# Minutes of Patient Participation Group

## **Held on Wednesday 1 February 2012**

at 1pm

In

## **The Conference Room**

#### Present

Dr Fordham (Chair)
Nina Cartwright (Minutes)
8 patients attended

Julie Rutter (Practice Manager)

Apologies

5 patients

Minutes of the Previous Meeting

Agreed as a true record.

Matters Arising

Nil.

#### Meet our GpR's

Dr Sarah Young (F2 – second year foundation) and Dr Ali Al-Sahab (Registrar – training to be a GP who qualified 11 years ago) were introduced to the group. Dr Fordham started by informing the PPG members that we had been a training practice for 3-4 years.

Sarah gave a brief outline of her current experience and her plans for the future which is to work within a hospital environment in medical specialities.

Ali then gave a brief outline of his experience over the last 11 years since qualifying including specialising in mental health issues and of his desires to become a general practitioner.

It was asked how the training programmes work and Julie Rutter explained for how long and in which areas registrars have to gain experience and qualifications in order to become fully qualified as GP's. Julie also explained that GP practices have to meet certain criteria/procedures

in order to become a training practice. Hence, not all GP practices meet the criteria to become training practices.

Dr Fordham asked if members of the PPG understood the role of the GPR and there was a general consensus that patients just assume a GPR is not a very experienced doctor. This however is not the case which was explained by Dr Fordham. Dr Young also explained the way in which GPR's are guided through supervision and guidance from their mentors. It was commented that it is important that patients understand that GPR's are more experienced than they are perceived to be. It was suggested that more information was put in the newsletter which might overcome this general perception. Perhaps a profile of GPR's could be given to patients when they come for an appointment with a GPR. Also, perhaps more information relating the experience of GPR's could be put on the notice board.

PPG members thanked Dr Young and Dr Al Sahab for giving a brief outline of the role of a GPR and commented that they found it very useful.

Action: Julie and Emma to look at ways of ensuring more information is available to patients relating to GPR's.

Action: Perhaps get a guest speaker on a regular basis – ideas welcome.

Role of Public Governor at Chesterfield Royal

The group watched a short film explaining what the role of a public governor entails.

Lou Wright – Carers Development Worker

Lou gave a brief outline of the work she does, namely:

- 1. Working with GP's in the North to provide support to carers
- 2. Working on Chesterfield Royal's EMU and CDU wards to support carers

Lou explained that she works alongside surgeries to support any carers and encourage them to register with their practice that they are a carer in order that the surgery understands their responsibilities. By registering that you are a carer, also ensure your needs at met as well as who you are caring for. If you register as a carer it does remain confidential. Lou also highlighted what information is given to carers when they do register and what support is available to help them with their caring responsibilities, also emphasizing a service which ensures that the cared for is still looked after if something were to happen to the carer. Lou explained that at the moment some funding has been made available to help carers perhaps have a break from caring and gave details on how to access this funding. It was asked if any volunteers were required for the carers service and Lou provided information on how to be a volunteer and that primarily the Derbyshire Volunteer Centre was on the lookout for volunteers.

Action: Drop in session for Lou to attend surgery to be arranged.

#### Update/News

Staffing

Julie informed the PPG that Jane had left the reception to start a new life down south. A replacement receptionist called Debbie will be joining the practice shortly.

Online Appointments

Not up and running as yet but Julie has been in contact with a system administrator regarding this issue

Appointment System

We are still looking at appointments to see how many are available and how changes affect availability of appointments. Some alterations have been made. It was established that we were keeping too many urgent same day appointments back and so more routine book in advance appointments have been made available. Also, more available appointments for both GP's and GpR's have been opened up. It was commented on how annoying it is to see the number of patients failing to attend appointments. Julie Rutter commented that if a patient fails to attend on more than 2 occasions, we send a letter to the patient stating that it is at the discretion of the surgery if we wish to remove them from our list for wasting valuable clinic appointments. Claire asked if reminder texts could be sent 1 day before rather than 2 days before which may prevent patients from forgetting their appointments. Julie explained that it was felt that 2 days notice allowed was a sufficient time for appointments to be rebooked if a patient realised on receiving a text message that they no longer needed it. It was also commented that the text service should be advertised more widely, perhaps put in the Newsletter and distributed elsewhere.

It was also mentioned that telephone advice was not always offered to patients and that some patients were not aware it was an option.

Action: Telephone advice option information to be included in next Newsletter. Text service to be promoted further.

Reception

No plans are available as yet. Julie has met with the builder but he has not come back with any drawings as yet. Julie asked if any PPG members would be interested in having an active role of attending meetings to give ideas/views during the planning process.

Reception Team (survey outcome)

A meeting has been held with the receptionists and both positive and negative comments were given but they did appreciate there is room for improvement. Ongoing training is being provided. Perhaps have a buddy system and film each other and share any faults or good points. It was asked why receptionists ask what an appointment is required for and both Julie and Emma agreed that this was not procedure and it would be taken up with the reception team.

### Any Other Business

Claire mentioned that she saw a very nice doctor but because there were not toys in the room so in order to occupy her child, the doctor gave out a no smoking card twice as distraction.

Action: Toys to be provided in each consulting room.

Claire asked what influence, if any, did GP's have on TV advertisements as she felt that the last two (relating the lung and bowel cancer) were scaring people. Julie advised that GP have no influence over what advertisements are made by the Department of Health but that they can feed back if required.

Dr Fordham closed the meeting and thanked everybody for attending.

Date of Next Meeting : Wednesday 25 April 2012 at 6pm