

DUNSVILLE MEDICAL CENTRE

Minutes of the Patient Reference Group

Held on 2 December 2014

Surgery Representation

Dr David Gibson - GP

Paulette Davies – Assistant Practice Manager

Members present

Michael Jackson - (minutes)

Lee Pitcher

Frank Jones

Gary Shinn

Eva Stinton

Philip Ball

Apologies

Fred Fielden

Dr Julia Jackson

Mark Goulden

Yvonne Goulden

Lyn Wilkinson

Geoff Letten

Brian Ross

Ken Knight

Sidney England

Brian Jackson

1. Actions from previous meeting

a. **Update to modernise the waiting room and remove unnecessary notices.** This item was discussed later in the meeting as part of the patient survey feed back.

b. **Process to allow patients to update their contact details held by the practice.** PD informed the group of the way patients are encouraged to keep their contact details up to date. Although many patients do this, often it is easy to forget to update mobile phone details. An opportunity exists to remind patients when in the waiting room, to complete the update form ensuring their details are up-to-date.

c. **Web site update.** Following the suggestion from the PRG, PD advised the group that the practice had looked at alternative web site solutions to easily allow 'campaigns' (such as the flue jab initiative) to be promoted via the web site. The practice was also using this time to consolidate with the rest of the NHS and will adopt a NHS domain. The new domain will be www.dunsvillemedicalcentre.nhs.uk. As information is migrated from the old site, visitors to the old site will be automatically directed to the new pages.

It is expected the new site will be fully functional within the next 3 months.

It was recognised that the initial practice web site was started by the patient group, and the practice wished to thank Brian Ross for the efforts in developing the current web site to its present state.

2. Presentation of he Patients survey results.

MJ explained that the Patient survey for 2014/15 has now been completed with the results available on the Practice web site.

The idea of the survey is to capture patients views regarding the service they receive from Dunsville Medical Centre, feed these views back to the Practice Management and allow improvements where necessary.

The survey results and Patient Reference Group (PRG) outputs will be recorded in the annual PRG report that will be published on the web site in December 2014. A copy will be circulated to the PRG members for information and agreement.

The paper based survey took place between September and November 2014. A total of 221 people responded to the survey, this represents around a full weeks worth of appoints delivered by the practice each week and is a good representation of the patients that are registered with

Dunsville Medical Centre.

The response was equally split between male and females and was evenly spread across all age ranges, however it was recognised that 60% of patients were in the 55 and over age group.

The main results are listed below, and based on the survey results there are no real cause for concern. Satisfaction with the practice is very high with 95% of patients saying they would recommend the practice to someone new to the area.

The Patient Reference Group will suggest to the practice management that the survey shows overwhelmingly that people prefer to contact the surgery via the telephone, so caution should be applied when developing the web channel at the expense of the telephony channel.

The Results

97% found the practice easy to gain access.

100% described the practice as either very clean (87%) or fairly clean (13%)

20% would prefer a little more privacy when talking to the receptionist, however 78% are content with the current arrangements.

98% found the receptionists either very helpful (88%) or fairly helpful (10%).

80% found getting through to the surgery by phone either very easy (34%) or fairly easy (46%).

76% found speaking to a Doctor on the phone either very easy (24%) or fairly easy (52%).

79% found speaking to a Nurse on the phone either very easy (29%) or fairly easy (50%)

79% found getting test results over the phone either very easy (32%) or fairly easy (47%).

60% prefer to use the telephone to book an appointment with the surgery with a further 20% wishing to book in person or having no preference.

15% of patients have visited the surgery's web site in the last 12 months.

35% of patients are aware of the Patient Reference Group, with 2% wishing to know how to become a member.

78% of patients have not had to wait very long after their appointment time to be seen. 3% feel they have to wait far too long.

98% are either very satisfied, (69%) or fairly satisfied (29%) with Dunsville Medical Centre.

95% would recommend the surgery to a person new to the area.

The remaining 5 questions related to the demographics and ethnicity of the respondents and are available on request.

The general feeling was that the survey provided a patient's view that the practice was clean with easy access, that telephone access is acceptable, and that overwhelmingly the patients registered with the practice are very satisfied with their experiences.

There is an opportunity to improve messages to patients as they are waiting in the waiting room. Rather than have numerous leaflets and notices, (most facing the back of people's heads) the group felt an electronic noticeboard would be more suitable which could promote practice campaigns (such as updating mobile phone contact details and flu jabs) as well as promoting support groups (such as the Breathe Easy support group, the various cancer support available, pregnancy advice etc.)

It was agreed that funds will be allocated from the PRG to contribute to the supply and installation of an electronic notice board. Equally the practice will actively seek additional funding in the form of grants to supply and fit this valuable asset.

Action PD to seek additional funding to supply and fit an electronic noticeboard to the waiting room.

A discussion followed regarding improvements that could be introduced, with little cost, that may improve telephone call back from the surgery to the patients, i.e. simply giving a time window when a call can be expected etc.

Action. PD to consider clarifying how this can be improved by the next PRG meeting.

3. **AOB**

A group member recalled his experience regarding his elderly parents and the over-prescribed of drugs that led to a type of hoarding that he only discovered when clearing their things.

Essentially the belief was that his parents may have simply kept receiving their drugs on repeat prescriptions and, rather than stopping them as they no longer took them, simply stored them in a cupboard for the future.

The view from the group was sympathetic to this, and most members could relate to the situation.

The two main issues from this were agreed as

1. The cost to the health service of supplying drugs that are no longer needed.
2. The danger of holding on to drugs, particularly by the elderly, that could be taken in an uncontrolled way some time in the future.

The group as the practice management what the procedure is to review repeat prescriptions and if there was any initiative the practice does to review 'stock' levels of drugs that may be being held by patients.

Action. PD to feed back at the next PRG the protocol for reviewing repeat prescription and related activity.

4. **Date of Next Meeting**

Early in the new year with a plan to implement the new electronic notice board.