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**Meeting: Patient Group Meeting(PPG)**

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**Date: 13<sup>th</sup> May 2013**

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**Location: Seminar Room**

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**Chair: Farina**

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## Notes:

**Present:**

Lynne Waller(LW), Vail Sale (VS), Deanna Morgan- Russell (DM), Jagdish Solanki,(JS), Farina Ahmad (FA), Dr Mustafa Sarang (MS), Dr Raham Karimaghaei

**Apologies:**

Brian Kolbe (BK); Elias Zakaria, Colin Bridges, Joan Crowhurst

	Agenda item	Discussion/Requirement
1	Apologies for Absence	Apologies from Brian Kolbe; Elias Zakaria, Colin Bridges, Joan Crowhurst
2	Welcome to new members	<p>A warm welcome to Vail Sale and Jagdish Solanki. Vail trained as a speech &amp; language therapist working with autistic children. She now does consultancy work and has been a patient of the practice since 1958. Jagdish is a retired community pharmacist and has been a patient at the practice since 2005.</p> <p>Narendra Thakrar has decided to step down from the PPG. We would like to thank him for his valuable contribution throughout the 2 years and wish him well. The PPG suggested sending him a thank you card.</p>
3	Matters arising from the minutes of last meeting	<p>Cars parked outside the entrance gate in Warren Road and the exit gate in Nork Way still appears to be a potential hazard. Follow up with BK at the next meeting. Suggestion of adding a mirror (opposite the exit) so cars can be clearly seen coming down Nork Way. Not sure if we need to approach the council for this or Highway Agencies.</p> <p>Summary of 2012/2013 Patient Survey results for patients to read on notice board.</p> <p>0844 phone number – Following the media hype, Patients are still writing in to complain about the use of this number and when we will be changing the number back to a local 01737 number. FA asked Surgery Line (our current phone provider) to provide some information to say that the 0844 is not a ‘banned’ number and to summarise the cost of a call to the patient. This information is now being sent to each patient who complains about the 0844 number and a summary of our intention to change the phone number back to ‘local number’ from January 2015.</p> <p>FA has had two meetings so far with phone companies with a view of going back to a local number. Currently we have 12 phone lines with the</p>

		<p>accessibility for up to 50 patients to queue at any given time. This can only be achieved with a 0844 number. With a landline number, the maximum number of lines available will only be six phone lines and no queuing system. The 7<sup>th</sup> caller would receive an engaged tone. This was the main reason for changing the phone system back in January 2007, due to patients complaining about the constant 'engaged' tone.</p> <p>FA has 3 further meetings over the next few months. FA to keep the PPG posted. Very positive feedback from the PPG praising the phone system as being excellent with calls being answered quickly and little waiting, especially on a Monday morning.</p> <p>Discussed at the last meeting - Talks suggested by BK eg for back pain / selecting a popular topic for patients to come &amp; listen to - to discuss with BK at next meeting.</p> <p>Handrail for stairs. FA still chasing up with handyman</p>	
3	<p>Welcome to Dr Raham Karimaghaei (FY2 Dr)</p>	<p>A warm welcome to Raham, who has now been with the practice since April. This is Raham's last rotation of the Foundation Programme, each rotation lasting four months. Raham will be with us until August.</p>	
4	<p>Mid Surrey Locality meeting Feedback</p>	<p>With the PCT abolished from 1.4.2013, GPs now control the budget to plan and buy in hospital (community services etc) to meet local patient needs.</p> <p>Mid Surrey is one of four localities making up the Surrey Downs Clinical Commissioning Group (CCG), we fall under. Surrey Downs CCG is made up of 33 GP practices with its board members consisting of consultant, nurses, lay members, financial advisers and GPs.</p> <p>The CCG is governed by the NCB (National Commissioning Board). The NCB monitors the CCG activities.</p> <p>The PPG was re-assured that this is early days, like with any new organisation, it takes time for information to be cascaded down but generally we should remain positive as there will always be some uncertainty with any major change. MS attends the Mid Surrey locality meetings every six weeks and he will keep the PPG updated.</p> <p>MS briefed the PPG on BSBV ( Better Services Better Value). The general overview of BSBV is to have 3 Acute Hospitals only, namely St Georges, Croydon &amp; Kingston. This may result in Epsom &amp; St Helier loosing major services and classed as Urgent Care with an extended facility at only 1 site. This is so that funds can be channeled to making further improvements in the remaining A&amp;E departments and to set up a 16-24hour consultant care within A&amp;E. The structure of the urgent care centre is still unsure but there will be an extended pediatrics &amp; maternity facility. There will be many public consultations underway to take views of the patient. JS was under the view that it should be the local GP who decides which local structure should exist at EGH. MS explained that the BSBV committee has been set up for this reason, who will ultimately make the final decision following the consultation process, which will include patient views and consultations.</p> <p>MS asked PPG members if it would be ok for Denise Crown, a lay member representing Surrey Downs CCG, to communicate with our PPG members directly with information. All members present gave permission for FA to provide Denise with their names and email addresses.</p>	

<p>5</p>	<p>Latest Practice Developments and Achievements</p>	<p>Part time receptionist: Jane Everingham recently joined our reception team in April 2013.</p> <p>Minor refurbishments: Replacement of carpet in all clinical rooms, corridors and waiting room area to vinyl flooring – complete Replacement of cloth chairs in consulting rooms &amp; waiting areas to wipeable chairs &amp; replacement of couch curtains- complete Decoration – painting finished</p> <p>Comments from patients and PPG members on how clean and wonderful the surgery now looks.</p> <p>Salaried GP outcome: FA mentioned 5 GPs were shortlisted and interviewed but unfortunately unsuccessful. In order to provide more pre-bookable/ advance appointments to meet patient demand, an extra clinic is being created on Wednesdays.</p> <p>Phone Triage: To help with the demand for appointments, the ‘Phone Triage’ system was introduced in January 2013, whereby 12 telephone slots are allocated to a GP on a daily rota basis. These phone slots are offered once there are no more appointments available. The aim is to try to treat the minor illness cases over the phone. This would then free up more appointments for patients with acute / chronic problems to attend the surgery. A total of 60 phone triage appointments are available each week. Not all the PPG members were aware of this service but is a good idea to save on appointments. Each call on average takes 5 minutes. Hopefully this has also contributed to reduced A&amp;E attendances, as the patient can deal direct with the GP over the phone for minor ailments and go to A&amp;E</p> <p>Appointment system: FA asked the PPG members how easy do they find it to get an appointment either pre-bookable or on the day. All PPG members very happy with the appointment system and how easy it is to get an appointment on the same day. FA explained that 75% of the appointments are bookable on the same day. Getting the right balance of pre-bookable and on day booking can often be difficult. LW asked if DNA’s have gone down. FA mentioned that patients who have provided their email details to the practice do receive confirmation via email once they have booked an appointment either online or on the phone. Our DNA rate is less for the Drs but still high for nurses, especially where patients have booked 20minutes or more for a travel vaccination. Letters are sent to patients who have not attended a 20minute appointment. When we have the new phone system, text messaging will be an added option which will certainly help with DNAs, as a text reminder, similar to those sent out by dental practices</p>	
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6	AOB	<p><b>Commissioning update: outlined above</b></p> <p><b>111 phone number:</b>  The 111 freephone number was launched April 2013. This now replaces the 'Out of Hours' number for Harmony/Thamesdoc. The message has now been changed on the Surgery answering machine after closing hours. No negative feedback from patients as yet compared to the problems 111 is experiencing across the country. A similar set up to Thamesdoc where all details are passed to the person taking the call and patient waits for a call back. FA unsure of the lead time for a call back to the patient.</p> <p><b>Accident &amp; Emergency attendance:</b>  FA outlined that Nork was the second highest within the Midsurrey locality group for patients attending A&amp;E.  FA explained the cost to the practice every time a patients turns up to A&amp;E which is £84 per patient and £400 if the patient has further diagnostic testing/ admission. Ambulance calls out costs are also allocated back to the practice. MS explained the patients who are attending A&amp;E are for 'Category 1 &amp; 2' investigations, where patients are discharged without any treatment (Category1) or within 24hours (Category 2). Another interesting fact indicated the highest A&amp;E attendances are reported during the surgery opening hours Monday to Friday and with age primarily ranging from 25 to 60 years old.  Raham pointed out that patients who attend A&amp;E think that they are being seen by a more qualified doctor but infact, they are seen by junior doctors with little experience compared to a GP. FA explained that letters are sent to patients who have attended A&amp;E for minor illnesses, who could have been seen at the surgery. Posters are also around the surgery asking for patient's to phone the surgery first, rather then go direct to A&amp;E.</p> <p><b>Suggestions from the group members included putting a list of 'inappropriate A&amp;E attendances' as posters around the surgery for patients to read while waiting in an attempt to discourage patients going direct to A&amp;E without calling the practice first.</b></p>	
7	Date of Next Meeting	<p><b>DATE OF NEXT MEETING : MONDAY 5<sup>TH</sup> AUGUST 2013 5.30pm</b></p>	

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