

# The GP's of Whitchurch Health Centre

Whitchurch Health Centre  
Armada Road  
Whitchurch  
Bristol BS14 0SU  
Tel. 01275 839421  
Fax. 01275 540035

## The Armada Family Practice

Dr G Badger      Dr N Crichton      Dr C Judge  
Dr G Worsley      Dr M Jones      Dr I da Costa  
Dr K Jones

## The Green Practice

Dr M Clark      Dr R Duncan  
Dr J Blackburn

*Registered Manager: A S Davies BEM MCMI*

Our Ref.

Date      28 March 2014

### Summary of the Patient Participation Group Meeting held at Whitchurch Health Centre on Tuesday 21<sup>st</sup> January 2014.

- Welcome and Introductions. The meeting started at 6pm, and began with my thanks to all attendees for taking the time to attend the meeting. A round-table of introductions was undertaken and the attendance list is attached at the end of this letter.
- Reasons for joining the Patient Participation Group. Members stated the following reasons for becoming a PPG member:
  - Hoping my opinion will make a difference
  - Having an ear on the ground
  - Hoping we can make the Practice better
  - To get information. To hear what is going on – and why
  - Being involved in the local community – and being involved in the health centre too
  - NHS is changing rapidly – wanting to see what will change in General Practice
- Principles for the conduct of PPG meetings. The following principles were agreed by PPG members:
  - We would always show respect and acknowledge views of fellow-attendees, even if we did not agree with their point of view.
  - We also agreed this meeting would never be used to raise any specific complaints by an individual patient. However, we did agree that any complaint which generated a 'theme' was appropriate for the PPG to discuss – but only in general terms.
  - Everyone agreed to share their email address with the other attendees.
- Election of PPG Chair. During the December meetings, I had stressed the importance of the PPG taking 'ownership' of its representative role for the patients at this health centre. This also followed the N.A.P.P. (National Association of Patient Participation) principle of 'best practice' for PPGs.

Outcome: It was agreed that we would consider a 'rotational' approach to the role of Chair for the group, and that Alan Lindsay would Chair the next PPG meeting.

5. Election of Secretary. The group agreed with my proposal to undertake the role of Secretary.

6. Themes for discussion. Several themes had been identified by PPG members at the meetings in December. We discussed the themes as follows:

Theme	Update
Phones	<p>The group gave very positive feedback for the work undertaken by Julie Welch to install 'call queuing' onto the telephone system. Members felt that the phone service had improved and they were really impressed with knowing where they were in the queue.</p> <p>Everyone acknowledged that 290 wasted appointments per month were unacceptable. We discussed whether we can monitor appointments which have been booked a long way ahead. We also discussed whether we can create an online 'cancel the appointment' facility. To answer these questions, the possibility of purchasing a "Text-Alert" software package to remind patients they have booked an appointment was discussed.</p> <p><b>Action:</b> Steve to provide an update on Text-Alert at the next PPG meeting.</p>
Online access to surgery services	<p>Members were impressed with the online "Patient Access" system which enabled patients to book appointments, manage their prescriptions and update their personal information.</p> <p>Julie explained that "Online Access" was very complicated to manage - and for that reason - it could not be used for nurse clinic appointments to undertake chronic disease management.</p> <p>Everyone agreed the following points regarding "Patient Access":</p> <ul style="list-style-type: none"> <li>• We need to raise wider awareness among patients - more advertising is needed</li> <li>• We need to ensure more GPs are available in "Patient Access"</li> <li>• A wider variety of appointment options (mornings, afternoon and evenings) need to be loaded into the Patient Access system.</li> </ul> <p><b>Action:</b> Julie promised that more GPs and more appointments would be accessible – and would report back to the group at the next meeting.</p>
Receptionists	<p>We acknowledged the themes that had been raised by PPG members at the Open House meetings. Everyone acknowledged that our Receptionists had an extremely difficult job – and could never satisfy the expectations of every single patient.</p> <p>Julie reported that we had new staff working for us, including Apprentice Medical Administrators, and this had inevitably lowered levels of knowledge while the new members learned their jobs.</p>

	<p>We accepted that our team gave inconsistent messages, and we were now looking at training needs to improve how our staff passed information to patients.</p> <p><b>Action:</b> Julie to give an update on training outcomes at the next meeting.</p>
Nurse Practitioners (NP)	<p>Dr Neil Crichton acknowledged the themes that had been identified by members of the PPG and reported that GPs were moving to a principle of NPs requesting a 2<sup>nd</sup> opinion from the On-Call GP if they were unsure of the diagnosis or treatment pathway.</p> <p>Neil also explained that GPs are being asked to treat more complex issues, and are now expected to treat conditions that had been traditionally managed in hospital environments. This makes the Triage system important because it enabled a very large number of minor ailments to be managed quickly – leaving the GPs to treat the more complex cases.</p> <p>Ann Kerrigan welcomed the idea of NPs and GPs working through the Triage list together, because this would ensure that a situation which could not be covered by the NP would quickly be picked-up by the GP.</p> <p>Neil also acknowledged that the availability of appointments could improve if Doctors gave Julie more notice of their planned absences (eg: training courses, appraisals and holidays).</p> <p><b>Action:</b> Neil to raise awareness of the impact of unplanned absences with his fellow-GPs</p>
“1-Stop-Shop” Chronic disease appointments	<p>Julie explained that we are actively looking at the possibility to offer a ‘1-Stop shop’ appointment system for patients who have more than one chronic disease condition.</p> <p>She explained that Treatment Room Nurse needed to become multi-skilled at chronic disease management. This could take more than a year to complete, but we were confident that we were moving in the right direction with our nursing team.</p>
Access to the building	<p>We promised to look at whether 1<sup>st</sup> Treatment Room appointments could begin at 8.35am – to allow patients to check-in and take their seat before being called for their appointment.</p> <p>We also promised to ensure that our Self-Check-In terminals were switched-on before we open our doors each morning, but it is not possible to reposition them in other sections of the waiting area.</p> <p><b>Action:</b> we will report back about .35am appointments at our next meeting.</p>

7. Any Other Business.

- Green Practice Staff Changes. Dr Maggie Clark confirmed that she would be retiring from General Practice on 31 March 2014 and Dr Rhona Duncan would be departing

from The Green Practice at the same time. However, a new GP partner had been appointed and in addition, a non-clinical partner was also joining the Practice. Maggie made everyone aware that an Open House farewell was being hosted at the Practice on Wednesday 19<sup>th</sup> March.

- Contingency Planning. Janet Scammell asked how we would plan for a major influx of patients? Neil agreed that this could be something the GPs could discuss at a Practice development meeting.

8. Date of Next Meeting. It was agreed that Quarterly meetings would suit the PPG best, to give us adequate time to work on the action points raised at this meeting. The next meeting should take place in April (mindful of Easter) and the date would be selected by offering a range of possibilities, and selecting the date which suited the majority of PPG members.

*(Afternote: All dates for the meeting will be offered on Mondays or Tuesdays to match the evenings that the Surgery provides late-opening for patients).*

The meeting closed at 7.20pm.

*A S Davies*

A S Davies  
Registered Manager

Distribution:

External:

Action:

PPG Members:

Helen Enticott  
Sue Corish  
Janet Scammell  
Jacky Stenner  
Alan Lindsay  
Wendy Lindsay  
Carol Millard  
June Long  
Colleen Brain

Information: VPPG Members – via email

Internal:

Practice Staff:

Julie Welch – Practice Manager

Dr Neil Crichton – GP Partner, The Armada Family Practice  
Dr Maggie Clark – GP Partner, The Green Practice