

6th SPRING HALL PATIENT PARTICIPATION GROUP MEETING

Wednesday 11th December 2013

Patients and staff in attendance:

Dr Nagpaul	GP
Tracy Worrall	Deputy Manager
Julie O'Grady	Secretary
Jeanette Cliff –Taylor	Productive general practice
VI	Patient
RH	Patient
CT	Patient
EH-T	Patient
MA	Patient
PF	Patient
PF	Patient

Dr Nagpaul introduced herself and thanked everyone for coming to the meeting and asked everyone to introduce themselves. She explained that this evening we had a lady called Jeanette in from the Institute for Innovation and Improvement who was going to explain about a new project which the practice are doing called Productive General Practice.

Jeanette explained the Productive General Practice was a programme which had been purchased by the local CCG for 23 practices. She then showed the group a video overview which explained the programme as a whole. A Link to the video shown has been added below as one of the patients attending thought it would be a good idea for anyone unable to attend the meeting but who may still be interested in what Productive General Practice is all about.

<http://link.brightcove.com/services/player/bcpid1336126317001?bckey=AQ~~,AAAAAPa77Nk~,4EePZLxh-HRXX6acV1esihxulwDZ8T7x&bclid=1336105912001&bctid=1436009544001>

The video explains what each of the modules are and how they link together with the aim of making staff and patients lives better.

Jeanette explained that so far the practice have done the initial data collection for the Knowing how we are doing module and asked if any of the patients had been involved in the data collection. Several of the patients put their hands up as they had been very generous and given up their time to help patient to fill out the patient survey. All of the results of this survey were available to view at the meeting and will also be available on our website www.springhallgrouppractice.co.uk/.

Jeanette explained that the programme is not regimented and can be adapted to suit each individual practice and the way they work already, allowing us to get the best possible information out of our data collections. She explained that the whole structure of the programme is around improving the patients experience and staff well being. Each of the modules requires lots of data collection and in the knowing how we are doing module we went to extreme lengths to ensure that all of the data collected from staff was done so anonymously allowing them to give honest opinions. Each module also has areas where

patient's opinions are taken into account and we would like to know of anyone who would be happy to help in these areas.

Mr PF asked if all of the modules interlinked and would time be wasted collecting the same information again and again. Tracy explained that each module does interlink but the data collected for one module could be used where appropriate for any of the other modules.

Jeanette discussed the results of the patient survey which had been taken as part of the Productive general practice data collection week. Unlike the usual survey the practice would complete, this one concentrated more on the how the patient felt throughout. From calling the surgery to book an appointment right up to the point of leaving the surgery after the appointment. The results of this survey have been published on the web site. It was noted that in most cases the patients felt happy with the service provided. It was agreed that for this year the surgery would not do the usual survey as they all agreed this one had given a very good insight into how the patients actually feel about the whole process and that as the practice move forward with Productive general practice they will be able to address all issues raised.

Julie O'Grady explained that the surgery is always making changes when we see areas which are not working and we have recently made a change to the way we record prescription collections. These are now being recorded on the patient's records on the actual issue of the prescription and should help to cut down on the time we spend looking for lost prescriptions. We are now recording who collected the prescriptions and when it was collected. We had decided to alter this before doing the prescriptions module as it was an area causing us a lot of problems, but had we done the module first we would have had the evidence for the time wasted looking for prescriptions and then after the change we would have been able to see the time saved. Dr Nagpaul announced that next year we would be switching to electronic prescribing where the prescription would just be sent directly to the pharmacy of your choice electronically, saving on lost prescriptions and also paper.

Dr Nagpaul said she had been in the back of reception one day and had watch one of our admin team answer 3 telephone calls for blood results which were normal this had interrupted her work on summarising. She explained that she has since noticed a tick box on the computer which if ticked when filing the blood result, will send a text to the patient. She thought this would be very useful for results which come back normal and would hopefully cut down on the amount of time that staff are disturbed for a result which is normal. It was agreed that for results which are not normal these should still be passed to admin who will contact the patient and will not complete the task until the patient has been spoken to and advised of the next course of action.

One patient asked if a text could be sent to advise that a medication review is due. Tracy explained that we deliberately set your annual medication review date as your birthday so that patients can remember that they need to be seen in that month for review. Also any new medications given are given for only a few issues at first until the doctor is happy that they are doing the job prescribed for with no side effects. Once a patient has collected the last issue the pharmacy should advise that you will need a review before you can get another prescription at that point you have 28 days to arrange your appointment.

Mr CT suggested it would be nice to have a representative from the pharmacy at the next patient meeting, we felt this is a very useful suggestion and will endeavour to invite both living care and boots to the next meeting.

Mr CT asked what outcomes we were hoping to achieve from this meeting as we only have a limited audience at the meeting. He suggested that a link be added to the website so that anyone who didn't attend would still be able to see what it was all about. The link to the video is at the beginning of this document. Tracy explained we would like some to know of

anyone who may be interested in volunteering to help with either the data collection coming up or with giving their opinions on some of the data collection sheets.

Dr Nagpaul thanked the patients present who had already helped the surgery with our data collection week in September and also to all of the patients who had helped on our Flu days. The patients help with the data collection had been greatly appreciated and had allowed patients to give honest opinions when being helped to fill out the questionnaires as it was not a member of staff helping, and also freed up valuable staff time. Again those patients who helped on flu day were also appreciated and one of the patients attending the group after having helped on flu day had a few suggestions to make to help the day run smoother in future. Mr PF suggested that the right hand side of the surgery be devoted to the measuring section, using the tape and chairs to cordon the area off slightly making a more usable space. He suggested that maybe three more manual bp machines and 3 sets of scales and height measure could be used to make the whole process much quicker and run smoother. He asked that hand cleanser be provided for the helpers. All of these suggestions will be acted on at the next flu season. It was great for the practice to get the opinion from someone with fresh eyes on the situation. Sometimes it is easy to do things a certain way because it has always been done that way. This is why the practice are doing the productive general practice, we are hoping to find new and better ways of doing lots of things at the surgery, things that will enhance the patients experience when dealing with the practice.