

Patient Participation Group Minutes Tuesday 9th February 2017 – 5.30pm

Chair: Mike Neville, Managing Partner

Patients: KG, AG, RJ, MH, AB, SL

1. Welcome

MN Welcomed the ppg back for the fourth meeting of the year

2. Purpose of the group

MN reiterated the purpose of the group is to discuss about the services offered by the practice and any ideas for suggestions and improvements to be made.

3. Ground Rules

MN went over the ground rules of the group as follows

- Group should not be seen as a complaint platform
- As per patient Confidentiality no personal issues should be discussed
- Everyone's views must be listened to and respected
- No discrimination will be tolerated

4. Updates from last meeting

- a. Council Land surrounding the surgery
 - i. The council have apologised for not sorting the shopping trolley and the trees in the alley on the far side of the car park
 - ii. The council are continuing to put pressure on the private owner of the land behind the staff car park to clear and upkeep it, however no joy on action form them yet
- b. Wednesday afternoons from 1st March 2017
 - i. MN explained the new procedure for Wednesday afternoons and showed an example of how the appointment book would look on the clinical system, showing some appointments that are normal appointments for Lynn, but others that are embargoed until the day itself for urgent access to a prescribing clinician.
- c. Social media – A facebook group is being set up to encourage the younger patients to get more involved at the practice. A twitter account is also being considered, but not yet agreed by the partners
- d. Health Awareness – MN explained that the building is going to be getting a “make-over” and when that occurs, there will be a rotating Long Term Conditions Awareness program each month in the waiting room in a bid to allow people to be more aware of conditions such as Diabetes, Asthma, Mental Health etc

5. Changes to Manchester Primary Care

The current legislation around commissioning is changing across Manchester, and so MN informed the group about the proposed single commissioning function. The group thought that the eventual movement of services into Manchester rather than Oldham, Fairfield and Rochdale was a positive movement. However one concern raised was the continuity of care for specialist treatment that patients have developed relationships and trust with.

6. Patient Satisfaction Survey

MN presented the below results from the survey that was conducted throughout January:

Area	Excellent	Very Good	Good	Fair	Poor	No answer	% Good and above	% V.Good & above	% Excellent
Ability to get through by telephone	20	19	18	7	1	1	86.36%	59.09%	30.30%
How helpful are the receptionists	38	21	6	1	0	0	98.48%	89.39%	57.58%
Opening hours of the practice	20	31	11	3	1	0	93.94%	77.27%	30.30%
How easy it is to see a Doctor	15	22	11	12	5	1	72.73%	56.06%	22.73%
Waiting times once you arrive at the surgery for an appointment (this does not include the morning open surgery)	17	24	15	7	1	2	84.85%	62.12%	25.76%
Quality of care by Doctor during consultation	33	20	10	3	0	0	95.45%	80.30%	50.00%
Quality of care by Nurse during consultation	40	21	2	0	0	3	95.45%	92.42%	60.61%
Quality of the services provided by the Surgery	28	24	10	1	1	2	93.94%	78.79%	42.42%
Accessibility of the practice (how easy is it to get treated/ order your prescription etc)	30	24	7	1	2	2	92.42%	81.82%	45.45%
Average							90.40%	75.25%	40.57%

Satisfaction surveys are normally measured by the percentage of answers given as either Good or better. To get an average of over 90% is truly indicative of the overall feelings of the patients registered at the practice.

The lowest average satisfaction was how easy it is to see a doctor. MN questioned the group about why they thought that this had significantly lower score (however still very satisfactory) than the other categories.

The patient representatives could not come up with an answer. RJ made comment that you can see a doctor every day, in the open surgery; and wondered whether the patients who answered thought it meant a timed appointment, with those who answered less positively; as there are only certain patients who fit in to the criteria.

MN reconfirmed that the practice had also increased the number of pre-bookable appointments as we have also increased the number of eligible criteria to from only patients who work, to the following:

- Patients who work
- Appointments for children, who's parents work
- Patients who are a carer
- Patients who have a carer

7. NHS Choices website

MN showed the patients two comments that we had received on the NHS choices website since the last meeting. One positive, and one negative.

The reactions of the patients were mixed, and AB commented whether the person who gave the negative review had spoken to anyone at the practice about the issues they had raised. MN confirmed that although he was unaware whether they had or not, as they had left the feedback anonymously, could not confirm.

The group enquired whether MN could approach NHS Choices to see why people could leave feedback without confirming to the practice if they had attempted to resolve their issues before publication; as well as why the anonymous function is also there as this can lead to the practice not being able to investigate problems if they occur.

8. Any Other Business (AOB)

MN confirmed that works to the building were in situ and would be taking place before the next meeting. The works are:

- New spot lights outside, replacing the old lights; as well as the electrics are going to be upgraded also
- The building will be painted and given a more modern look

Date of next meeting – 9th May 2017