

Ashville Medical Practice Patient Reference Group Meeting Minutes 18th October 2012

18th October 2012

Location: Ashville Medical Practice Conference Room

Attendees: Melanie Jones (Practice Manager)
Patient Reference Group Members (12)

Update on Action Points from last meeting 19th July 2012

1. Timescale of booking a Dr Appointment and DNA's.

The monthly DNA reporting now includes a separate breakdown down of Dr Appointments and the time between booking and a did not attend taking place. The information can be found on the practice website.

Action point closed

2. Work Experience

The practice would be willing to involve scholars doing work experience however, due to the nature of the business would not want to involve local schools, it would need to be children from outside the area. One member of the group expressed concern around confidentiality.

Mel informed the group that the practice was not in a position to engage in doing any work experience at the moment due to more pressing priorities; however data protection was absolutely paramount.

Action point closed.

3. Television Advertising Health Promotion

Since the last meeting in July the practice has been approached by a company offering health promotion to display in the waiting room. The offer was subject to local companies also being able to advertise. The latest update from the company was that the application was still being processed.

Action point to be carried forward awaiting update.

Agenda Items Patient Reference Group Meeting 18th October 2012

Practice News

- The practice has until the 29th October to register with the Care Quality Commission (CQC)
- 2 Registrars joined the practice in August 2012. Dr Mills who will stay at the practice for 12 months and Dr Cooke who will stay at the practice for 6 months.
- Kerry a member of the administration team had a baby girl in August 2012
- Two new staff members joined the practice- Rebecca who will work on reception and Emily who will work in administration.
- Flu Saturday was a success and the practice gave 880 vaccinations. This was double the amount the previous year. One member of the group did wonder why appointments were being booked when patients could walk in at any time. This was so we could start planning and gain an understanding on numbers that would be coming. The same principles will apply next year however, a lessons learned is to book patients in and advise they can attend any time. This way the practice will still be able to gain an understanding of the numbers prior to the event

Appointments- Did not Attend (DNA's)

Mel talked the group through the did not attend figures on a monthly basis since going live with the new computer system in May 2012. The first full months figures were June 2012.

September has seen a reduction of did not attends and it was hoped the trend would be for did not attends to keep reducing. Mel informed the group that it was not appropriate to send letters to every-one who didn't attend, however this was being monitored closely and repeat offenders were being addressed appropriately.

A summary of the total did not attends across all clinician groups is as follows:

Month- 2012	Number of did not Attends
June	196
July	184
August	193
September	165

Practice Website

It was agreed the practice website would be removed as a fixed agenda item

Patient Survey

222 patients have completed the patient satisfaction survey to date. The department of Health Guidelines are 25 questionnaires to be completed per thousand patients, to ensure a representative sample. The group agreed to the survey ceasing when 270 questionnaires have been completed.

One member of the group mentioned that there didn't seem to be many responses from the younger generation. The practice had already requested patients' complete questionnaires at baby clinic, post natal clinics, the midwives and health visitors have also been approached to give out questionnaires, to ensure we had a representative sample of questionnaires from all age groups. It was agreed that the younger generation would be targeted with regards to giving out the remaining questionnaires.

The results of the survey so far were shared with the group, and the next meeting would be to discuss the results after the survey has finished.

The group also agreed that they did not want to publicise the Drs name if there were any negative comments. They would like the information displaying as Dr X.

Positive Feedback

- Complementary comments were received for Dr Mills, and that he is a great Dr.
- Presentation of the output of the survey so far is excellent

Any Other Business (AOB)

• Ordering prescriptions on the internet

It was mentioned that when ordering prescriptions on the internet that special requests were not being acknowledged. Also it was not known if medication that was not on a repeat could be requested via the internet by using the comments box only. Since the meeting it has been established that comments only can be submitted via the internet.

Queue at Reception

The group mentioned that the queue at reception sometimes made it very busy around the building entrance. A suggestion was made to move the computer on reception to the other side of the reception desk. Mel did inform the group that a new receptionist had commenced and the aim was to reduce the queues.

Telephones

The issue was raised that it could take up to 20 minutes to answer the telephone. Mel explained the telephone system and its functionality, and that it was not possible to put a message on the phones advising patients they were in a queue, like other call centres. Patients hear the ringing tone and automatically think no-one is answering the phones, when in fact they are in a queue. By putting the phone down and re dialling puts the patient to the back of the queue again. Due to the number of telephone lines into the building it was not possible for patients to experience the engaged tone. Mel informed the group that staff shifts were allocated to cover peak times on the telephone at 8am and 2pm, and that the priority was to answer the phones as quickly as possible.

Action Points

1. Investigate why special requests are not being acknowledged on prescriptions
2. Look at the feasibility of putting a message on the phones advising patients to stay on the line and not put the phone down or they will go to the back of the queue.
3. Advertise on the Jayex board for patients to stay on the telephone line.

The date of the next meeting is Thursday 17th January 2013 at 13.00pm