

Ashville Medical Practice Patient Reference Group Meeting Minutes
19th January 2017

Location: Ashville Medical Practice Conference Room

Attendees: Melanie Jones (Practice Manager)
Claire Horbury (Practice Administrator)
Patient Reference Group Members (15)

Mel opened the meeting by thanking members for their attendance and passing on good wishes for the New Year.

AGENDA ITEMS:

1. Actions Update:

There are no actions to report from the last meeting.

2. New Members:

There were no new members in attendance at the meeting.

3. Practice News:

Mel reported a very busy winter period bringing associated pressures to all staff. The new appointment system had helped tremendously, along with the excellent administrative staff team working cohesively together to provide an integrated efficient service to patients and doctors. She expressed how proud she was to lead the team who worked well together, and each member was valued for their involvement. Despite many misconceptions about the complexity of the work, Claire supported Mel's comments and they felt that job satisfaction contributed to what is now a low turnover of administrative staff. Meetings were held each morning to discuss the necessary tasks for the day, and resolve any problems which may have arisen or likely to occur. A group member complimented Mel on her management of the practice, and there was support of this with the good feedback received.

- Mel explained that the next three months lead to the end of the financial year, bringing necessary essential tasks to the fore.
- Discussion took place about the misconceptions around the Patient Reference Group; despite every effort being made to communicate its role and publish the reports from the meetings on line, many saw it as an elite meeting although any patient is eligible to participate.
- In response to a query, Mel informed the group that the online appointment system had been reinstated.
- A member raised the issue of emails; Mel stated that the email system was only secure from NHS to NHS. Additionally, the person to whom the email is addressed may be out of the office at meetings, training, etc. so for an immediate response the best route is to use the telephone.

4. In Year Improvements:

Mel distributed a document outlining ten of the achievements and improvements made in the practice in the year 2016/2017. To summarise:

- New GP Partner
- New Practice Nurse
- Good results from Friends and Family survey
- Participation in capacity and demand exercise pilot to understand the number of appointment requests as against what was provided.
- Changed opening hours to 6pm to assist in resourcing at times required.
- Introduction of new appointment system on 4th July 2016 following capacity and demand pilot.
- Installation of new telephone system.
- Installation of new self check in screen.
- Patient satisfaction survey showed improvement in responses.
- Staff attended First Port of Call training.

It was noted that staff training took place on the afternoon of the second Thursday in every month.

5. Appointment Numbers:

Members of the group were issued with a document summarising appointments in five different categories on a daily basis from 4th July 2016 until 9th January 2017. The daily figures were summarised each day and a cumulative total for each week was reached. Many of the weeks showed over 1100 contacts with patients, and since the introduction of the new system, no one had been turned away. The categories were:

- Triage
- Telephone consultations
- Urgent face to face appointments
- Doctors face to face appointments (excluding baby clinic)
- Nurse practitioner face to face appointments

Mel said that these figures demonstrated the fact that it was necessary to introduce change to adapt to demand, but added that the “Did Not Attend” figures remained almost the same.

6. Complaints and Compliments:

A number of compliments had been recorded acknowledging the good, efficient and caring service received from staff.

No complaints had been received.

7. Patient Council:

There was nothing to report from the last meeting. The next meeting will take place on **Wednesday, 25th January** at 6.00pm at Hilder House. The agenda will include topics to cover and tasks to consider and focus on in the forthcoming year.

8. Any Other Business:

- A member raised an issue regarding the “111” response team promising call backs which did not materialise. Mel said that this should be reported to the Ambulance Service as the responsible body.

- A query was raised about whether home visits were still made by doctors out of hours. Mel explained that the necessity for this was decided once the assessment had been made following calls to “111”.
- The practice is still taking new patients. For information in November 2011 there were 10,500 patients and in January 2017 there are 11,300.
- A member raised the issue of people coming from abroad; Mel explained that they have a right to be seen for primary care, but secondary referrals are more complicated from a charge aspect.
- A member wished to complement the organisers of the Memorial to the Mining Disaster which had been sited in the grounds of Oaks Park Medical Centre. Mel agreed to pass this to the appropriate person.

9. Date of Next Meeting:

This will take place on **Thursday, 27th April 2017** at 1.00pm in the Conference Room at Ashville Medical Practice.