

Minutes of the PPG Meeting 27th February 2012

Attendees: Clare MacAdie, Pat Weare, Maggie Fraser, Gerald Plastow, Julie Stillwell, Peter Stillwell, Hazel Duncombe, Tony Buckland, Ros Burgess.

In attendance: Ann Lee.

In the absence of a Chairman Ann Lee acted as the Chairman for the meeting.

1. Welcome

Each attendee gave a self-introduction.

Ann gave a brief outline of the PPG which was formed in 2010. The main aim of the PPG is focussed on communications. The new telephone system was proposed by the PPG and has produced a positive response from patients.

Members join and leave. The PPG now needs to be re-convened. We are also looking for people willing to provide hands on support for fund raising.

2. Patient Survey

In general the Patient Survey yielded a positive feedback with respect to the Service provided by the Practice.

The level of awareness of the work and the role of the PPG is disappointing.

Actions discussed include:-

2.1 Working environment

Tony stressed that the current Practice provides a better working environment than most Practices in the area.

Tony indicated that the Practice is, however, looking to provide a better working environment. One possibility is to join with other Practices to gain greater space. A new build may be one possible solution but this would lead to shared resources.

2.2 The Waiting Room

The provision of some form of Air conditioning is under consideration to provide more comfort for patients waiting to see a Doctor.

2.3 Privacy in Reception

There are occasions when a patient may wish to book an appointment but not wish to be overheard by others in the Reception Area. A need for a private/confidential area exists.

Two simple approaches were discussed:-

2.3.1 Discrete Request for an appointment – slip of paper

The use of a coloured request note could be introduced. The patient completes the form/slip to request an appointment indicating the reason for the need to see a Doctor. No-one else will be aware of the content of the request. A notice will be required so that patients are aware of this new concept.

2.3.2 Request for an appointment – confidential discussion

A clear sign should be positioned to let patients be aware that the Receptionist can take them to the back of the office where they may have a brief conversation on the need to see a Doctor.

2.4 Doctor's specialisms

Each Doctor in the Practice has an area of expertise. There exists a need to help patients request an appointment with the most appropriate Doctor for their ailment/condition.

A suggestion was made that there should be a display of photographs of the Practice Doctors. Each photograph should have the Doctor's Specialist Areas listed below. Perhaps this display should be in the Reception Area and also in the Waiting Room.

2.5 PPG Awareness

This item is covered in section 4.

3. Chronic Disease Recall System

Patients are called in for routine tests by the Practice. Normally this may require a double appointment to deal with complex issues. The Doctors have to monitor patients on a regular basis.

The system works well.

4. PPG Action Plan

The QOF, Quality Outcome Framework, system that the Doctors have to use is time consuming putting a high demand upon the Doctors. This takes up too much of the Doctors' time. Telephone Consultancies have become necessary to help the Doctors manage their time.

The Nurse Practitioner is also an aid to managing the Doctors usage of time.

Patients are not fully aware of how the Practice functions. This is a huge communications issue. The PPG has a key role to play here.

4.1 The Doctor's use of time

Patients need to be aware that simple requests lead to extra work for the Doctor. For example, a request to change medication may seem simple but how much time does this take? ***This is a key topic for Communication.***

4.2 PPG Newsletters

The key aspect of Newsletters, whatever the message, has to be the ***visual impact***. The PPG has tried to enlist the help of Graphic Designers. So far this has been without success. The need exists to find suitable people to help with the design so that the ***PPG documents stand out from the crowd*** in the Waiting Room.

4.3 Cost of Effective Communication

The cost of paper and printing is a significant factor that affects the ability of the PPG to communicate.

Although we have requested patients' e-mail addresses we have only received 50 to 60 responses.

All aspects of cost must be addressed to ensure a cost effective method of talking to all patients.

4.4 Practice Web Site

There is no information on the web site about the work and membership of the PPG. Clare offered to invite her husband to help with this aspect of promoting the PPG.

4.5 Frequency of Meetings

To kick start the revival process for the PPG it was agreed that meetings should be on a monthly basis.

4.6 Chairman of the PPG

After much debate Gerald volunteered to act as an interim Chairman until a permanent Chairman was appointed.

4.7 Composition of the PPG

It was agreed that as many diverse groups as possible should be represented on the PPG. The composition of PPG needs to include age, sex, race, disability etc. As many members as possible will be required to achieve this goal. However, size can also be a handicap and there will be a practical limit.

4.8 Fund Raising

Fund raising is a key aspect of the work of the PPG. This is a skilled task that requires a lot of imagination and sensitivity.

4.9 PPG Membership

Everyone present agreed to become members of the PPG.

5.0 Date of the first meeting

The date to be discussed.