

## **Minutes of Patient Participation Group Meeting**

**21 October 2014**



### Present

Practice Manager                      Jan McCulloch  
Reception Supervisor                Aileen Money  
Admin Assistant                        Angeline Salani  
Scottish Health Council                Noreen Caldwell  
Patients – Michael D; Linda A; William C; John H; Kirstine D; Ed A; Pat B, Alison S

Next Meeting: 24 February 2015, 5pm, Barns Medical Practice (TBC)

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### **1. Apologies**

Apologies were received from Susan G; Nan G; Alex F

Thanks were made to Alex F for providing home baking for this meeting.

New members were welcomed.

### **2. Minutes of Previous Meeting**

The Minutes of the Previous Meeting were adopted as read.

### **3. Previous Meeting Actions**

The Group were informed that the Action Plan had been discussed in detail with the Practice Team, and an update was provided -

- **Patient Call System**

Using the Waiting Room notice boards, TV screen and Autumn Newsletter we have communicated the ability to alter the pronunciation and display of the call screen; also any patient requiring assistance when visiting the surgery should advise Reception staff who will record this for future use

- **Privacy in the Waiting Room**

We discussed the openness of the Waiting Room and the ability to hear conversations clearly, in some detail with staff. Using the Waiting Room displays, the Practice has announced the use of a private interview room for patients wishing to discuss sensitive matters. Staffing has been re-organised to prevent a telephone having to be answered downstairs unless in exceptional circumstances.

### **Discussion**

The Practice has a radio in the waiting room intended to divert attention from conversations between staff and patients at the reception desk. The usefulness of this was discussed and some of the group members present were not aware that there was a radio. As an experiment we tried a week without using it to see if it was of any great value. Staff feedback proved the need for some background music, and so the radio would be kept in the meantime.

Members of the Group suggested some alternatives such as showing a TV channel in the waiting room or playing music through the TV displays alongside the health promotion materials already displayed on the screens. It was suggested the Practice should investigate alternative options available with the patient call system provider.

A member of the group raised the point that patients are uncomfortable discussing things at the reception desk when there is a queue behind them. Having two Receptionists available should limit the build-up of queues, however it was inevitable that on occasion queues may build and so we would raise this with staff.

It was noted at this point, that although the Practice had made some provision for those with literacy needs by adapting the patient call system, we could offer further assistance to people who are asked to fill in forms or read information eg provide coloured overlays; staff complete forms; or staff carry out one to one interviews for feedback. Staff do offer assistance with form filling as required, and are sensitive to those with literacy needs, but it was acknowledged that perhaps more could be done.

#### **Action**

- Practice to investigate with waiting room call provider the ability to improve noise and run appropriate health promotion videos or background music.
- Contact Adult Learning Centre for advice on what support we could offer for those with literacy needs

#### ● **Telephone Access**

The Practice has acknowledged difficulties with the capacity of the current telephone system, and has informed patients of the intention to replace the current system before end of March 2015. We have also communicated the most recent telephone audit results, as suggested. A demonstration has been arranged with our current provider and patients from the PPG group were asked to attend the demonstration to give a patient perspective.

Since the last meeting the Practice team had been asked to encourage patients to call in for test results and non-urgent matters in the afternoon. It was suggested we should add this on all correspondence which invites patients to make contact eg annual review invitations

#### **Action**

- Arrange patient representation at the telephone system demonstration.
- Alter letters inviting patients to make contact, to do so in the afternoon where possible.

- **Ability to Book Preferred Doctor**

Since the last meeting another member of staff had been trained to process the doctors' rota so that appointments were available to book 4 weeks in advance. One staff member has been trained and another is soon to be trained.

The PPG had been asked to review the Practice' Appointment Information Leaflet and consider ways to reduce the number of patients who fail to attend or cancel appointments.

**Discussion**

A member of the group stated she was not aware that nurse appointments could be booked up to 12 weeks in advance until she read it on the Practice website, and often had not been able to do so. It was noted it was advantageous to have nursing appointments available 12 weeks ahead, so we would monitor this to ensure they are always available this far ahead, and also try to make sure patients are aware of this.

The Practice' Policy on Failure to Attend or Cancel Appointments was on display, along with a sample of the 3 letters in the process. It was noted between July and September 2014, approximately 18 hours per month of clinical time is wasted by those who fail to attend or cancel their appointment, and that we send two warning letters, before the third occasion when the patient is removed from the Practice patient list. The Group went on to discuss this in detail. To date we do not have any statistics on the type of letters sent ie whether it is a first, second or third letter but this data would now be recorded and shared at the next meeting. The group agreed the policy was fair and the letters were appropriate.

A member of the group asked if there were other means of cancelling appointments other than phoning as it can be difficult to get through early in the morning. It was discussed that patients can reply to the text reminder to cancel, however this appears to be misleading as the text reads "NHS No Reply". The practice will look into this. It is also possible to cancel appointments by emailing the Practice Mailbox.

**Actions**

- Monitor advance booking of nurse appointments; and ensure nursing team know that appointments are available to book 12 weeks ahead so they can advise patients as appropriate
- Practice to record type of letters sent to those who had failed to attend ie first, second or third letter so this can be audited
- Investigate with MJOG the text back service which encourages patients to text if unable to attend, but also states "NHS No Reply"
- Advertise more widely the use of Practice Mailbox for cancelling appointments

- **Online Prescription Ordering**

It was agreed at the last meeting that instructions would be provided for patients wishing to order prescriptions online. The Practice website provider had changed since this time, and so this had not yet happened. This will be completed in the near future.

### **Discussion**

It was noted the Practice already has a Patient Information Leaflet explaining the Prescription Service. It was thought instructions on how to order prescriptions online could be added to this rather than a separate document.

The Group suggested it may be worthwhile contacting Adult Learning Centres and local libraries to share our Practice website information and it was thought that sharing instructions in using online services may benefit all Practices.

### **Action**

- Update the patient information leaflet on Prescription Service, to include instructions on how to order online
- Test this new form with a PPG member
- Contact Adult Learning Centres and Local Libraries to discuss sharing instructions on Practice online services

### ● **Share PPG Views With Wider Population**

We have created a separate area in the Waiting Room to share Practice information with the patients. In this area, the Practice has displayed the results of the Healthcare Experience Survey, and Action Plan and Minutes of the first PPG meeting Room as well as summarising the action points in the Autumn Newsletter. A separate PPG section has been created on the Practice website too.

### **Discussion**

The Group appreciated the efforts to create a separate entity for patient communication and feedback, but felt that the section in the Waiting Room was not easily accessible as it was a popular seating area. The Group suggested providing hard copies for patients to take away if they did not have time to read the results, and it was thought this could also be emailed to patients (we currently have more than 1200 email addresses).

### **Action**

- Consider moving the “Patient Voice” to a more accessible area
- Provide a hard copy of the information for patients who do not have time to wait or read the display
- Email the collated information to all patients for whom we hold email addresses

### ● **Gather Feedback from the Wider Population**

We continue to recruit members to the Patient Participation Group, and display this through the Waiting Room notices.

### **Discussion**

The Group discussed the possibility of gathering feedback via an online survey sent to those with an email address. Results would be discussed with the PPG.

- **Report Back To The Practice**

The Action Plan had been drawn up following discussion at the first PPG, circulated to all members of the Group, and was basis of discussion at this second meeting.

#### **4. Review of Patient Information Leaflet – 48 Hour Access Appointments**

The Group had all been sent a copy of the information leaflet. They agreed the three-fold format and colour scheme was appropriate. Suggestions and comments made included –

- Typeface was a bit small
- Barns logo be used on all Practice information leaflets
- When asking for comments and suggestions, advertise patients could do this through the PPG also
- Asking patients to “Always Cancel Appointments” should be written in bold type
- The Pharmacist acute care is now called “Minor Ailments Service” not “Direct Care”
- Section asking patients to phone for blood/x-ray results, the intention of this was unclear

#### **Action**

- Update the Appointments Information leaflet, and share with the PPG for further comment before circulating

#### **5. Practice Website Review**

Those members of the Group with access to the website had been asked to review it ahead of the meeting. It was noted the website provider had changed in the last couple of weeks, as the previous company had ended trading. The Practice see the website as a medium to share the most up to date information about the Practice, and also to provide information for people moving into the area to enable them to choose a Practice. Suggestions and comments made included –

- Move Online Services to the top of the screen to avoid having to scroll down
- Photographs relating to healthcare rather than Ayr
- Advertise which Pharmacy is open during Public Holidays
- Replacing the alcohol questionnaire with smoking questionnaire would be more valid
- Ensure Practice boundary was clear. Could potential new patients check if their postcode was in our boundary area?
- It was unclear which areas of special interest the GPs had, would they consider sharing this information

The Group asked what effect the Ebola outbreak was having on the Practice. There had been no reported incidences within Ayrshire & Arran to date, Public Health provide information and guidance on incidence rates. It was suggested the Practice could advertise on the website precautionary measures.

#### **Action**

- Contact website provider to make changes, and ask about the further developments

- Discuss with GPs the suggestion they share information on any specialist areas of medical interest
- Add link providing up to date information on the Ebola outbreak

## 6. Winter Newsletter Design

The Practice produces a quarterly Newsletter to share information with the patient population. The PPG had access to the most recent Practice Newsletters and were asked what they felt would be of interest to patients to include in this year's Winter Newsletter. Suggestions included –

- Advertise the Barns Twitter account
- Details of the second PPG Meeting and summary of the Action Plan
- Results of the 2014/15 flu vaccination program
- Explain in further details the shingles catch up program
- Barns logo should be used on all

### Action

- Draft Winter Newsletter and share with the PPG prior to circulation

## 7. Flu Vaccinations 2014/15 – Practice Report

To date the Practice had vaccinated almost 1800 patients against flu, 1250 of these had been done at the Flu Open Clinics held on Monday 6 and Tuesday 7 October. The Practice run Open Clinics as early in the flu vaccination season as possible to ensure early immunity for a majority of patients. The Practice expected to give 2200 flu vaccines this season, with a further 250 to children aged 2-5 years. Members of the PPG who had experienced the Open Clinics said they had run smoothly. Efforts to vaccinate as many patients as early as possible were appreciated. Flu vaccination campaign continues until March 2015 for those over 65 years; with certain chronic conditions that puts them at greater risk including pregnancy; carers and all children aged 2- 5 years.

A member of the Group felt by changing the wording from “flu” to “influenza” in Practice promotional material would increase the seriousness of the condition.

It was noted Barns Practice had been top vaccinator in Ayrshire & Arran in recent years.

### Action

- Change all Practice information using the word “flu” to “influenza”

## 8. Any Other Business

The Practice updated the Group on Practice changes since the last meeting –

### Staffing

- Carly Malcolmson our Modern Apprentice trainee had left for University and been replaced by Diana Priestley who had come to us from Ayrshire College to gain work experience whilst studying for HNC in Health and Social Care.

- Una MacLeod, Receptionist, would be retiring at the end of December, and is being replaced by Andrea Sissons who would start on 1 November.
- Drs Judith Ndoumbe, Justin Akanihu and Sarah Dwyer had all joined the Practice in early August as part of their GP Training Program.

### Health and Safety Training

Staff had completed Violence and Aggression training. The Practice promotes the NHS Zero Tolerance campaign – abuse of staff either physical or verbal will not be tolerated and will result in instant removal from the Practice list. The PPG agreed with this policy. A poster was now displayed in the Waiting Room.

#### **Action**

- Contact Violence and Aggression Management trainer for practical learning session for staff

### Practice Leaflet

A member of the Group had noted the Practice Leaflet still listed contact details for Heathfield Hospital. As this hospital is now closed, this should be removed from the Leaflet.

#### **Action**

- Remove details of Heathfield Hospital from all correspondence

### Shingles

The Group asked for clarification of the shingles vaccination catch up campaign. It was noted that only patients aged 70 or 78-79 years of age at 1 September 2014 were eligible for vaccination this year. This means that if patients aged 70 years do not get vaccinated this year, they need to wait until they reach 78 years before they are eligible again. It was explained this is likely due to vaccine supply which is being managed by NHS Pharmacy. The catch up group be expanded in future years to capture those aged 71-77 years, but this is unknown for now. The Group asked if private vaccination was available, and the Practice reported based on information received last year, it was not.