

Willington Medical Practice Patient Participation Group (PPG)

Thursday 20th July 2017 at Willington Surgery, Kingfisher Lane

Present: Joan Burton, Pat Harvey, Margaret Hooley (chairperson), Peter Horridge, Sally Lovatt (secretary), Louise Scheck, Christine Thorne, Gareth Tully

Apologies: Christine Bould, Joyce Hargreaves, Janice Heier (treasurer), Michael Pritchard, Ann Wood

From the last meeting

The minutes of the last meeting were approved.

Flu Clinics

The vaccinations start to arrive in September so clinics likely to start in late September. PPG to use clinics to fund raise and hand out leaflets, as discussed at the last meeting (making best of appointment, cost of missed appointments, seeing regular doctor etc.). LS needs to discuss dates for clinics with nurses and will inform group. SL to draft leaflet (PeH has offered to help with draft) and this will be circulated during the break and an extra sub group may meet to finalise. **(SL, PeH and LS)**

Mat at front door

GPs have agreed to suggestion and contact to be made with Alzheimer's Society regarding colour. **(SL)**

PPG Locker

Space has been allocated in kitchen for PPG drink supplies. We need a labelled box for storage. **(PaH)**

Recorded messages on waiting room screens

This system is provided by CCG and videos are supplied but the practice can install their own. LS and GT to liaise to build up Willington programmes. A GP from another surgery has shared a video that compares costs of services and effects of missing appointments that could be utilised. **(LS >)**

Text Messages

The group wondered if the text message could be extended to emphasise the importance of attending appointments. LS will liaise with reception manager. **(LS)**

Queues

Very helpful staff training was held recently and encouraged reception staff to speak to the queue, apologise and make patients aware of 'self-check in'; that colleagues behind reception are dealing with other patients on phones but are aware of the queue and will help as soon as possible. The emphasis was communication, listening and giving clear information (and all with a smile). The GPs are not keen on one-way glass.

Signage

New signage at the front door is a future consideration but for now a notice has been placed to inform patients that for clinics upstairs they make their way upstairs by lift or up stairs and wait in the reception area until called for appointments.

Missed appointments

If patients do not attend then after 3 warnings they are at risk of being deregistered. There are exceptions and the issue of children missing appointments is being investigated – if children book and miss and why parents do not attend with a child when an appointment is booked.

Treasurer's report

C/A £2293.01; R/A £1043.37; Petty Cash £21.86. No change.

Surgery Update

No staff changes. Suggestion from GPs that an event similar to event held at Measham Medical Unit could be held. Village Tea Party including an overview of services available, talk from a Doctor and a chance to ask questions. Some information stands such as 'Carers' could be incorporated. The group were happy to tackle this and will begin to organise at next meeting. The problems the surgeries are facing are partly exacerbated by lack of stability at the CCG. Staff are continually moving position or leaving.

The practice is considering inviting small groups of patients (mainly elderly) to come to the surgery and chat with one of the staff members in an informal manner over tea and biscuits. PPG may be able to help with refreshments.

Currently there are two versions of clinical codes. Not all GP systems use the same coding system. Parts of the Read code vocabulary are full and new codes have been allocated to unrelated areas, which makes analysis more difficult. The NHS needs a single clinical terminology, for clinical data to be exchanged accurately and consistently across all care settings. This will allow better patient care and improve how clinical data analysis and reporting.

SNOMED CT is an international clinical terminology and allows the UK to take part in more effective research and analysis of health information, to support health care improvements.

Hub

LS updated the group about the hub, which is the 'place' based group of 9 surgeries. The GPs have had a form a limited company for financing which gives more flexibility for future planning. One suggestion is that the practices combine the money received for winter pressures to provide one 'home visiting service' during the winter. Currently, GPs are working at Hub as the Advanced Nurse Practitioners to be provided by DHU are not fully available. There are now appointments for Saturdays and evenings but currently only 8 each week for this practice and there is some resistance from patients to attend. The appointments can only be used for acute problems.

MiG (Medical Interoperability Gateway)

What is the MIG?

The MIG is a secure technology, which enables the two-way exchange of patient information between local healthcare settings. It provides real-time patient information where it is needed, when it is needed. This has helped the NHS to improve the efficiency and standard of care by reducing un-necessary hospital appointments and duplicate examinations.

Why is the MIG different?

Unlike other technologies, the MIG doesn't use a repository to store data. This means that clinicians at the point of care will always have access to a live feed of data that includes the most up to date information about the patient. The MIG uses service discovery to locate patient data, which is held across different systems. It identifies all the services involved in a patient's care and presents this information in a single application. The service is 'read only' and will be used, for example, by paramedics and social services. It will aid in the aim of 'joined up' health and social care. The frailty clinic at Willington is to be 21st October 2017 and support from PPG will be required on that day for refreshments.

Any Other Business

SL reported that Derbyshire Carers hold sessions at Wellbrook Surgery in Hilton. Is this available to carers from other surgeries and advertised? SL is to contact Lisa Barker and investigate. **(SL)**

SL highlighted the CCG report, which showed little mention of interaction with PPGs. LS repeated the issue of lack of stability within CCG.

SL had been prompted by a patient complaint to reinstate the PPG suggestion box so this will be actioned and suggestion slips made available. **(SL)**

PeH suggested a 'time and motion' survey for reception to try and quantify the interaction with patients and then possibly find solutions to reducing queue length. This was agreed as very useful but currently the staff are busy with a survey collating information on 'signposting' and encouraging completion of patient questionnaires. LS will action when convenient. **(LS)**

CT had attended a meeting held by HealthWatch on the subject of Derbyshire Sustainability and Transformation Plan: Joined Up Care Derbyshire. Further information can be found as follows:

<http://www.healthwatchderbyshire.co.uk/stp-derbyshire-joined-care/healthwatch-updates/>

<https://www.england.nhs.uk/stps/>

Next meeting 21st September 2017 at the surgery at 7pm

Agenda Items please forward to Margaret

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