



WINDSOR HOUSE GROUP PRACTICE PATIENT PARTICIPATION GROUP Tuesday 26/03/19 Adwalton House Surgery

Attended:	Sharon Wears Barbara Hope	Janet Hoult Alan Peters	Ann Hudson James Hill	Sheila Furness
Apologies:	Paul Handley (Chair)	Shirley Varley	,	
Practice Reps:	Steve Horton	Debbie Gumb	ley Jill Pe	el
Minuted by:	Jill Peel			

ltem		Action
1	Apologies See above	
2	Minutes of Previous Meeting / Matters Arising Minutes accepted as a true record.	
3	Matters Arising None to report	
4	Introduction To New Members/Revisit Purpose Of The Group	
	SH welcomed 3 new members and outlined the purpose of the group, the aims and objectives being to feed-back from their own experiences and suggest how the practice may improve services for the benefit of the whole patient list going forward.	
	Ideas and suggestions made by the PPG members will be considered by the Partnership and if at all possible or practicable will be implemented in service improvements.	
5	Staffing Changes	
	SH updated the meeting on current clinical staffing changes:	
	Dr Arnold has dropped 4 sessions per week.	
	Dr Taylor has been appointed as a Salaried GP from 010419 on 6 sessions per week.	
	Dr Omar will be leaving WHGP to take up a position in Dubai.	
	Interviews will take place next week to replace Dr Omar's 6 sessions and we are pleased to say we have some excellent applicants.	
	In December we recruited a third Health Care Assistant Rachel Perry.	

The Practice is about to advertise for a Clinical Pharmacist who will consult with patients face to face dealing with minor ailments and chronic disease management.

6 <u>Feed-back From New Members</u>

All three new members gave feed-back from personal experiences.

Two members had experienced difficulties communicating with the practice and receiving a response with regards to their interest in joining the PPG.

One member expressed how frustrating she found it to make an appointment with the clinician of her choice (prefers to see this clinician as she is familiar with her condition though accepts she only works 2 days per week). On one occasion she waited 50 minutes after her appointment time to be called.

The same member stated that the information on the TV screens and posters is mis-leading and when she asked the receptionist about the information in the waiting room, on banners and the TV she was given unhelpful answers.

On one occasion the member wished to make an appointment two weeks in advance and was informed that the diary was not published so far in advance and the member of staff responsible for the diary (JP) was on leave. JP responded to this informing the meeting that she took annual leave in November and the diary was available to book up to the Christmas and New Year weeks. Over this period the practice operates an open access service to accommodate both clinician's leave and seasonal patient demand. This in fact covered 6 weeks.

The same member then went on to have an unfortunate experience in secondary care when her referral was lost within hospital departments which unfortunately is beyond the control of the practice.

Overall this member is unhappy with the 'journey' to make an appointment but is very satisfied with the service she receives from the clinicians.

Another member reported that her blood samples were lost and had to be repeated and was then given incorrect information form the receptionist she spoke with about the results. (WHGP is not responsible for pathology samples once they are collected from the practice by LTHT transport).

Another member asked if it was possible for clinicians to book a review appointment should it be necessary whilst the patient is in the consultation. Comments were made that this is not best use of the clinician's time and should be done at reception.

A request was made for the calling-in screens to make an alert sound so that patients who are reading/talking are made aware a clinician is calling.

Members commented on telephone access and their experiences when they wanted to 'ask a quick question'.

SH thanked the members for this feed-back and informed them that some of the above problems will be eliminated by the features that have been built into the new web-site.

7 Practice Website - Update

SH announced the practice will launch the new web-site on 1st April. Patients will have access to comprehensive self-help information, links to other health related web-sites and local services, the ability to complete on-line forms for submission to the practice, (including PPG, registrations, sick note requests etc.). There is also a facility to 'ask a question' providing that it is not of an urgent nature.

The site includes access to on-line services which over the next few months will be enhanced by the patient being able to access a more detailed medical record as well as the coded history, repeat prescription request service and appointment booking facility. The practice will also be increasing the number of GP and nursing on-line appointments.

Feed-back from the members was positive overall with a request to increase the font size for elderly patients.

8 <u>Telephone System – Update</u>

The practice is experiencing a few problems with the new telephone system with calls cutting out intermittently. The supplier and BT are working together to track the faults.

One member fed-back her concerns about charges occurred when she responds to NHS surveys on her mobile phone. SH to look into this.

9 <u>Funding Bid 2019 (refurbishment)</u>

The practice has been successful in securing funding through prescribing savings to improve the patient experience. Plans have been drawn up to upgrade Shenstone House Surgery to comply with disability and infection control standards. The surgery will benefit from an extra consulting room and better access. It may be possible to increase parking.

10 Patient Survey 2019

SH circulated a draft patient survey to the members present for comments.

11 Any Other Business

BH expressed her frustration at the overall effectiveness of the PPG as well as the decision reached regarding the final design of the PPG banner.

SH reminded the meeting that the design went out to all members for their comments. Feed-back suggested that the banner was too 'busy' hence the final design. Funding is still available to produce hand-held flyers and it is possible for these to contain more information.

One of the new members suggested that a more diverse group could be recruited to the PPG if it was possible for them to attend by Skype. SH agreed to look into this facility.

12 Date And Time Of Next Meeting

Tuesday 25th June 219 Adwalton House Surgery 5.30PM to 7.00PM

(SF gave apologies in advance).