MORDEN HALL MEDICAL CENTRE PATIENT PARTICIPATION GROUP

1. Welcome and introductions

A warm welcome was extended to all new members.

2. Notes of the meeting of 22 Sept 2015

These were agreed.

3. Updates since April 2015

PPG membership growth and development:

- We have invited 6 new members to join the PPG, 2 of whom were able to attend their first meeting.
- The practice was really impressed with the amount of interest it was very encouraging. Membership will be reviewed at the next meeting to see if we need to expand the group further eg if any members are no longer able to attend.
- We also have developed an exciting 'virtual PPG' for patients who expressed an interest in the PPG. These members will
 receive updates via email or post after the meetings and can add feedback for circulation and discussion at PPG
 meetings.

Premises:

- The practice has bid for two separate capital improvement grants.
 - The first is for improving the environment and structure of the reception office, the waiting room and administrative areas. If successful, this will also provide an additional consulting room and create more multidisciplinary team and learning space for students, staff and patients.
 - The second is to update some aspects of existing consulting rooms.

CQC:

• We were inspected by the Care Quality Commission on 05 November as we had not received a rating when we were inspected back in May 2014 together with other Merton practices. This necessitated a re-inspection in order to award a rating. The inspection team from the CQC inspected the premises, the management structure, our staff teams, our clinical and organisational governance, together with the standard of our clinical care and service to patients. We are now waiting for our rating. However, this might take up to three months. Feedback on the day was positive.

Marketing focus:

• Since March 2015, when our online services went live, we have now actively embraced the digital era. In July we joined Twitter to add to our communication methods with all our patients. The practice website has undergone significant developments: new content, reminders and more easy-to-use online services have been added. Everyone can now use the website to help them take better control of their health and how they receive healthcare. There are plans for iPad/electronic tablet facilities and a new TV screen to be accessible in the waiting area so patients will be able to use the website more easily wherever they are and so improve the access we offer to our patients.

Public relations:

• The practice NHS Choices feedback campaign has now reached 4* out of a possible 5* having progressed from the 2* rating back in June 2015. We have received more than 300 feedback responses. We are still aiming for 5* so will continue to encourage patients and users to give us feedback. The aim of this campaign has been to provide patients and users with a voice and allow the management team to act on areas for improvement and any issues/themes that arise. Access (phones, appointments and face to face interaction), the surgery environment, and waiting times for

appointments and in the surgery are the areas which we have worked hard on and which we will continue to improve based on what we are told by patients and what we know.

Appointments and access:

• For the last year we have been working hard to increase the number of appointments (face to face and phone) available; to improve how they are offered and to ensure they meet the needs of our patients so that clinical time is used effectively and not on tasks that can be safely delegated.

Working collaboratively with other providers (sexual health and cancer screening):

- Working closely with other Merton providers and services we have recently re-engaged with the Terrence Higgins Trust to improve Chlamydia awareness and improve the sexual health of people age 15-24. Accordingly, we have launched an awareness campaign at Morden Hall Medical Centre as we have not been doing as many Chlamydia tests as our patient population would indicate (we have had to improve our uptake of Chlamydia test kits by the appropriate age group).
- In our programme to join campaigns and pathways to improve patient care we have recently embarked on the Macmillan Support Bowel Cancer Awareness scheme in order to increase the number of at risk patients participating in bowel screening.

4. Current projects and agreed plans for the future

Website:

New Young Persons page:

- To improve awareness on major health and social issues for patients aged 15-24.
- Content currently under review with plan to go live in early 2016.

Staff recruitment:

• The practice is making arrangements to cover nurse and reception vacancies as a result of due to maternity leave from late December 2015.

Appointment audit:

• Following the success of our recent appointments audit to find out how appointments are used and where we can shift unnecessary work getting through to doctors and/or nurses we are conducting an audit of nurse appointments to identify how we offer the appointments we have and our demand. The results are expected to inform if and how we can offer nurse appointments online and facilitate accurate booking which is more complicated than our current online appointment capacity for doctors.

Premises development:

• If the first capital bid is approved there will be a proposed start date of mid-March 2016. There will be significant disruption to surgery operations during the works.

Service reorganisation:

We are currently planning to offer dedicated clinics for

- minor surgery
- family planning clinic

5. Any other business

As this was the first meeting for some members a number of questions and issues were raised (and treated as any other business) at various points in the proceedings:

- An observation was made in relation to medical equipment in consulting rooms not having been available during the consultation which had caused disruption and wasted time.
 This was noted some time ago internally leading to our healthcare assistant (or a deputy when she is not in the practice) checking rooms and equipment daily.
- It was raised that people in the waiting room are not always notified about delays and waiting time when waiting for doctors/nurses. There was also discussion on how to manage waiting times for appointments and keep them to a minimum while giving patients the time they need not just their allocated ten minutes. Feedback and specific points from this discussion will be provided for the partners.
- More information in the waiting area giving details on the practice people and services was requested and it was felt this may be resolved via a noticeboard dedicated to practice updates.
- Discussion on patient involvement in all aspects of medication and long term conditions reviews as well as input from hospital consultants developed and then crystallised into a number of queries and direct questions for which responses and answers respectively were provided.
- Discussion regarding Electronic Repeat Prescriptions and accessing prescriptions with the adjacent Boots pharmacy developed. It was explained that the patient can nominate for their repeat prescriptions to be sent to any pharmacy of the patients' choice.
- An observation was made in relation to doctors' attendance to PPG meetings. After discussion, the majority of PPG members were in agreement for clinicians to not attend. This will be added to the agenda for the next meeting.