Wordsworth Health Centre GP Practice

**P**atient **P**articipation **G**roup (**PPG**)

**Minutes Tuesday 17th May 2017 with action points**

**PRESENT:**

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| Saadet Sangha**Practice Manager (SS)** | Dr Hussain**(Dr H)** | Michael Wilson**Chairman PPG member (MW)** | Mehrunissa Bax**Vice Chairwoman PPG member (MB)** |
| Charlie Camenzuli **PPG member (CC)** | Mick Kalsey **PPG member (MK)** | Nilesh Chavda **PPG member (NC)** | Chandramohan G**PPG Member (CG) NEW attended 14/3/17** |
| Ted Sparrowhawk**PPG Member (TS) NEW attended 14/3/17** | Emel Islek**Secretary (EI)** |  **Apologies:**Aneeta Bansal **PPG Member (AB)** |

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| **Agenda Item** | **Minutes b/ f** | **RECOMMENDED ACTIONS/ OUTCOMES** |  |
| **By who** | **By when** |
| **Welcome and Apologies** |
| **Minutes of last meeting;** **ONLY corrections with view to agree** | Dr H/ MW - New PPG Handbook (introduced last meeting 17th May 2017 compiled and introduced by EI). MW - Existing PPG structure to remainMK - PPG members to use two months to do PPG work - allow meetings to be active.MW – Meeting Kate Byford of Newham CCG 2nd week of July 2017 to discuss surgery as a case study | Amendment to Constitution to be read and understood by all. PPG members explore ways to remain active.MW meeting Kate Byford – report back | AllAllMW | 11/07/17OngoingSept 17 |
| **Agenda Item** | **Minutes b/ f** | **RECOMMENDED ACTIONS/ OUTCOMES** |  |
| **By who** | **By when** |
| **Verbal report from Doctor and Staff representative** |
| **Staff movement** | Dr H – **Smarter working** has meant no need to recruit more Drs. Maximum of 14 patients called in per Dr. per day. |  |  |  |
| **Update ongoing practice projects** | Dr H – **Intranet p/w** to be given to MK; Dr H to share minutes on site.SS – **Triage flowchart appointment system** shown to PPG for reception triage. Appointment options now given to patients when asked for reason of appointment request. If not enough appointment, option given to use the co-op surgery appointments. Dr H – 99% of patient calls do not require GP intervention. Receptionists now filtering better with more available appointment slots.MW – **Current appointment** system?Dr H – Same day Dr call-back for emergency and Dr uses discretion for best option appointment according to patient need/ Dr face-to-face appointment can be booked next available within two weeks. Bottleneck reduced as patient no longer required to call from 8am for future appointments.Dr H – **NEW Pharmacist on site** assists Mon-Tue-Wed back of reception for minor ailments. MW – more appointments available? Dr H – had free 10 minute slots.Dr H – **Staff training** working to upgrade reception work skills which is not Dr led. Dr H freeing time to train staff as more productive for the surgery.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Working smarter, Drs less stressed**, more time to call patients and no long emergency lists: Mon 2x emergency Drs. Putting a cap on emergency calls has meant that where there were 60-70 calls a day NOW there are 20-25 calls. Can refer to urgent care centre. | Intranet p/w to be given to MW | Dr H to MW | 11/07/17 |

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| **Agenda Item** | **Minutes b/ f** | **RECOMMENDED ACTIONS/ OUTCOMES** |  |
| **By who** | **By when** |
| **Patient feedback** |
| **Patient suggestions** | Dr H/ SS – **CQC reported ‘caring’ is an improvement point** for Wordsworth. Rating was below NHS national/ local statistics. CCG and Satwant (practice CBT) carried out a survey of random groups to gain an ethos of the practice. Response was low. CQC worked on impact data as the CCG limits types of surveys that can be taken; must be independent. Internal survey not successful. Patient feedback required for:1. Older patients 4. Vulnerable patients2. Long term illness 5. Mental health patients (CQC ‘ outstanding’)3. Families/ young children 6. Working patients NC/ CG – **NHS email a/c requested** for PPG members to be able to communicate patient feedback to surgery/ PPG | PPG can focus on gaining more patient feedback. PPG to look at inviting external services to focus on improving patient feedback for the ‘caring’ CQC point 6. Working patient categoryExternal services involvement for all categoriesNHS email a/c set up for PPG a possibility?  | All PPG CGDr H/ SS | 11/07/17 – ongoing11/07/1711/07/17 |
| **Friends and Family Test findings** | None reportedMB/ NC – Friends/ family requiring improvement on better communication where English is a second language |  |  |  |

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| **Agenda Item** | **Minutes b/ f** | **RECOMMENDED ACTIONS/ OUTCOMES** |  |
| **By who** | **By when** |
| **Any Other Business** |
| **New items** | TS – **Critically ill** patient reported that they are told to see GP next day. System should flag to receptionist CI patient as can end up being admitted to hospital. \*Avoid Unnecessary Admission (AUA)MB - \*AUA’ system can fail as high risk patients make frequent hospital visitsDr H – **Video/ / Email/ Face time consultations** options are being exploredSS – **Receptionist floor walking**; to ask for patient feedback  | Dr H – Further training for reception to understand \*AUA to hospital CCG protocol.SS – Invite PPG members to meet reception – 10 minute slots.Arrange rota for receptionist floor walk | Dr HSSSS | Ongoing11/07/1711/07/17 |
| **Comments** | MW – **Online booking** used twice gave good feedbackMK/ MW/ EI – **NEW phone narrative** feedback very good; shorter and preciseSS – **Online prescription patient** request increased and medication wasted.MK – Has had issues ordering some/ all or even no medication onlineCM – Attended East Ham Health Welfare event.SS – **Did Not Attend** (DNA) rates are lowering for the surgery.MK – **PPG members for Wordsworth** to always voice their concerns and debate. Not to take anything personally.Dr H – Need to realise the potential of the PPG to improve/ maximise better outcomes. Work together on specific items.MW – Attended many CCG meetings; few PPG’s function well.Dr H praised SS as a great practice manager as one year ago the surgery was ‘requiring improvement’.MB – **NEW Part time Dr feedback** of being seen is ‘good’Dr H – **GP Conference** PPG to represent in future; TS will attend but not organise.EI – **Next CQC inspection?** 5 years’ time.CC – **Minor ailments service** cut-backs? More information to follow from NHS. |  |  |  |
| **Suggestions** | TS – Receptionists to know more about PPG and dates; good PR for surgery | Familiarise reception with PPG work/ dates  | SS | Ongoing |
| **Date of next meeting:** Tuesday 11th July 2017 |