

Hodnet Patient Participation Group
Summary of meeting held Thurs 16th April 2015 at The Bear, Hodnet

(Items requiring action are in bold type)

Present: Karen Calder, Christine Charlesworth, Mary Hardy, Derek Hodge (Chair), Zyg Nilski, Mandy Pilling, Christine Poole, Amy Roberts.

Apologies: Dr N. Raichura

Matters arising from meeting held Dec 4th 2014

Agreed to adopt the amended TOR's, with the word "critical" omitted from bullet point 4 under heading Objectives.

Names of PPG members now displayed both in surgery and on Practice website.

No definite schedule of future meetings agreed yet.

Progress Report on-line management

a) Patient Access: CC reported that since the patient access service had gone live, approx one third our patients had registered with the Practice on line. This allowed them to book appointments, order repeat prescriptions, view their current medication and report allergies.

see: <http://www.patient.co.uk/patient-access>

She noted varying uptake of on-line access for different age groups. Higher usage evident amongst older patients, especially 60-69 age bracket. Does this reflect a higher usage of the practice's services in this age group, we wondered?

How could people be encouraged to make more use of this facility?

Word of mouth.

Emphasise benefits, e.g. ordering meds on line saves a journey, reduces travel time/costs.

Can be done at own convenience, e.g. if away or unable to come in person during surgery hours.

DH suggested a reminder on Hodnet village website. DH to send item to Webmaster.

b) Report on surgery's feedback from NHS 2014 patient survey (CC)

Various sections were discussed. The whole survey can be viewed here:

<http://www.england.nhs.uk/statistics/2015/01/08/gp-patient-survey-2014/>

All: Please view and bring any observations to our next mtg.

What has been the Practice's response to this information?

The patient access scheme has been implemented.

Increased no. of nurse appts available per week, plus 3 phlebotomy clinics.

Was there any value in creating another survey of our own as the PPG?

Probably not at this stage, as surveys not generally viewed in a positive light by participants.

We need to have a clearer idea of what we want to know, who to ask and what benefit the data would be to us before proceeding.

All please note: the current Patients Association Newsletter can be viewed on the Practice website. (DH has subsequently circulated this by email.)

<http://www.patients-association.org.uk/news/latest-news/>

<http://www.hodnetmedicalcentre.co.uk/pages/Patient-Participation-Group?Highlight=Patients+Association+Newsletter>

Discussion on role and benefit of pharmacists' services within GP surgeries

Practice already has a pharmacist in attendance one day/fortnight and can access a duty pharmacist at any time by phone.

CP gave an informative explanation of Scriptswitch and savings which may be made through use of generic rather than branded meds.

Discussion on patient care post hospital discharge

DH reported on a presentation on Community Care Co-ordinators at a recent Local Joint Committee. A discussion ensued about the provision of patient care immediately after discharge from hospital. In the absence of a CCC in our practice, how was this need met?

CC – through Social Services, also through the practice's own Frail and Vulnerable Patients Register, provision of an ex-directory contact number and an enhanced care plan for those patients at risk of re-admission to hospital. If extra care needed in specific cases, the Multi Disciplinary Team was contacted.

Software was available to show how many HMC patients had recently visited A&E, but no indication of who/how many actually in hospital. Sometimes a few days' delay in conveying info re discharge especially on Fridays.

It was agreed that this time between hospital discharge and establishing the necessary provision for a patient back in their own home could do with more consideration. Maybe the PPG could look into this further?

KC: to investigate best practice on the part of other surgeries.

KC: to look into Integrated Community Services and Pharmaceutical Needs Assessment and report back.

CC and CP: to report back to the monthly meeting of practice staff that the PPG would like to look further into provision for patient needs immediately after hospital discharge.

KC and AR: to look into You're Welcome – an initiative to make practices more accessible to young people.

Patients' feedback: MH raised the matter of how patients might communicate their comments or questions to the practice via the website. Main problem seemed to be that there was no generic email address and no-one available to respond to any emails received. A system was in place to respond to verbal or written items, but on-line enquiries seemed to fall into something of a black hole.

Labtests on line: MH observed that this site seemed v. comprehensive and helpful. It was confirmed that it could be accessed on HMC's own website:

<http://www.hodnetmedicalcentre.co.uk/Search?SearchTerm=Lab+Tests+Online-UK&C=1>

Better notification about defibrillator locations: MP felt these should be more widely publicised, and (ZN) this throughout the practice's catchment area not just within Hodnet itself. Machines available at Fire Station, Beech House, Stanton upon Hine Heath. **DH to write a brief update for village website, and pass to CC for HMC's own website.**

Next meeting: **DH to circulate these notes along with possible dates for another informal meeting**, at which a date for the next formal meeting would be agreed.