

PATIENT PARTICIPATION MEETING

Tuesday 13th December 2016

MINUTES

Present: Jane Page, Samantha Cox, Judith Harrigan, Brian Sleafer, Ian Crawford, Vic Ranger, Annie Taylor, Kate Williams, Dr Tideswell, and Angela Turner

Conflict of interest:

1. **Apologies** - Gwen Salmon, Gaenor Jones, David Gregory, Dr Tee
2. **Minutes of last meeting (23/09/16)** - agreed
3. **Matters arising (see below)**
4. **DNA**

AT gave hand-out - the number of DNA's has reduced. September was up which can be put down to the flu clinics, but October and November were down which is promising

AT – We will always have DNA's, if patients DNA more than three times they receive a letter from the Practice. We do send mobile text reminders

BS asked if it is mainly elderly patients who do not use mobiles that DNA – AT replied they normally ring us and are apologetic, also if patients ring and cancel on the day we are normally able to fill them

BS asked if GP's can see if patient has another appointment when they come in sooner ie as an emergency as they do not always cancel the original appointment

AJT - Receptionists normally see this and ask the patient if they still require the appointment, cancelling if necessary

DT – the wait for an appointment has come down with the new appointment system

5. **Hub update** – No real update they are still doing Tuesday and Wednesday evening and all day Saturday but they are thinking of giving-up the Sunday surgery due to not being used – our Practice utilises the service well
6. **Takeley Pharmacy/Licence for Felsted** – DT – Nothing more
7. **Suggestion Box** –

JTH - Mobile phones switched off – this is now obsolete as it does not apply as they can be left on whilst in the surgery

Felsted - none

8. **Flu Saturdays** - AT – Thanked everyone for helping at the flu days saying we raised £551.75 over the two Practices. We did put the price of the tickets up but will revert back to £1 per strip next year
BS – two patients gave £5 but did not want tickets

9. Fund Raising Group update –

SC – when looked at grants, they would not touch surgeries, would be for voluntary groups ie scouts, cubs. As we do have some money now SC will approach to see if they will match. Communication and follow-up are needed. SC asked what the Practice would like to raise money for – AT - a 24 hour blood pressure monitoring machine which costs about £1,500.00

A discussion was held – there is a voluntary sector that raises money; education has PTA's to raise extra money. Although patients may perceive GP surgeries have enough money, the NHS does not have enough to go round.

DT explained that we have joined with other surgeries; Angel Lane, Hatfield Broad Oak, Stansted and Elsenham to form South Uttlesford Neighbourhood which totals between 30-40,000 patients to look at the services offered. This could be the district nurses or a scanner at one surgery for all of these patients to have access to but would need to look at the travel situations for patients to get to it. Or it could be running exercise classes, fitness walks or food for the homeless becoming more community aware

VR – NHS England were offered a centre near Takeley to offer multiple services for the community but this does not fit in with their plan

AT – it was agreed JP would work with SC on fundraising and will update at the next meeting in March – **SC AND JP to action**

10. Neighbourhood Plan (Felsted) – KW – no update

11. Patient Survey

AT – gave hand-out – trend since 2009 showing we are in the middle 50% nationally which has gone up and down, going down gradually over last couple of years – **Action to be discussed at next Practice meeting.**

Questionnaires are sent randomly to patients. It is not known what criteria are used. Smaller surgeries fare better than larger ones; it is difficult to compare. DT – if we look at our surgery on NHS Choices, we have few comments; they tend only to be if not happy rather than happy with our service. AT said two patients had put complaints on this website without notifying the Practice in the first instance. This could have avoided the comments on the website. Most of our comments come from the booking-in screen at JTH or by card at Felsted – it would be good to have more positive comments

12. Patient Complaints – None at JTH, one at Felsted

KW - Mum had been told by health visitor to just 'drop-in' to the surgery to have baby weighed – letter sent to health visitor and parents to say incorrect, patient must have an appointment with a GP or take the baby to the clinic in Dunmow

13. AOB –

a. AT and KW– New members

Some members have retired from the group so new members are needed.

KW - would like to ask if the members would be able to ask one person to join the group as it would be better coming from a present member who they think would be able to contribute

DT – asked about the virtual group, would it be possible to ask if any of them would like to join the active group which meets about four times a year on a Tuesday lunchtime at the surgery. AT said there are about 200 who receive the newsletter. AJT asked if they could send any feedback for the actual meetings – **AT to action**

b. Blood test results and increase in medication

Blood results - a discussion was held as to what a receptionist is able to say to a patient. The GP will comment on the result ie normal or needs an appointment which is what the receptionist is able to give to the patient. If a GP has not commented the receptionist will ask a GP to look at the result before giving to the patient. GP's will also message reception to contact a patient if they need to make an appointment. Occasionally if a lot of tests have been requested, not all of them may be back at the time of the patient calling.

Medication – if a consultant writes to the GP asking them to increase a patient's medication, it is normal for the consultant to have notified the patient of the increase rather than the GP. If a GP increases, they will contact the patient

Action - both issues to be discussed at the next clinician meeting

c. One problem – one appointment

This is advisory to help GP's keep to time but GP's are aware that one problem can be linked with another and will be discussed with the patient

d. Minutes from last meeting

The minutes up on the noticeboard are from April rather than September – AT apologised

e. Minutes

At Felsted, the minutes are in a plastic wallet with a note saying 'Please take a copy' whereas at JTH a copy is laminated and on the notice board.

A discussion was held re having folders with the minutes, DNA hand-out, patient survey hand-out with perhaps a tear-off for patients asking if they would like to join the group and how the Practice could be improved – to be put on tables in waiting room - **AT to action**

AT wished everyone a Merry Christmas and thanked for their participation

Meeting closed at 14.15

**Date of next meeting TUESDAY 21st March 2017
at John Tasker House**