

PPG Meeting minutes – 14 Oct 15

Attendees: Ann Smith (AS)
Jill Morris (JM)
Robert Gurd (RG)
Owen Grainger (OG)
Robin Courage (RC)
Alison Watson (AW)

Sangeeta Kathuria (Manager and Chair of meeting) (SK)

Apologies: Brian Anderton
Dean Austin

Thank you for all the members who were able to attend the meeting this evening. We introduced a new member who has joined our group, Mr Robin Courage.

We then proceeded to discuss the following items on the agenda

HOMEWARD

There is a new service that has started in October where extra support is given for people to recover from illness or injury and remain well at home without unnecessary stays in hospital. It's a helpful place as intermediate care to combat unplanned hospital admissions. The types of conditions or situations that GPs can get help with for patients with falls without apparent injuries, UTI, respiratory tract infection and cellulitis, COPD worsening symptoms or congestive heart failure, dehydration, unstable diabetes, elderly patients with increasing frailty who are risk of admission and if a carer becomes unwell. It also has additional support for patients with dementia or mental health problems although the need should be of a physical or social care nature.

Patients can also be referred from the hospital as an early discharge to go to the hospital for support and rehab. This will hopefully benefit many patients at the surgery who may need to be referred into the system and this will be held at the Clayponds Hospital. A patient leaflet has been attached with the minutes for the members to read more about the service.

BLOOD TEST HUB CENTRE IN ACTON

Ever since all the surgeries in our local network in Acton and Chiswick were changed over to Hillingdon Hospital as our main laboratory to process bloods, the access for patients to go to the walk in clinics in case of emergency at the Hammersmith or Charing Cross Hospital has been stopped. This created a problem in that we did not have a local hospital, like Ealing Hospital, to take on walk in patients for blood tests.

As a result of discussions between the practices and other network PPG groups, a walk in centre hub has been set up for patients from our surgery and others in the local network to go to in case we don't have enough or sooner appointments for a blood test. These are taking place at the Acton Health Centre on the days below and is being reputed as a very well-run and efficient clinic. No prior appointments are needed and patients can walk in with their blood forms on any of the days.

Day		Time	Location
Tuesday	Full day	8.30-12.30 & 1.00-4.25	Acton Health Centre, 35-61 Church Road, Acton, W3 8QE
Thursday	Full day	8.30-12.30 & 1.00-4.25	Acton Health Centre, 35-61 Church Road, Acton, W3 8QE
Friday	Afternoon Session	12.30 – 4.25	Acton Health Centre, 35-61 Church Road, Acton, W3 8QE

The members have asked for this information to be disseminated to patients so that they can use this service more often and readily.

FRIENDS AND FAMILY TEST

SK asked the members for their help and input in trying to get more patients to complete this one off form which asks patients whether they would recommend this practice to other family members etc. We started off with quite a high response but over the past 2 months it has dwindled down to no responses. The majority of the members were not even aware of where to find the forms so they have suggested to advertise this location a bit better. Also members have advised to send emails or texts to patients to complete this form when they come in or online via our website, explaining it's a one off form only. SK is going to look into doing this to get more feedback in the next few months.

The purpose of the friends and family test can be seen in the links below

<http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/friends-and-family-test>

<http://www.nhs.uk/NHSEngland/AboutNHSservices/Pages/nhs-friends-and-family-test.aspx>

NETWORK MEETINGS

The next PPG network meeting will be held on Thurs 22 October at 2 – 4pm at The Active Acton Centre High Street. SK asked if any members were interested in attending however, no one present is able to. The meeting has been announced again with short notice and it clashes with our PPG meeting. The members have requested that in the future we ought to have our local

surgery meeting after the network one so that feedback and information can be shared amongst us. Also some members have asked for the usefulness of having the network meeting along with our in house meetings and SK explained that the NHS is having many changes one of which includes how we involve our patients and their ideas in our surgery on a more local network level. The thinking is that it is a good idea to get a viewpoint of many different members across different surgeries with different ideas and problems and which can then be worked across all the surgeries as a whole. This will help surgeries grow as a group. The idea of the walk in blood test hub was one idea that was generated from a PPG Network meeting. At present however, this is still in the early baby stages with the first two meetings making introductions and generating feedback. This will be the third meeting and it's only after we have a few more that we would be able to see any real changes happening.

INFORMATION FOLDER

As per one of the suggestions from our last meeting, it was recommended by some members to have an information leaflet or booklet for patients who don't have access to the website to look at for information about the surgery and its local primary and secondary care attachments. SK has since then made up a folder and put this in the waiting room for patients which has all the patient leaflets, information guides, contact numbers etc. which can help them obtain information about our services. The pages of this book have all been laminated for health and safety purpose and it's all in alphabetic indexed order. There was a suggestion by PPG members to make patients more aware of this folder as the feeling was that it was a little hidden away in the top corner of the bookshelf. One suggestion was to leave it on the sofa in the morning so patients coming in would know it was there and have a look through it. Another suggestion was to text patients and also put it on the noticeboard for patients to access the book in the waiting room. SK is going to advertise this more actively in the coming weeks. SK also mentioned that a patient can request a photocopy of a specific sheet should they wish to take something with them.

CQC

SK discussed the prospect of a CQC visit which could happen at any time in the next few months and the fact that the inspectors would need to speak to at least one member of the PPG team when they do the inspection. We would be expected to have a 2 week prior notification and SK will be then asking members to volunteer to come in on the day. The inspectors work around the patients and the meeting would not be longer than 20 – 30 minutes and it would be at a time that suited the member at any point during the day. SK will inform the members as soon as we have been notified of a visit and what it will entail from their point of view.

NEW MEMBERS

SK asked the members on their thoughts on recruiting more members for our PPG group. She has suggested that perhaps we can have a meeting where we can have interaction via Skype and if any patient would like to attend using this method, we would be happy to accommodate it. SK has the account, the

webcam and a projector with a computer that can be set up for a conference style remote meeting. There was general agreement that we should try and use this method for our next meeting to see if we can get more working members or a younger representation in our group.

ONLINE PRESCRIPTION

Mr OG had a recommendation to make with regard to the online prescription service through our clinic system. He has picked up that there is no place for the patient to tick a request as to whether they would like their prescription to be sent to the chemist directly or whether the patient can collect the script. He feels that since there is an option for the two and a choice to be made then a facility should be there for the patient to make that choice electronically. SK did explain that this choice is given on our paper prescription and she agreed that this option should also be available on the online version. SK will be getting in touch with the clinical system and put in this recommendation with them. He also explained the system of ordering online for the other members in detail.

Furthermore Mr OG noticed that the time clock on the online system is on continental time and not on GMT time which SK also said she would speak to the clinic system providers about.

APPOINTMENTS WITH PRACTICE NURSE AND HCA

Mr OG and other members have commented on the fact that there is a very long waiting time for nurse and HCA appointments especially for blood tests. SK has explained that Noko and Lorraine were on annual leave in the last few weeks and we did have a locum cover nurse, however, there has been a build-up of a backlog. Also Noko has to attend a few compulsory clinical training sessions in November which has caused a backlog. We have asked a bank nurse to help out in November who is going to cover all the Mondays to catch patients up with appointments. We also are advising our patients to go to the Acton Health Centre for their blood tests which is the walk in centre and they don't have to wait too long if they choose to do this. SK assures them that this will sort out by December and it will be back to normal as the flu clinics will also be done by then.

AOB

- Mr RG asked about whether we have Wi-Fi in the surgery in case patients wished to use tis. SK is going to email this to all the members
- Ms AS talked about the use of emails and how we should be using emails to invite patients in for appointments etc. rather than paper letters. SK agreed that this is the way forward in a paperless workplace. However many patients still have not verified their emails and we need to ensure these are verified for them to get an email. SK is going to speak to reception staff and ask them to start using emails or SMS text messaging rather than hard copies of letters to contact patients.