

## Minutes of the Haddenham Medical Centre PPG Meeting Tuesday 19 April 2016

Nineteen patient members of the PPG attended the meeting in addition to six members of staff, the Chairman, Vice Chairman and Acting Minute Secretary

The Chairman opened the meeting, by welcoming everyone and thanking them for their attendance.

Dr Howcutt was unable to attend the meeting. Dr West kindly attended in his place.

### 1. Practice Report:

a) a number of staff changes have taken place. Judy retired after 26 years and Linda has moved on. Two new receptionists have been appointed, one for the morning sessions and one for the afternoon sessions. Both have previous experience in similar roles.

b) A new phone system is being installed on 20 April 2016 which should address a number of concerns raised from patients.

- It will be a 'cloud' based system, allowing greater flexibility for tailoring and amending as required.
- There will be menu options, allowing callers to reach appropriate staff directly and avoid a potential bottleneck at Reception.
- There will be the opportunity to put informative recordings on the system for patients to hear while on hold (e.g., flu vaccination schedules, etc).
- The hardware can remain the same – so providing cost savings.

c) The recently published local GP League tables (based on the latest patient survey results) placed the Haddenham practice in a very low position. Practice Manager, Ellen Solley, expressed the disappointment felt by all staff at the Medical Centre. Such data affects the morale of staff and does not help patient perceptions. However, it was noted that the data was driven by just 121 patient responses from those sent out randomly by the Health Authority. This practice serves 8,100 patients, so the survey is of very questionable validity.

Ellen went on to address some of the information raised from the survey:

- Criticisms about getting through on the telephone: this is now being addressed by means of the newly installed system.
- 80% cited the receptionists as 'helpful'. To improve this further, additional training has been given to the staff and additional staff are now on the team.
- 81% mentioned not being able to see or speak to their preferred GP. This was a genuine shock to the practice, as the triage system in operation has helped to a huge extent and the survey results are not consistent with the verbal feedback that is received from patients. The delay to see a specific doctor is about three weeks, which is similar to other practices in the area. Haddenham has one of the most mature patient demographics in the County, which increases demand for GP services. There is also increasing demand more generally, which has a massive impact on the availability of appointments. The ongoing junior doctors' strikes are also having a negative impact.
- 70% mentioned that the waiting time to see a doctor was 15 minutes or less – a positive finding. Some individual patients require more time when consulting their GP for complex problems, which will occasionally slow things up for those waiting. The Chairman reminded the meeting that the PPG's recent car park survey showed very speedy turnaround of visiting vehicles, with the vast majority arriving and leaving in about 20 minutes.

Most discussion to this point had focused on Haddenham's results in isolation. The PPG Chairman was keen to hear more about comparisons with other General Practices and to understand how/why the Haddenham Practice scored so poorly in the local league tables. He was fearful that patients living in the village for many years were perhaps basing their expectations on the GP service levels they had experienced at the former Health Centre when financial and other NHS resources were far more plentiful than is now the case. It is also true that individuals who are dissatisfied or unhappy about a service are more likely to respond to surveys to complain than are 'happy consumers' to offer accolades. He suspected that these survey results were very

questionable, especially when you take into account the fact that a GP Practice near Aylesbury that is currently “imploding” and likely to cease operating very soon actually scored higher on the league tables than the Haddenham Practice!

He was concerned about falsely negative perceptions of the Haddenham Practice and wondered what could be done to help turn around these perceptions, so as to reflect the very good service that is actually offered here. The vast majority of patients are extremely happy with the care they receive at the Haddenham Medical Centre once they get to see a doctor or nurse – the main challenge is the difficulty faced to get an appointment.

Dr West, once again referred to the demoralising affect that the data had on the staff. Also recognised that making change is very difficult – perceptions can lag behind when improvements are made. There was some discussion around possible ways in which the communication with the patients could be improved. The Haddenham Library was raised as a possible link in the chain. It was also suggested that specific communications from the Medical Centre be placed in the body of the ‘Village News’ rather than included as a ‘Health News’ insert, which is not as widely read. Patients can read the GP Survey results here: <http://tinyurl.com/j5u8zjq>

## **2. Dr West’s Commentary**

Dr West spoke about her additional role linked with the Aylesbury Clinical Commissioning Group (CCG). The Secondary and Primary care givers will be responsible for commissioning the ‘Care Plan’ approach. This will mean that, prior to a consultation with the Health Professional, information and relevant data will be gathered and given to the patient so that more meaningful discussion can be held and the patients can be more involved in decisions about treatment options, etc.

The CCG looks at the quality of primary care. This is done through the GP survey, as has already been referred to, but is also through the *Friends and Family* survey which is regularly undertaken within the practice. How primary care is measured fairly and effectively is a real issue. Inevitably, there is a link between quality of primary care and the number of GPs available.

The integration of the Health and Social Care Givers (providing more cohesive services across these historical boundaries) is a massive piece of work. One of the main issues remains the fact that the NHS is provided free but the Social Care is not. There are other aspects to consider, including mental health services and A&E provision. Many healthcare professionals would say that GP services are at crisis point.

GP Practices are looking to share good practice and there are some good examples of collaboration happening.

## **3. Online Test Results**

Patient test results are now available on line. Enabling this has had various technical and privacy challenges to overcome. Various concerns over confidentiality remain, which means that patients are required to provide a written signature confirming that they understand and agree the access and confidentiality parameters. This document needs to be signed before the results can be communicated through the on-line service. So whilst the system is now available, it is currently only available to a limited number of people. The feedback from those able to access their personal medical data in this way has been excellent.

## **4. PPG 200 Club**

Lesley Coles reported that there are 144 people involved in the monthly Draw with an aim of getting 200 people to sign up. There is a current balance of £5,400. This will partly fund future Draw prizes as well as new medical equipment for the Practice. A financial report will be presented to the PPG in the near future.

To enhance fundraising, Tea parties and coffee mornings are held throughout the year. Anyone wishing to host such an occasion is very welcome – please organise through Lesley (07711 832898 / email [lesleycoles.uk@googlemail.com](mailto:lesleycoles.uk@googlemail.com)). Heart-warming reports were fed back about the financial rewards being received by the patients who benefit from the draw.

The ECG machine identified as a piece of equipment by the Practice for its use is to be demonstrated to the doctors in the near future, for them to determine the most appropriate one

for purchase from PPG fundraising. The nurses are very pleased with the new air conditioning unit in their room.

The new patient information TV screen is up in the waiting room.

**5.** A member asked who held the responsibility for triggering a prescriptions medication review when advised on his repeat prescription that one was required. The response was that it needs to be the patient and a telephone appointment with a GP should be booked.

Another member also wanted to know how to redress inaccurate information on their patient notes. The response was that they need to formally write to the Practice Manager. Information cannot be changed on the existing records, but '*a point of information*' can be added.

**6.** The new signage, agreed at previous PPG meetings, has been installed. One defines what patients can expect of staff and vice versa, and is mounted on the wall in Reception. In the car park many signs have been erected reminding everyone that car parking facilities are for those visiting the medical centre or the pharmacy only. Additional signage will also appear shortly, designed to take into account patients suffering with Dementia, visual impairment and those with autism. The staff at the Practice have also completed training on supporting patients with dementia.

**7.** The Aylesbury Vale CCG will be hosting a meeting to enable networking between local PPGs on Thurs 28<sup>th</sup> April. Our PPG will be represented by Barry Lynch, Lesley Coles and Robert Giles.

**8.** Our next PPG meeting: Thursday 30 June 2016 at 7.00pm at The Medical Centre