Nabi stated for new problems it is reasonable to see any GP but for ongoing problems it is better to see the same GP therefore we must try to make the system better.

The practice will be looking at this over the next couple of months trying to work towards a system that means patients do not need to ring back for an appointment. If any of the group have any suggestions they are to let Brian know.

Action:

- Practice to work towards a better appointments system

8. Newcastle North and East Clinical Commissioning Group

Brian informed the group that the TyneHealth Commissioning Group has been renamed to reflect the area which is covered to the Newcastle North and East Clinical Commissioning Group (NNECCG).

The NNECCG is very keen on patient participation and would like to have a group made up from members of the individual practices' groups. This group would be looking at bigger issues and design of some areas.

Action:

- If any member is interested they are to let Brian know.

9. A.O.B.

The next meeting is to be held in two or three month's time. The minutes will be sent to the group and will be placed on the web and waiting area.

If the participants have any issues which need to be discussed at a meeting they are to let Brian know and visa versa.

ACTION PLAN

1. Postcards could be sent out for people to complete and send to Stagecoach requesting reinstatement of bus route.
2. To advertise walk-in clinics targeting groups.
3. Photographs of GPs to be placed in waiting room
4. More information posters in the waiting room
5. Index of leaflets available to be placed in waiting room
6. Reception staff to inform patients if GP running late
7. To expand nurse appointments on a Monday evening
8. Practice to improve appointment system
9. Any member of the group wanting to join the NNECCG patient participation group to inform Brian Doyle