

Minutes of Patient Participation Group Meeting 11 July 2011

Present - Patients:- Christine Barton, Richard Brown, Alan Carter
James Garnett, Peter Jenkins, Mike Killingley, Patricia Woods,
Faith Quance.

Practice: Richard West, Dr. Ludlow

NHS Institute for Innovation & Improvement : Sophie Cowley

Apologies: Murray Wilson, Vera Miles, Roger Mills

1. There were no items for discussion from the previous meeting.

2. 0845 numbers

RW said that with effect from 1.9.2011 a new phone system would be in operation, and the practice no. would change to 0114 2307818.

This would ensure the cost of phoning the Surgery will be at local call rate, regardless of whether from a landline or mobile. An 'Out of Hours' message, as now, will be included.

3. SC then talked us through some of the outcomes and feedback obtained from the Patient Access Survey recently undertaken.

It was obvious a great deal of work had gone into producing the results and comprehensive notes were handed out. Discussion followed on how to address many of the issues raised

- Appropriateness of the current appointment system
- How to handle defaulters etc (3.8% of total appts were DNAs)
- Patient cancellation were high, even for some Chronic Disease Management I.e. Diabetic Clinic.
- Some were last minute cancellations - a number of which were then rebooked to other patients.

Dr. Ludlow told the group that a recall system was in place for the Diabetic patients to ensure defaulters did not 'fall through the net' if they cancelled an appointment and failed to rebook another.

MK asked if mobile text reminders were producing an improvement in the DNAs

- RW said potential was there but currently only about 10% of patients are using this method.
- Encouragement to obtain ALL mobile nos. routinely was suggested, Possible targeting of groups might be made.

Discussion followed on possible uptake of on-line appointment booking.

SC told the meeting that over the 4 weeks period of the survey only 17 appointments were booked on -line, and RW explained the many difficulties associated with internet booking

- Provision of small no. of slots
- Lack of flexibility
- Many older patients with no access to computers etc.etc.

A recent national GP survey showed that only about 2% of patients were booking appointments on line.

SC said the Nethergreen Access survey showed that:-

33% of patients surveyed made their appointment face to face with the receptionist at the Desk - due in part to difficulties with telephone accessibility (see Feedback documents)

Only 10% were for urgent appointments.

During the survey period the GPs audited their consultations for 'appropriateness' of each contact - whether each patient actually needed to see a doctor, or could have been seen by another healthcare professional - practice nurse or phlebotomist etc.

The results are being studied.

RW told the meeting that the Practice was possibly looking at completely altering the way in which Appointment requests are handled. This might mean:-

- All requests would have to be by phone
- No face to face requests at the Desk
- Receptionists might have to take brief details of symptoms.
- Drs. Would then look at all the appointment requests and sift out the urgent ones (such as chest pain etc) who would be seen first.
- Telephone consultations would be increased, with GPs bringing into surgery only those patients who needed a face to face consultation.
- Dr. Ludlow pointed out that generally older people and children were most likely to need a face to face consultation. It seems probable that if a GP speaks to the patient initially the DNA rates would be reduced. Dr. Ludlow also said that it could take several months to reach readiness for a trial period of telephone only appointment requests.

There were many logistical issues to be tackled, among them:

- Reception staff training to follow a 'script' procedure
- Some patients might feel reluctant to tell a receptionist their symptoms
- Notifying all the patients of the changes being proposed
- GPs would need to clear the back-log of pre-booked appointments in order to be ready for telephone consultations etc. etc.

Discussion then followed on ways of disseminating the information re the proposed new system, suggestions:-

- Newsletter
- Information in local supermarkets, playgroups, schools in the area
- Need for 'household' mailing
- By e-mail, etc.etc.

SC said that the Access Survey is likely to be repeated in an effort to improve the system and that following this, the next stage would involve an in-depth look at the Back Office - the hub of the practice.

CB raised some issues re the Patient Participation Group including a query regarding the terms of reference under which we functioned. These will be re-addressed at a later date.

AOB - none.

Date and time of next meeting : Monday, 10th October 2011 at 6.30 pm