**Norwood Medical Centre**

**Notes of a Meeting of the Patient Participation Group on 23/11/12**

**Present: Paul Mayes, Marjorie Arts, Pat Molyneux, Mr and Mrs Forshaw, Terry Braithwaite**

**Caroline Lee and Lorraine Skillicorn from the practice**

1. **Apologies- apologies were received from Diane Shereston, Sally Hearty and Kerry Gurney**
2. **Updates**
   * **Caroline updated the group on developments since the last meeting. Unfortunately there had been little progress on the plan for CHOC (out of hours service) to provide day time urgent care for practices in Barrow, allowing them to use doctor time more effectively for long term conditions rather than minor illness. Caroline reported that so far CHOC had not managed to recruit any doctors for this service and so at this point the practice was unable to increase the number of appointments available with the partners. The plan is to re-advertise and Caroline will update the group on progress at the next meeting.**
   * **Caroline also reported that little progress had been made with the plans for new premises but that she would let the group know when there was any news.**
   * **Caroline reported that Dr Burroughs would be on maternity leave from December and that Dr Boardman was leaving to take on an exciting role developing children’s services across Cumbria from January 2013. Drs Arun, Turner and Mohan are all increasing their hours to cover some of the appointments but that the practice are still looking for suitable cover for Dr Boardman.**
   * **Caroline also explained that the Primary Care Trust would cease to exist from April 2013 and that the new Clinical Commissioning Group would take its place. She agreed to give a brief presentation on the new structure of the NHS organisations at the next meeting.**
   * **Caroline shared with the group the training sessions that have taken place in the practice on the half day per month that we close. These include fire training, dignity and respect and training for new receptionists.**
   * **Other work that has been going on in the practice includes meeting with a representative from the local Blind Society to improve services for the visually impaired. An action plan was drawn up and all actions completed. We have also met with MIND and other mental health organisations to improve communication and joint working.**
   * **In addition Caroline fed back that following a suggestion from Kerry Gurney at the last meeting the ‘baby immunisation’ clinic was now held downstairs making access easier for Mums.**
   * **Caroline also reported that since the last meeting one of the treatment rooms had been completely refitted to ensure compliance with control of infection guidelines.**
   * **Caroline explained that from April 2013 all practices would be registered with the CQC ( Care Quality Commission) who would visits to ensure appropriate standards were being met within the practice.**
3. **Issues/problems**

* **Radio- Mr Mayes asked that the radio station playing in the building could be something mellower than radio one. Caroline agreed to action with the reception staff.**
* **Appointments with particular doctors- this was discussed and Caroline explained some of the difficulties. She said that if CHOC managed to employ some doctors for the ‘same day’ care plan, then the number of appointments with the GPs would increase significantly as they would not need to each cover an ‘on call’ day. She also said that by employing our ‘Emergency Care Practitioner, David Kenrick, she had been able to release some doctor time for routine appointments, but not as much as she had hoped due to increased demand for ‘same day’ appointments. Caroline also explained that the practice was keen not to take on more patients due to the problems patients experience getting appointments but that the practice had no choice but to keep its list open to any new patients who wish to register as this is a contractual obligation. There was some discussion about how the appointment system worked and Caroline said there was an information sheet regarding this on the website and she would make sure it was given to all new patients and displayed in the waiting rooms. Mr Braithwaite asked if the community dermatology service reduced the appointments available to regular patients but Caroline explained that this service was ‘extra’ and had no impact on the number of appointments available.**
* **Mr Mayes asked if the door could not be opened before 8am when it was raining and people were queuing outside. Caroline apologised for this but explained that this was a security issue as until 8am there was only one receptionist in the building and it was therefore not safe to have the doors open but that she would ask the receptionists to be as flexible as possible in very bad weather. Ms Arts suggested getting an awning over the door.**
* **Mr Mayes said that he objected to telling the reception staff what was wrong with him when he wanted an appointment. Caroline said that this should only happen if the request was for a ‘same day appointment or phone call and was requested by the doctor so that they could prioritise when busy. She pointed out, however, that there was no obligation to give this information if the patient was not happy to do so.**
* **The issue of the ‘front desk’ reception staff answering the phone was discussed. Caroline said that while we tried to avoid this it was sometimes necessary when we are short staffed as we don’t like to leave people waiting a long time to have their call answered. She said there had been a lot of staff sickness over the past 6 months but that that is now coming to an end and we will hopefully be fully staffed.**
* **Ms Arts raised the issue of communication between the hospital and the practice with a particular example of confusion and delay over a prescription. Caroline agreed that this was sometimes a problem and that, while she shared the frustration, the practice had no control over the systems within the hospital so that when the mistake lay within the hospital there was little she could do other than to feedback the issue to the hospital.**
* **Mrs Forshaw raised an issue over her medication which Lorraine said she would sort out.**
* **Mrs Molyneux fed back that her appointment with Angela had been cancelled the previous week and that while the staff tried to call her to let her know, they did not leave a message. Caroline said that a message should have been left and that she would follow this up.**
* **On a positive note everyone felt that the flu clinics were very well run and thought having them on a Saturday was a good idea.**

1. **Patient Satisfaction Survey**

**Caroline explained that this had been carried out over the summer and that around 200 surveys had been received. The results were disseminated and discussed. The issues that stood out were, as usual, access to a particular doctor and the time to the next available appointment.**

**The group felt that the action plan resulting from the survey should simply be to try to address this by increasing the number of appointments with the GP partners. Caroline agreed.**

1. **Next meeting**

**The next meeting will be around May/June 2013 and Caroline will report back on progress.**