

Akerman Medical Practice

Patient Participation Group Minutes

Date: 6th August 2014

Minutes Taken By: Craig McCleary

Item	Discussion & Decision
Re-cap from last meeting	<p>The practice newsletter will be available and sent out every quarter via email and we will have printed versions available in the reception room – next issue out in October 2014 for flu season.</p> <p>Signage around the building – Need more visible signs for new patients as very confusing with the Akerman Health Centre but the Akerman Medical Practice being on the second floor. Neil explain name change was good so our surgery is recognisable and there isn't a budget at present for any new signage but will bring up subject at next user group meeting and enquire about a freestanding notice board in front of the stairs.</p>
What's happening in the building	<p>There is a lot of wasted space in the building at present but there are hopes to utilise the space more efficiently once the federation merge has occurred and also patients come forth with ideas that can be submitted at the user group meetings in a bid for useful services to be available at the Akerman Health Centre.</p> <p>There are Yoga and Zumba classes still active in the building run by outside agencies.</p> <p>New fence panels outside the health centre and artwork inside to make the building look more attractive.</p> <p>£15,000 budget for new project with intentions of getting people out of their homes and into the community for activities such as knitting, Christmas wreath making and quilting. More information to be provided in the October newsletter.</p>
New in the practice	<p>Neil explained we're currently recruiting for a female GP and another Nurse to offer more appointments to our growing population of patients. We hope this will cease the common shortage of appointment issue.</p>
Local Area	<p>The Federation scheme, due to happen in March 2015 will see practices joining within boroughs to try and tackle regular visits to hospitals. More specialised services should arise such as phlebotomy, minor surgery, sexual health, circumcisions etc along with an increase in enhanced services catering for specifics and also left out groups which will all be shared so patients from a registered practice can be referred to another practice for a particular service.</p> <p>Akerman Medical Practice will be joining with 16 other practices across the borough consisting of Myatt's Fields Medical Practice, Iveagh Surgery and others to be confirmed at a later date – more information on this nearer the time via our newsletter and emails.</p>
Surveys	<p>Ran through presentation of survey pie charts – surprised to find a large percentage of patients were not aware of the patient participation meeting considering the practices efforts with promoting. Patients at the meeting suggested making texts/emails less formal, advertise on reception screens for longer than 2 weeks and also perhaps give examples on the types of conversations that occur. One loyal participant voiced her opinion stating that referring to the wording of the message(s) sent out inviting patients, patients might feel as though the meeting will have nothing to do with them so will have no benefit in attending.</p> <p>Survey's will be sent out every 2 months which we hope to see a greater response from patients as the most recent one saw a</p>

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	<p>response from 133 out of our total patient list. RE: Dentist question in the survey – patient advised people with financial difficulties can attend St Thomas’ hospital for dental treatment. RE: SELDOC – high percentage of patients still unaware of seldoc’s telephone number despite numerous texts and notices on our website. Craig to have a look at wording and resend messages out perhaps quarterly. Neil explained would like the next survey to be composed of most popular questions from patients and sent to the rest of the patient population and share results via the next PPG meeting and/or practice newsletters – Craig to send out emails/texts requesting questions for next survey.</p> <ul style="list-style-type: none"> • How do Doctors feel the services they offer are? – Can they suggest any improvements?
<p>Communication</p>	<p>General opinion from the participants is that we should play around with the wording for text and email messages regarding invites to the future PPG meetings and possible have an option for patients to respond so we can track how many people should be attending.</p> <p>Participants think it’s a good idea to have leaflets for the next scheduled PPG meetings in advance so it gives patients enough notice to plan and also bring up any ideas or concerns to the meetings.</p> <p>Pharmacy services need to be promoted more so patients can start becoming more aware of when they can attend their local pharmacy for services they believe they need the doctor for although one participant had a concern about confidentiality at a pharmacy over hearing personal problems with another patient.</p> <p>Out of stock medications – we will do our best to alert patients on specific medications that may have discontinued or temporarily out of stock aware as soon as we’re aware, providing them with alternatives which will hopefully be before patients collect scripts and go to their local pharmacy to find medication is different.</p> <p>Walk-in services – Neil explain at present our practice doesn’t offer walk-ins but reception should be up to date with protocols given by the Doctors as to what constitutes an emergency or if a patient should wait to be seen although we are not an acute service.</p> <p>Some of the participants exchanged opinions as some felt the doctors should be more lenient in certain cases seeing as they rarely attend so when they do they are “generally unwell” so feels like there should be exceptions. Another patient suggested that system would never work as the practice would need as many exceptions as there are patients registered as every patient wanting to see the doctor probably feels he/she NEEDS to see the doctor.</p> <p>Neil explained reception staff generally try to help where possible and offer suggestions but ultimately the decision lies with the duty doctor however, we will feed back to the doctors at the next practice meeting.</p> <p>One incident with a diabetic patient having fainting symptom was denied an appointment from reception – possibly mis-communication with reception or new staff member unaware of protocol. Agreed will do some more staff training.</p> <p>General comments were to somehow increase appointments – Neil explained we are planning to get newly qualified Doctors who will only have face-to-face appointments which will accommodate some of the volume of requests.</p>
<p>Closing</p>	<p>Neil thanked patients for participating and encouraged patients to stay involved so we can improve our services.</p>