

PATIENT PARTICIPATION GROUP

MAY LANE SURGERY

Minutes of a Meeting held on the 4th July at 11.00hrs at the May Lane Surgery

Members Present: Lucy Fullard - Vice-Chair
Chris Osgood - Sec.
HA
LC
SH
Jerry Steeden
DT

Apologies: HB
LG – LG, currently, cannot attend meetings and has resigned from the PPG
JG
Jerry Steeden
DT
Dr Simon Opher
Dr Tom Yerburch

Minutes of the Meeting on 13th May 2013

Reasons for Visits to Reception

JS produced a pie chart (see Fig 1) noting that the data had been collected prior to the Uley group leaving in the middle of May. He explained that the key on the right hand side of the chart showed the reasons for each segment, starting from the 30% (grey/blue) of visits to make an appointment, as the bottom key entry, and then moving anti-clockwise around the pie chart as we move up the key entries.

There was some discussion of steps to reduce the three largest segments. JS expressed his belief that “Making Appts” had reduced since the Uley group had left. It was suggested that online booking should be encouraged to reduce this still further. JS reported that the Walnut Tree Practice were planning to pursue that route but that database problems made online bookings impossible for the Acorn Practice.

The “picking up prescriptions” segment could be reduced if more people used the facility for local chemists to collect them “en mass”. It was agreed that this should be encouraged. On line ordering of prescriptions is not available but there is a dedicated phone line.

Logos & Poetry

CO was actioned to re-brand the web site and the facebook page, using the jig-saw logo and then to make a poster to advertise the facebook page. The re-branding had been completed but the poster was still outstanding. Action CO

Late Appointments

JS handed out copies of another chart showing the distribution of lateness (the period from appointment time 'til Call-in) for the GP Partners, that is for three members of the Walnut Tree Practice and two from the Acorn Practice (see Fig 2). The lateness data have been recorded for 15 min blocks. There was clearly a different pattern of lateness between the two practices.

(After the meeting CO, taking estimated data from the charts, calculated the average "lateness" for each GP and found the following values rounded to the nearest minute:

<i>Walnut Tree</i>	<i>KCH</i>	<i>20</i>	<i>DK</i>	<i>20</i>	<i>SO</i>	<i>19</i>
<i>Acorn</i>	<i>JM</i>	<i>26</i>	<i>TY</i>	<i>27</i>		

The meeting felt that waiting times were generally too long and that the 7% of Acorn patients who waited an hour or more were particularly unfortunate.

The PPG invite the Partners to note these results and would much appreciate their comments and thoughts as to how waiting times might be reduced. **Action GPs**

Promotional Photography

SH had offered her partner's photographic skills for a PPG group photograph. We await a suitable opportunity.

Phone Response Times

JS to investigate possibility of recording time to answer phones. SO had agreed to follow this up, **Action JS,SO**

A.O.B

Meeting Frequency & AGM

LF questioned the need for meetings every 6 weeks; it was **AGREED** that in future meetings would be held at 2 monthly intervals. It was **AGREED** that the next meeting would be on Monday 16th September and that that meeting would be an AGM, held at 19.00 in the Tabernacle Church Hall (in case we have a particularly large attendance, and at a cost of about £10). LF agreed to book the Hall. **Action LF**

The Committee noted the AGM requirements in the rules for the PPG:

There shall be an Annual General Meeting each year at a time to be determined

Publicity of this planned meeting shall be provided to all Patients

All Patients will be entitled to attend and to propose one question before the date of the meeting to ensure the question is within the remit of the Patient Participation Group

The vote will be restricted to those who have either attended a prior meeting or notified the Honorary Officers of their interest to attend meetings

The Secretary will prepare a Notice and Agenda for the AGM and these will be available for publication 4 weeks prior to the meeting, (ie by 19th August). The Notice needs to make it clear that only Registered May Lane Patients may attend and then emphasise the requirement for one week's notice of any questions.

It was suggested that the meeting could be advertised by:

- Posters in the Surgery
- Email to Virtual PPG
- The "What's On" column in the Gazette

S & BV Development Plan

LC wished to know if there had been any response to our suggestions. CO replied that there had been an acknowledgement, accompanied by a statement saying that our suggestions would be included. The collation of all the evidence would take some time.

Anti-Shingles Immunisation

HA asked if the Plan for anti -shingles immunisation was being implemented. JS replied that it was, beginning with 70 and 79 year olds. Why 70 & 79 rather than 70 to 79? JS didn't know but was confident that all would be protected eventually.

HA said that in Cambridgeshire there was a scheme by which the 71-78 group could get the injection privately - JS was not aware of any such local scheme.

LF asked if JS could seek clarification of the reasons for the apparently curious choice of initial cohort and whether on not buying a private immunisation might be an option. Action JS

Date of Next Meeting

As agreed above the next meeting will be Monday 16th Sept at 19.00 in the Tabernacle Hall and thereafter every two months.

Wednesday 09/01/13 at 11.00 Monday 18/02/13 at 19.00 Thursday 04/04/13 at 11.00
Monday 13/05/13 at 19.00 Thursday 04/07/13 at 11.00 **Monday 16/09/13 at 19.00**
Thursday 14/11/13 at 11.00 Monday 06/01/14 at 19.00 Thursday 06/03/14 at 11.00

There being no other business the meeting closed at 12.15.

CO 13/07/04

Front Reception Audit 2013

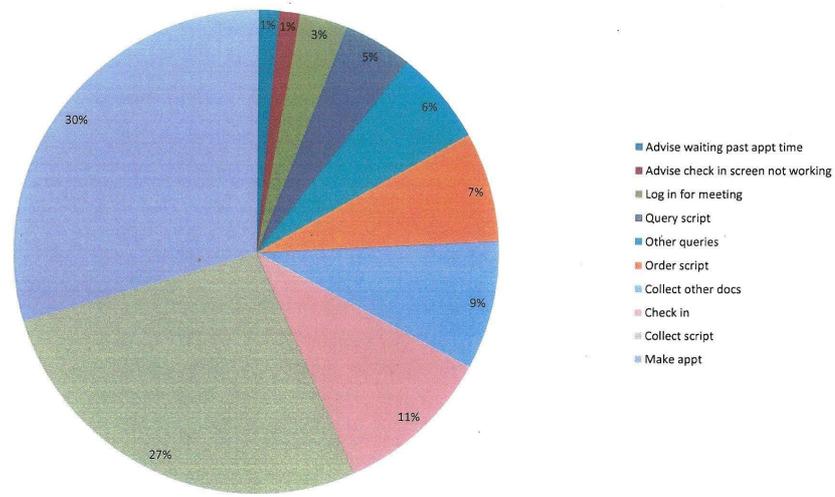


Fig. 1

Waiting Time from Appointment Time to Call-In - Period 1/1/13 - 31/3/13

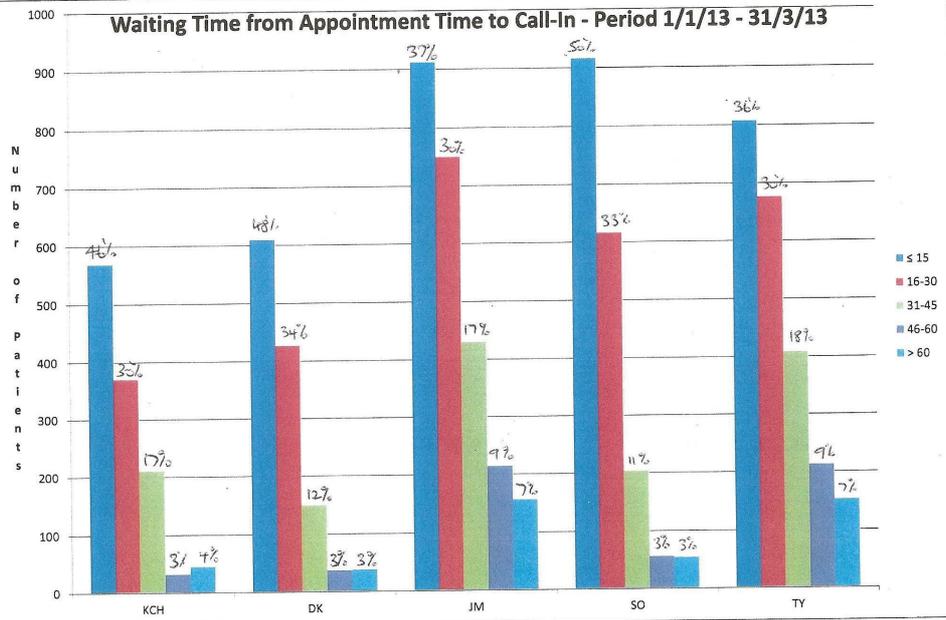


Fig. 2