



Parkside Medical Practice

Dr Deolkar, Dr Foster, Dr Hughes, Dr Moss Langfield

Bulwell Riverside, Main Street, Bulwell, NG6 8QJ, Tel: 0115 927 9119,
Fax: 0115 9130692, www.parksidemedicalpractice.co.uk

A professional and caring team, responsive to the health needs of our community

MINUTES OF PATIENT PARTICIPATION GROUP MEETING

10 DECEMBER 2015

The meeting was attended by 6 patients.

Representing the Practice were Dr Deolkar, Dr Foster, Louise Owen (Practice Manager), Liam Bennett (Receptionist) and Julie Huntrod (Receptionist)

In attendance: Laura Buckley and Helen Dobson from NIHR (National Institute of Health Research) and Alan West and Charla Kearsley from NHIS (Nottinghamshire Health Informatics Service)

The meeting opened at 4.00pm. Dr Foster welcomed everyone to the meeting and all present introduced themselves. He then outlined the 'ground rules' for the meeting which were that all present would be given the opportunity to speak, but that comments/concerns should be made in a general manner and reference should not be made to specific members of staff or personal problems.

1. Apologies

The Chair, Miss Jacey Joyce, was not able to attend the meeting. Dr Foster acted as Chair in her absence.

2. Research Programme Update

Laura Buckley and Helen Dobson from NIHR outlined the practice research programme which encouraged surgeries to take part in a set number of research projects each year and patients might receive a letter inviting them to take part in a particular study if they were eligible. At Parkside Medical Practice the research lead role was undertaken by Dr Hughes with the support of Nurse Jo and PM Louise. The PPG heard that all studies undertaken had strict ethical and governance guidelines and were further scrutinised by the Clinical Commissioning Group. Leaflets giving guidance to patients about managing medication both whilst in and following discharge from hospital were distributed to the PPG with a request for feedback which could be given via Louise.

Laura and Helen were thanked for their contribution and then left the meeting.

3. Minutes of Meeting held 24 September 2015

The minutes had been distributed prior to the meeting and it was assumed that all present had read them.

- The closure of the London Road 'Walk-in' Centre had had a significant impact on some surgeries.
- The centre was now an Urgent Care Clinic and x-rays could be done there.

- The PPG asked whether there had been any improvement in patient behaviour. Louise explained that during November the practice had removed 2 patients from the practice list due to unacceptable behaviour and other patients had received 'Zero Tolerance' letters.

4. Election of PPG Chair

Unfortunately the current Chair, Miss Joyce, was not present, but Dr Foster explained that she had been in post for 1 year, which was the length of time agreed for the post-holder at the election meeting in December 2014.

Dr Foster explained that elections for the role of Chair would be held at the next meeting and anyone could nominate themselves to stand. Anyone interested should be prepared to make a short presentation at the next meeting outlining why they would like to take on the role.

In addition the PPG were asked to consider whether they would like to formalise a small committee to steer the group forward and become a more 'active' group – for instance lobbying local councillors/MPs or arranging patient education events.

The PPG asked if it would be possible to obtain funding via NAPP, but in order to do this the group would have to be constituted.

5. NHIS Telephone System/Call Statistics

The PPG heard that the Practice had increased the number of waiting calls to 10 as discussed at the September meeting. Unfortunately this had a severe impact on the building as a whole – the 10 lines occupied by Parkside plus the 7 occupied by Leen View meant that only 13 other lines remained available for everyone else in the building and the system became jammed almost immediately with users unable to ring out. The Practice had therefore dropped the queue number back down to 7, (which the PPG agreed worked reasonably well) and apologised to the PPG for any problems that had been caused. In addition there had been a technical fault on the phone system the previous week which had added to the problems.

Louise discussed some of the statistics available from the telephone call monitoring reports which showed that on Friday 4 December between 8.30am and 9.30am there had been 323 calls to the practice which equated to approximately 6 calls per minute and on Monday 7 December during the same time period there had been 294 calls to the practice (5 per minute).

The PPG asked if there were a certain number of appointments per day which Dr Foster confirmed, explaining that we offered a mixture of same day; online and forward booking appointments. He further explained that there was an extremely fine balance between the number of same day appointments offered and the number available for forward booking and the practice's own experience had been that the higher the number of appointments available to forward book, the greater the number

of non-attendances. Nationally studies had shown that the GP consultation rate was increasing 4% year on year. Louise briefly discussed the DNA (did not attend) rates for November which showed that 97 patients had not attended or cancelled their appointment and of those, disappointingly, 17 (19%) were same day bookings.

The PPG commented that not all patients realised how many hours GPs actually worked.

6. Surveys

The Practice carried out patient surveys on a regular basis and these surveys had shown an improvement in feedback over time. In November 2014 the percentage of patients 'extremely likely or likely' to recommend the practice stood at 20% but was now running at a very encouraging 65-70% of those questioned. Dr Foster explained that patient comments/complaints/feedback were discussed at monthly team meetings in order that the practice could address any issues or identify trends.

Louise explained that the Practice had recently undergone 2 mystery shopper exercises, with very positive results.

7. CQC and Statement of Purpose

Dr Foster explained that the Care Quality Commission (CQC) had a remit to inspect every GP practice in the country and that Parkside was still awaiting its own inspection. Part of the CQC visit would include garnering patient feedback and discussion with the PPG. Dr Foster asked if anyone from the PPG would be willing to speak to the Inspectors once the visit had been confirmed – which several members confirmed they would be willing to do.

The CQC would review Practice activity against 5 areas:

Safe – are patients protected from abuse and avoidable harm

Caring - do staff treat patients with kindness, dignity, respect and compassion

Effective - does patient treatment and care achieve good outcomes and quality of life

Responsive - are services organised to meet patient needs

Well-Led – does the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around patients' individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.

Dr Foster went on to explain that the Practice had given some considerable thought to its Statement of Purpose and that we should recognise that we operate in a deprived area and build this into our Statement of Purpose. The PPG were in agreement noting that Practice's operating in such areas and providing a good service in that situation should be better judged.

8. NCGPA (Nottingham City General Practice Alliance)

Dr Foster explained that GP Practices were small business operating within the NHS and were being faced with the prospect of healthcare contracts being awarded to large organisations such as Virgin Healthcare and that the practices needed to be able to withstand this competition.

The NCGPA has been formed as a company with shareholders being the individual practices within Nottingham City with the aim of:

- Negotiating on behalf of practices
- Acting as a provider company
- Acting as a buying group to generate economies of scale
- Sharing the burden e.g. 7 day working

The PPG noted that this was a good idea as it would give practices strength in numbers and a louder voice.

9. Any Other Business

- **Ear Syringing** – one member of the PPG asked for clarification around the process for ear syringing as a member of their family had been advised to see a GP. Louise apologised and explained that this was not the process – patients should be booked with a nurse and advised to use olive oil for 2 weeks prior to the appointment.
- **Patient Behaviour** – as mentioned earlier the PPG asked what was being done to protect staff against inappropriate patient behaviour. The practice has a Zero Tolerance Policy and will remove patients from the list if necessary.
- **Meeting Rooms** – this meeting had been held in the training room in the Riverside Building. Louise asked the group which of the rooms meetings had been held in they felt most appropriate. Agreed that the training room was best.
- **Practice Improvement** – the PPG noted that both the surgery and the PPG had progressed and improved over time.
- **Christmas & New Year Opening** – the practice would close at 12.30pm on Thursday 24 December and reopen on Tuesday 29 December. It would then close at 12.30pm on Thursday 31st December and reopen on Monday 4 January.

10. Date of Next Meeting

The next meeting would be held on Thursday 7 April at 6.00pm in the surgery.

All present were thanked for attending and the meeting closed at 6.10pm.