

**Oakenhall Medical Practice
Patient Participation Group Meeting
Tuesday 14 March 2017
6-8pm**

Attendance

Mr D Abbott	PPG Member
Lisa Ellison	Practice Manager/Note Taker
Mrs M Evans	PPG Member
Mrs M Hinchliffe	PPG Member
Mrs K Hurt	PPG Member
Mrs C Lear	PPG Member
Mrs A Murray	PPG Member
Mr I Murray	PPG Member
Mr R Partridge	PPG member
Mrs A Scudder	PPG Member/Chair

		Actions
1.	<p>Welcome & Introductions</p> <p>Mrs Scudder welcomed everyone to the meeting.</p>	
2.	<p>Apologies for Absence</p> <p>Apologies were received from Mrs Kyriacou, Mr Peat-Bailey and Mrs L Tomlinson</p>	
3.	<p>Minutes of Last Meeting and Matters Arising</p> <p>The minutes of the meeting held on 31st of January 2017 had been circulated and were approved for posting to the Practice Website.</p> <p>Matters Arising:</p> <p>Please refer to Item 4 and 5.</p>	
4.	<p>People's Council Meeting Feedback (Mrs Scudder)</p> <p>Mrs Scudder said that she had not heard about future meetings. Lisa Ellison advised that she had contacted the CCG and has not received any information back at this point in time, but would enquire further.</p>	
5.	<p>Identification of Topics to Discuss with Mark Spencer MP (All)</p> <p>Lisa Ellison advised that she had made contact with Mr Spencer's office, who advised, that he would be happy to attend, but a Friday evening would be preferable with advanced notice of dates and details of topics to discuss.</p>	

	<p>It was agreed that all members would reflect and identify other topics/areas to discuss for the next meeting in addition to the items already identified:</p> <ul style="list-style-type: none"> • Parking • Differences in care provision in surrounding areas e.g. mental health, care involving physical needs 	<p>Agenda Item.</p>																																																																																																																								
<p>6.</p>	<p>Friends and Family Test Results for 2016/17</p> <table border="1" data-bbox="300 566 1329 981"> <thead> <tr> <th></th> <th>February 16</th> <th>March 16</th> <th>April 16</th> <th>May 16</th> </tr> </thead> <tbody> <tr> <td>Extremely likely</td> <td>4</td> <td>8</td> <td>3</td> <td>5</td> </tr> <tr> <td>Likely</td> <td>2</td> <td>6</td> <td>5</td> <td>4</td> </tr> <tr> <td>Neither likely or unlikely</td> <td>1</td> <td>1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Unlikely</td> <td>1</td> <td>2</td> <td>1</td> <td>1</td> </tr> <tr> <td>Extremely unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Don't know</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>8</td> <td>17</td> <td>10</td> <td>10</td> </tr> </tbody> </table> <table border="1" data-bbox="284 1048 1329 1429"> <thead> <tr> <th></th> <th>June 16</th> <th>July 16</th> <th>August 16</th> <th>September 16</th> </tr> </thead> <tbody> <tr> <td>Extremely likely</td> <td>1</td> <td>0</td> <td>4</td> <td>7</td> </tr> <tr> <td>Likely</td> <td>0</td> <td>0</td> <td>4</td> <td>1</td> </tr> <tr> <td>Neither likely or unlikely</td> <td>1</td> <td>0</td> <td>0</td> <td>1</td> </tr> <tr> <td>Unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Extremely unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> </tr> <tr> <td>Don't know</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>2</td> <td>0</td> <td>8</td> <td>10</td> </tr> </tbody> </table> <table border="1" data-bbox="284 1496 1329 1910"> <thead> <tr> <th></th> <th>October 16</th> <th>November 16</th> <th>December 16</th> <th>January 17</th> </tr> </thead> <tbody> <tr> <td>Extremely likely</td> <td>5</td> <td>1</td> <td>4</td> <td>11 (S9 W2)*</td> </tr> <tr> <td>Likely</td> <td>3</td> <td>4</td> <td>7</td> <td>6 (S4 W2)*</td> </tr> <tr> <td>Neither likely or unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>1 (S)*</td> </tr> <tr> <td>Unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>2 (W)*</td> </tr> <tr> <td>Extremely unlikely</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Don't know</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>8</td> <td>5</td> <td>11</td> <td>20</td> </tr> </tbody> </table>		February 16	March 16	April 16	May 16	Extremely likely	4	8	3	5	Likely	2	6	5	4	Neither likely or unlikely	1	1	1	0	Unlikely	1	2	1	1	Extremely unlikely	0	0	0	0	Don't know	0	0	0	0	Total	8	17	10	10		June 16	July 16	August 16	September 16	Extremely likely	1	0	4	7	Likely	0	0	4	1	Neither likely or unlikely	1	0	0	1	Unlikely	0	0	0	0	Extremely unlikely	0	0	0	1	Don't know	0	0	0	0	Total	2	0	8	10		October 16	November 16	December 16	January 17	Extremely likely	5	1	4	11 (S9 W2)*	Likely	3	4	7	6 (S4 W2)*	Neither likely or unlikely	0	0	0	1 (S)*	Unlikely	0	0	0	2 (W)*	Extremely unlikely	0	0	0	0	Don't know	0	0	0	0	Total	8	5	11	20	
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	February 17	Feb 16-Jan 17
Extremely likely	0	53
Likely	0	43
Neither likely or unlikely	0	6
Unlikely	0	7
Extremely unlikely	0	1
Don't know	0	0
Total	0	110

* Obtained in Surgery = S

* Obtained from Practice Website = W

The Group members reviewed the results of the Friends and Family Test results, this included individual comments that patients had made (only comments where patient had given their permission to share were discussed. All comments provided to the Patient Group were anonymised).

It was discussed that there were many positive comments from patients in respect of their care, service, helpfulness and friendly clinical/administration staff. In 2016/17 87% of patient's feedback received, that patients were "Extremely Likely and Likely" to Recommend Oakenhall Medical Practice to Family and Friends.

The Patient Group discussed the 13% of patients feedback in more detail, of those patients who indicated "Neither likely nor unlikely, Unlikely, Extremely unlikely and Don't know". The patients comments centred on patients difficulty in obtaining an appointments, this theme was also mirrored in comments received from patients who indicated "Extremely Likely and Likely".

The patient Group discussed that patient access appeared to be the main patient issue.

Lisa Ellison advised that since February 2017, the practice now had two additional GP sessions per week and had been utilising funding (Improving Access) provided by NHS England to provide additional GP/Nurse sessions from December 16 to March 17 by engaging a Locum Doctor and the Practice Nurses had provided additional general nurse clinics.

It was discussed that the focus for the Action Plan would be to improve patient access and the patient experience within the practice. Following discussion, the following two measures would be implemented by the

	<p>Practice:</p> <ul style="list-style-type: none"> • Sending a text by mobile phone to patients following attendance for a blood test. It was agreed that the practice would trial this with the assistance of the members of the Patient Participation Group. Any member who was due for a blood test, would let Lisa Ellison know and she would arrange for the GP to send a text to the patient at the time, the GP was reviewing the results of the blood test. It was agreed, initially, that the texts would be only forwarded to patients, who results were negative. The Group would discuss the results of the trial at the next meeting. <p>It was hoped that by texting patients, this would reduce; the number of patient's telephoning the practice to obtain their results, therefore allowing increased and quicker access by patients to the practice.</p> <ul style="list-style-type: none"> • The Group discussed enhancing the experience of patients who register with the practice, by emailing a welcome pack to patients, this could include the practice leaflet, information on online services registration, methods of contacting the practice, invitation for the new patient health check, patient consent for shared information with Out of Hours Services, District Nurses etc. and informing patients of their named GP. <p>It was agreed that Lisa Ellison would work with a member of the administration staff to put this in place, by updating the practice leaflet and making changes to the new patient health questionnaire and how the administration staff delivered enquiries from new patients at the reception desk.</p> <p>Action Plan Agreed:</p> <ol style="list-style-type: none"> 1. To text patients that their blood test results are negative (following a trial) – improving access to the practice and enhancing the patient experience. 2. To email new patients registering with the practice a welcome pack – Enhancing the patient experience. <p>Lisa Ellison also discussed improvements made following patient comments verbally or through the Friends and Family Test:</p> <p>You said:</p>	<p>To Discuss</p>
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	<p>The “Prescription Button” on Practice Website to link the patient to online services is not working.</p> <p>We Did:</p> <p>Contacted the practice Website supplier, who rectified this.</p> <p>You Said:</p> <p>The Patient Calling System is too fast to read.</p> <p>We Did:</p> <p>The timing was extended to allow the message to remain longer on the patient call board.</p> <p>You Said:</p> <p>Patient advised that the online prescription requesting identified that the prescription would be ready on a Monday, when it was requested on a Friday (therefore not allowing 48 hours)</p> <p>We Did:</p> <p>Contacted the patient computer software helpdesk, who advised that this could not be changed, as a standard function, but helped the practice change the message that is also provided to all patients to make it clearer that 48 working day hours are required to process a repeat prescription.</p>																	
7.	<p>News from the Practice (Lisa Ellison)</p> <p>The Friends and Family Test Results for were made available and discussed. Majority of patient feedback received that patients were Extremely Likely and Likely to recommend Oakenhall Medical Practice to friends and family.</p> <p>“How likely are you to recommend our GP practice to friends and family if they needed similar care or treatment?”</p> <table border="1" data-bbox="284 1693 935 2000"> <thead> <tr> <th></th> <th>April 17</th> </tr> </thead> <tbody> <tr> <td>Extremely likely</td> <td>6</td> </tr> <tr> <td>Likely</td> <td>5</td> </tr> <tr> <td>Neither likely or unlikely</td> <td>1</td> </tr> <tr> <td>Unlikely</td> <td>0</td> </tr> <tr> <td>Extremely unlikely</td> <td>0</td> </tr> <tr> <td>Don't know</td> <td>0</td> </tr> <tr> <td>Total</td> <td>12</td> </tr> </tbody> </table>		April 17	Extremely likely	6	Likely	5	Neither likely or unlikely	1	Unlikely	0	Extremely unlikely	0	Don't know	0	Total	12	
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	<ul style="list-style-type: none"> The Clinical Commissioning Group and GP Practices are promoting to patients to access Over the Counter Medicines, were appropriate e.g. Paracetamol, Head Lice treatments 	
7.	<p>Any Other Business</p> <ul style="list-style-type: none"> Changes to Prescription Requesting <p>Lisa Ellison discussed that the four practices had discussed for some time in making changes to how patients order their prescriptions, following a significant number of incidents with potential for patient harm and medication wastage. From the 1st of June 2017, practices will no longer be excepting requests for prescriptions on behalf of patients from pharmacies.</p> <p>The Patient Group discussed whilst they were concerned that incidents had occurred, they were conscious that this may cause difficulties to patients to request and obtain their prescriptions. Lisa Ellison advised, that the practices had considered this and were offering the following methods:</p> <ul style="list-style-type: none"> Online – the easiest and safest method using the patient clinical system, which can be access via the link on our website At the surgery By Post <p>Lisa Ellison also advised that patients who receive their medication via the dosette system or who the GP had identified, as having difficulty in managing their own medication, would remain under the pharmacy ordering system.</p> <p>Lisa Ellison also emphasized, that this did not affect how patients collect their prescriptions, which will continue as before.</p> <p>Lisa Ellison advised that this will be implemented by informing the Pharmacies in Hucknall first, before informing the patients via leaflets and posters, which would allow two months’ notice to be provided.</p> <p>Lisa Ellison advised that she would provide an update at the next meeting.</p>	To discuss in matters arising.
8.	<p>Date and Time of Next Meeting</p> <p>Tuesday 9th of May 2017</p>	