PRG Minutes

Tuesday 2nd February 2016

Present

Sonia Poulson Chairperson

John Buttree Patient representative

Colin Cooper Patient representative

Larraine Cooper Patient representative

Paul Stephens Patient representative

Gail Alexander Patient representative

Sabrina Alexander Patient representative

Mick Lomax Public Health Nurse

Rianne Norton Public Health Administrator/Complaint’s Officer

No apologies received

The minutes from the previous meetings in December 2015 and January 2016 were reviewed and agreed. There were no action points.

Practice Update

New Telephone System

The new telephone system was installed on 26th January. Staff have all been given new handsets and Premier demonstrated how to use them. We have had no negative feedback as yet from staff or patients. Reception are also satisfied with the new system. It has now been up and running for a week, and whilst everything appears to be running smoothly, we are keeping a log of anything that might need to be altered in order to improve the system for both staff and patients. Overall there has been minimal disruption, and we have been happy with the service provided by Premier.

Sonia asked if anyone has called the surgery since the new system was installed. A member of the group said that he had called and was on hold for 15 minutes. He also said that you couldn’t now call Greenview direct as you could do before. Sonia explained that Greenview have now lost their direct dial number, and all patients need to call the 01977 610009 telephone number. All calls will then be diverted into a main hub, and will ring simultaneously at Hemsworth, Kinsley and Greenview receptions, which will help to reduce the demand at Hemsworth. Sonia also explained that it would not matter which reception site answered the call, as patients would still be able to make an appointment at any of the three sites. Sonia also explained about the different messages that can be recorded for patients to listen to whilst on hold, and how these are designed to be informative for our patients and keep them up to date with any news or current health campaigns during the year, e.g. ‘flu, shingles or travel vaccinations.

Another member of the group said that he had got straight through to the surgery with no problem at all.

A comment was made asking if there were enough staff in each of the reception areas to deal with the incoming calls, as there are now extra options for patients to choose. Sonia explained that there are now 2 receptionists based at Kinsley and a further 2 at Greenview, and Hemsworth reception is also now fully staffed. We can now spread the workload between all three sites.

A member of the group commented that there will always be teething problems when implementing a new system of any sort.

Another member of the group said that she had tried phoning the surgery before the change in telephone systems, and couldn’t get through to Hemsworth as her call seemed to be in a loop and wasn’t being answered, and so she had to contact Greenview directly. Sonia explained that we have been told about this happening on previous occasions, but were unsure of the reason. When we contacted BT to inform them that this was being reported by our patients, they checked the exchange box, and it appeared that 1 or 2 of the telephone lines were being “knocked off” and we were unaware at the time that it was happening or the reason why, and unfortunately it was something that we had no control over. All the telephone lines have now been moved to Premier and the complete telephone system is now backed up on a “cloud” which gives us a lot more control over the system and any changes we want to make to it.

Mick commented that the dealings he had with Premier whilst they were on site were positive.

Sonia explained that Premier are a company specialising in providing telephone systems to the health service industry, whereas BT, our previous telephone service provider were not, and we are positive that we will be able to provide a better telephone service to our patients.

Staffing

We have not had a response to the advertisement for a new salaried GP as yet. The closing date is sometime in February. We will continue to advertise the vacancy on the journal’s website. Sonia said that she noticed that GP practices in Rotherham and Pickering were also advertising on the website for GP’s. She explained that there is still a national shortage of GP's.

A member of the group asked if the surgery was expecting any more patients during the junior doctor’s strike next week, as A&E will also be affected during this strike.

Sonia said that patients will normally go to A&E if they can’t get an appointment with the GP or if it is out-of-hours.

Sonia thought it would be unlikely that we will see an increase in demand but will make reception aware. She said that there was no difference in demand during the last junior doctor’s strike.

Our new Nurse Practitioner has now started seeing patients, and is settling into her role. We have also had a new HCA start at the practice, and are pleased that both of these vacancies have now been filled.

JAG Accreditation

This is taking place on Thursday 4th February. It is the endoscopy unit inspection.

A member of the group commented that it would be great for the surgery if we achieved the accreditation.

Sonia explained that endoscopy is still just used at weekends. The theatre unit is also used for cataract surgery at weekends. Mr Basheer has also started using the operating theatre at weekends for general and vascular surgical procedures under local anaesthetic, and Mr Basheer’s first list took place on Sunday 31st January.

A member of the group said that he asked at a previous PRG meeting if the endoscopy and theatre suites could also be used during the week rather than having them standing empty. Sonia said that Angela was still in touch with a company based in Manchester who had showed interest in using our facilities during the week.

Sonia explained that Murray is also involved in working towards a similar accreditation for the Ultrasound unit.

Sonia explained that if we do achieve the JAG accreditation for the endoscopy unit, this will hopefully increase interest from other parties as it shows that we have excellent facilities and will hopefully open up more opportunities.

A member of the group asked if Virgin Care just take private patients or would they accept NHS patients as well? Mick commented that they will contracted by the NHS to take NHS patients.

Sonia also confirmed that Dr Crawley does still use the operating theatre facilities for her minor surgery cases.

Comments and Compliments

These are from October 2015 to January 2016.

**Hemsworth**

**“Appointments always running late. Doctors need to prioritise their time efficiently which would lead to less patient and staff harassment and happier patients”.**

There was no name left with this complaint in order to discuss it further. We would all like more GP’s but we do our best.

**Hemsworth**

**“Not good enough. I came for a prescription and waited 1 hour”.**

This was discussed at the line managers meeting, and again there were no contact details given by the patient so that we could try and obtain further information. It will depend on the circumstances as to whether this is acceptable or not. If the patient turned up to collect a prescription and waited an hour then yes, this would be unacceptable. However, if the patient came to the surgery to request a new or repeat prescription, then an hour is a very short time to wait when the our turnaround for prescriptions is 48 hours.

A member of the group commented that someone they knew came to collect a prescription but the GP refused to sign it until he had finished his clinic, and so she had to wait for the GP to see his last 3 patients. Sonia said that it is usual practice for GP’s to sign scripts at the end of their clinics as they do not usually liked to be interrupted during clinic.

**Hemsworth**

**“Many elderly people cannot walk to the doctors nor do they have the internet. The local chemist is not reliable at ordering and delivery so why stop the telephone re-ordering of scripts”.**

We have discussed this before, and we agree that the older generation do not always have access to the internet. A member of the group commented that she thought it was more reliable to hand deliver scripts and place them in the box at reception.

Sonia said that while she hasn’t used the online prescription ordering service herself, she says that she has been told that it is easy and straightforward to use. A patient’s nominated chemist can also order and deliver prescriptions if required. With regards to the comments made about the chemist – we do not know which chemist this relates to. A member of the group commented that there was now only one pharmacist available at Lloyd’s chemist. Sonia informed the group that Cohen’s chemist is currently undergoing refurbishment.

Another member of the group commented that she went to pick up her anti-biotics from Cohen’s, but the medication had her mother’s details on it. She says that she now avoids using Cohen’s chemist.

A member of the group stated that they always go to Lloyds and find them very good.

A member of the group commented that Whitworth’s chemist in Kinsley were going to the Kinsley Resource Centre tomorrow – Wednesday 3rd February - and were holding an open day to advertise the services that they can offer patients. They will also have other agencies present, e.g. Health Trainer. Refreshments will also be available.

**Hemsworth**

**Parking terrible. Information to patients from tests non-existent. Waiting not too bad. Conditions of amount of patients acceptable as a result of long waiting”.**

 Sonia said that this is another comment that has been raised before on several occasions. A member of the group asked if a sign could be placed in the car park, and a comment was made that there was already sign in place. A member of the group commented that she saw someone park in the disabled bay in the practice car park, and then walk across the road to the dentist. She didn’t know if there was a blue badge on display in the car. She said that the dentist car park was always full.

A comment was made about whether we could write to the dentist and ask them to put a note in their waiting room asking patients not to park at the surgery.

Sonia said that we will mention this to George and ask him to keep watch. A further comment was made that once staff have parked their cars, then there is not a lot of space left for patients.

A member of the group commented that another problem in the car park is cars parking next to the kitchen door, as when a car is parked there it stops other cars from being able to get in or out of the car park. Said she saw a car hit another vehicle whilst trying to reverse out, because this car was causing an obstruction. She also commented that on another occasion a taxi was unable to get into the car park because another vehicle was causing an obstruction in this spot. As a result, the taxi had to drop off a patient – a lady who is registered blind – on the road outside, and she had to make her own way into the surgery.

Sonia said that we do acknowledge that parking is a continuing problem, but unfortunately there are no options to extend the car park. The car park was also further reduced when the chemist extended. Sonia also confirmed that there are no CCTV cameras in the car park.

A member of the group stated that he parks at Tesco and walks up to the surgery. Sonia said that the surgery also have an agreement with HSBC bank to park at the rear of their premises. She acknowledged that wherever you park it may still cause problems.

A member of the group commented that they had a PCSO patrolling the area at Greenview surgery and said it did make a difference. She said that she has asked for a PCSO to do the same at Kinsley and Hemsworth, and they have agreed to come when they are available.

Another member of the group said that they were sent an ophthalmology appointment by The Practice, and in their letter they actually told patients to park at either Tesco or Iceland.

**Action Point**

* **Sonia to speak to George and ask him to look at whether people are still abusing our parking facilities.**
* **Sonia to arrange to put up a sign telling patients not to park next to the kitchen door as it causes an obstruction**

**Kinsley**

**“The chairs are in a real bad state. They look disgusting and need a good disinfect and clean. I did not want to sit down on one – get them thoroughly cleaned”.**

This is a comment which has been brought to our attention before. Sonia said that the chairs at Kinsley have been cleaned, but she was pleased to announce that it has now been agreed that we can purchase up to 18 new chairs for the waiting room at Kinsley.

We will purchase 6 first and then if required, another 6 and then decide from there if we require any more. They will be wipe clean chairs. Sonia said that she had never seen all of the chairs at Kinsley being used at one time. The first 6 chairs have been ordered this week and the next 6 will be ordered in a further few weeks. We did previously talk about getting bench seats, but we have now ordered seats with and without arms.

**Hemsworth**

**“Ridiculous when booked appointment. Not enough staff at reception. Waiting room is shocking. Need more staff. More efficient doctors”.**

We now have a full complement of staff in reception.

**Hemsworth**

**“I am fuming at how behind all the doctors were. Been waiting an hour and a half and never got told that they were behind - it’s a joke. If you didn’t give people times and then be over an hour and a half over when people have other stuff to do any other appointments”.**

This comment has been raised with the reception team leaders and the secondary care team. For secondary care patients, the HCA running that list should make sure that a board is displayed in the waiting room with the name of the consultant on it, and how far behind they are running with their clinic.

Receptionists are aware that they need to advise patients when GP’s are running more than 20 minutes late.

We do understand that it is our responsibility to keep patients informed.

However, when seeing the on-call GP, patients do need to be aware that the GP may be running late or may need to make unscheduled emergency visits which will delay their clinic.

A comment was made that patient’s know which GP’s tend to run to time and which run late.

**Kinsley**

**The waiting room is dark, dirty and disgusting. We had to wait in corridor for over 1 hour. Second complaint”.**

Sonia explained that we had also recently had a leak in Kinsley, which has left water marks on one of the walls. We are looking into getting a quote to paint these walls and remove the water mark. There are blinds at Kinsley which should be opened up and they will let light the in.

**Upton**

**“Receptionists and doctors are really friendly and have a good range of knowledge and expertise. Appointments were prompt and simple”.**

Some patients do travel from Hemsworth to be seen in Upton. Some patients will see any GP at any location, but some patients are very specific about who they want to see and where, which can sometimes narrow down the options when trying to book a convenient appointment.

**Endoscopy**

**“Limited if no information on arrival. One hour later no contact or acknowledgement of arrival beyond being told to take a seat”.**

There are signs in the waiting area asking patients to take a seat when they arrive for their appointment. There is no receptionist on duty. It is a little different waiting in the endoscopy suite – it is not like the GP waiting room where you can see things happening.

**Hemsworth**

**“A patient came into reception today and said how much better the reception has been since we were fully staffed”.**

A comment was made that it doesn’t matter how long the queue is at reception, there only ever seems to be one receptionist at the front desk. Sonia explained that the other receptionists will be at the back of reception, managing the telephones and other enquiries. It was reported that some patients have had to queue for 20-30 minutes to see a receptionist.

A member of the group commented that there were two receptionists at the front desk when he came into the surgery today.

Mick commented that you have to wary of confidentiality when speaking to patients, and people standing next to each other at the reception desk may be able to overhear what another patient is saying.

A comment was made that the self-check-in is in the wrong position, and again this is something that has previously been discussed. Sonia said that we need to identify why patients aren’t using the self-check-in more regularly.

A member of the group stated that on one occasion they had checked in using self-check-in screen and were still waiting to be seen by the GP over an hour later. They then went and spoke to reception and it turned out that the self-check-in had not recorded them as arrived.

Another comment was made that there are other instances when you try to use the self-check-in but the screen says that it can’t arrive you and asks you to go and speak to a receptionist.

Receptionists do ask patients to use the self-check-in if they can, as it does help to minimise the queue.

A comment was made that some people refuse to use the self-check-in screen because it is unhygienic.

AOB

Expert Patient Programme (EPP)

A member of the group discussed her concerns regarding the Patient Expert programme which is now being held at The Springs Centre in Hemsworth. She said that she wants to let all clinicians know that any patients with a back condition should not be referred to the programme in Hemsworth as the facilities are unsuitable.

Mick explained that this was a course for patients with a chronic condition. He said that the feedback he had heard from the same programme in Doncaster has been positive, but a comment was made that they are struggling to get increase the number of patients attending the course in Hemsworth.

Sonia said that she has put details of the Expert Patient Programme onto the television screens in the waiting room.

Cataracts

A member of the group said that he had visited the opticians before Christmas and they gave him a list of places he could go to for his cataract surgery, but The Grange wasn’t on this list. Sonia said that all local opticians are now aware that we offer this service to patients both registered with us and with other GP surgeries.

He said that all of the locations were hospitals apart from the White Rose Surgery. Sonia said that the cataract service is now offered as a ‘choose and book’ referral.

Another member of the group said that when he visited his optician, The Grange was listed for cataract surgery, and the opticians made the referral to for him.

Noticeboard

A comment was made that the notice board under the television screen in the waiting room is still displaying Christmas opening hours. Sonia will arrange for this information to be removed.

**Date for next meeting – Tuesday 15th March 2016 at 12pm**