

Minutes of Patient Participation Group Meeting

6 June 2017



Present

Practice Manager Jan McCulloch

Office Manager Aileen Money

Admin Assistant Angeline Salani

Patients – 11 patient group members attended

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Thanks were made to Alex again for providing home baking for the meeting.

1. Minutes of Previous Meeting

The minutes of the previous meeting were adopted as read.

2. Previous Meeting Actions

The Group were informed that all previous actions had been completed or were in hand.

- Janey Anderson from South Ayrshire Council Sports Development had been in to update a display board in the foyer with the available leaflets and posters.
- Newsletters will be distributed to Nursing Homes and patient homes by on call practitioner out on visits in the future.
- Appointments leaflet had been updated to include the services of other healthcare professionals ie Pharmacy Minor Ailment scheme, Practice Physiotherapy and Eyecare Ayrshire
- Aileen had updated the Practice Information folders, but we discussed again the possibility of a pod in the Waiting Room for patients to access online health information.
 - Action – investigate possibility of standalone PC for Waiting Room to allow access to health information

3. Online Survey

The PPG in its current form had been running now for 3 years, and the aims outlined at the first meeting were reviewed, as well as an overview of the work carried out as a result of PPG involvement. It was agreed the priorities of the Group should be updated annually.

With the large number of patients interested in the PPG, it was agreed an online survey would be put to everyone to gauge the skills and interests of the group and canvas suggestions for future discussion topics. It is hoped we can encourage more involvement from those who are unable to attend meetings, get younger people involved and enter partnerships with local groups to work together for the benefit of the entire patient population. It was suggested that we contact the local college and university campus to try to get the younger demographic involved.

Suggestions discussed recently within the Practice were put to the group – starting a walking group, and a therapeutic choir, both of which were positively received. The patient group were encouraged to become involved in these activities.

- Action – Survey to be put to all members of the PPG

4. GP Recruitment

As part of our GP recruitment drive to replace Dr Hulme's position, the Practice had gone to a BMA GP Speed Dating event and featured on the BBC News as a result. The advert is still open and it is hoped that these efforts will raise the profile of the Practice and attract some candidates.

The Practice already has a well established model multi disciplinary team working ie a range of nursing skills including 3 Nurse Practitioners, and also a Pharmacist and Physiotherapist. All of whom have been well received by the patients.

The Practice plans to restructure the GP working day, with doctors increasing the number of sessions worked, to provide enough cover if we are unable to replace Dr Hulme in the short term.

5. Telephone System

A new telephone system was installed on 29 March, and though there had been some teething troubles, the Group were asked for feedback -

- Call queuing system was viewed positively – being told what number you are in the queue was worthwhile
- When the caller is placed on hold, rather than a tone, we have now asked for music to be played so the caller did not think they had been cut off
- Some reported the message was too quiet, and this would therefore be changed
- The prescription line is working well with no reported problems

- An order had been placed for 2 extra lines, and to merge current lines, therefore providing 8 telephone lines in total

The Practice reported a catastrophic error had occurred on Monday when the telephone lines were being merged, our mainline number had been unavailable. Though this took time for the telecoms team to repair, the Practice team had responded quickly sending out texts, emails and social media messages informing patients of the problem, and had been able to divert calls to a mobile number once that option became available. Normal service was resumed by Tuesday lunchtime. The Group commented that the text and email contact was particularly appreciated.

- Action

6. Complaints Update

From 1st April 2017 the guidelines on handling comments concerns and complaints changed. The Practice has always had tight procedures in place and the group were shown the new three stage NHS Model Complaints Handling Procedure. The Practice leaflet on complaints was updated to reflect the changes and circulated to the group.

7. National eHealth Strategy/ Barns eHealth Strategy

The Scottish Government and NHS Scotland have had a national policy in place for many years to support health policy aims such as improving quality of care and enabling shared decision making with patients. The Scottish Government's vision is that health and wellbeing can be better supported through greater use of digital technology and the Group reviewed some of the work being done nationally as a result.

The Barns team have their own eHealth Strategy that meets and exceeds the expectations of the National eHealth Strategy. At a recent Practice Development event the team discussed the following -

- FaceTime/Skype consultations
- Email information leaflets
- Online patient services
 - ❖ Appointments
 - ❖ Prescriptions
 - ❖ Test results
- Improving recall services
- Educational Videos

The group felt Skype consultations were the way forward and agreed that being emailed test results was a good idea but had concerns over the

confidential nature of doing so. It was discussed that consent would have to be obtained from the patient on each visit to ensure confidentiality.

A self check-in was also discussed and as a result of the consultation with the PPG, the Practice considered that some of these developments be put to a public vote giving patients an opportunity to help in the decision making process.

- Educational videos were discussed and agreed that this would be a great way of showing patients who may have literacy, language or hearing difficulties a visual aid, enabling them to improve their health and wellbeing. To raise awareness of the different roles of the nursing team, it was suggested that the nursing team could make introduction videos outlining their skills and the services they offer.
 - **Action** – canvas opinion from the entire group on the suggested developments

8. Any Other Business

- **Patient Comments** – it was suggested a water cooler be installed in the waiting room and hand sanitizer be available in the toilets. Both of these suggestions have been considered and discounted. We have a water cooler in the admin area and patients can ask for water. We provide soap and paper towels in the toilets for hand hygiene.
 - **Action** – update notice boards and newsletter with “you said, we did” information
- **Rise in number of patients failing to attend appointments** – a large number of appointments are wasted each month by people failing to attend despite text reminders being sent, the ability to cancel an appointment by text. Many unattended appointments are made on the day or on the day before and the group were asked for their suggestions on how this can be avoided. It was agreed that the Practice would carry out some further analysis on the type of appointments missed, how far in advance the appointment was made etc for one month. It was suggested that we send an initial text stating “We note that you have failed to keep your appointment.....” in a bid to make people more aware of the problem.
 - **Action** – carry out appointment analysis for one month
- **Practice Website – mobile friendly version** – The group were asked if they were aware of the change to the Practice website from a desktop site to a mobile friendly site. It was thought that the changes made it more difficult to find information and that the photo at the top was too

big. (Changes have since been made to reduce the size of the photo, therefore making it more user friendly).

- **SPIRE (Scottish Primary Care Information Resource)**

SPIRE is a NHS Scotland initiative which gathers anonymised data from GP records to help plan services and improve the quality of care provided in the future. More information can be found at www.spire.scot

SPIRE is an opt-out initiative launched in March 2017. Some of the group members were aware of it and had chosen to opt-out however, despite a widespread media campaign many of the group were not aware of it. The Practice has been asked to install the software required for data collection and the group had mixed feelings about this. Questions were raised as to the kind of data collected and what it would be used for. There was general disquiet about how the collected information might be used. It was also felt that it should be an opt-in scheme rather than an opt-out. Jan agreed to contact the SPIRE team for more information and to relay the concerns.

- **Action** – Contact SPIRE team with concerns of the group

Circulate SPIRE information in waiting room and through social media

- **Starlight Walk**

A team of Practice staff recently took part in the Ayrshire Hospice Starlight Walk. The Practice carried out various fundraising events including a raffle, bake sales, guess the sweets in the jar and a bonus ball competition. We raised £1385.

The next meeting will be held on Tuesday 3 October.