



## **PATIENT PRACTICE GROUP (PPG) MEETING**

**18<sup>th</sup> June 2015**

Present: Dr Henderson (JH), Sarah Chambers (SC), Lesley Shearer (LS), Isobel MacDonald (IM), Brian Smith (BS), Keith Ainsworth (KA), John Kaighin (JK), Bill Cuthbertson (BC), Baldeep McGarry (BMc) and Anne Docherty (AD - Community Renewal)

### **1. Apologies**

Apologies were received from Scott Griffin

### **2. Approval of the previous minutes**

JH went through the notes from the previous interim meeting on March 17<sup>th</sup>.

### **3. Matters arising**

- Vision Online

BC reported that he had found ordering medication online particularly good, however it was noted that as patients have to scroll down to sign in it would be better if the sign in button was immediately visible. JH explained that this is not software we have any design rights over but hopefully it will be modified in time.

IM stated she had been contacted by a blind patient who tried to order her medication on the phone but was informed we didn't take medication requests over the phone. JH stated that this is because transcription errors can occur if patients phone through their medication orders, as well as making it significantly harder for patients to get through to make appointments/seek advice. However he would ensure that a note was put on her record to inform the receptionists that she must be able to order her repeats by phone.

- Results

Receptionists giving out results was discussed after it was reported that a relative of one of the group was unable to get her results over the phone. This is possible when the GPs have viewed the results and written a message on them for the receptionists to give out. Patients can ring for results 11am – 12pm and 2pm to 3pm.

JH advised the group that we are also introducing telephone consultation appointments in July. This will allow more patients to be consulted and provides a more convenient platform for patients who don't need to actually see the doctor.

The group asked if it would be possible to have phone calls available to book on Vision Online. It was agreed this would be investigated but all agreed it would need to be very clear that these were telephone appointments to avoid patients coming into the surgery in error.

After the trial period, if these appointment slots are successful, we will advertise them on our website.

- Leaflets in the waiting room

The group voiced their dissatisfaction on the positioning of the leaflets as they thought patients would be too embarrassed to select certain leaflets in plain view of everyone in the waiting room. It was agreed alternative locations would be sought, away from the main waiting room, where they could be laid out, instead of in rotating stands, to enable patients to find what they are looking for more easily.

- Modernising Primary Care

JH explained to the group that Banchory practice is one of six practices in Aberdeen City and Aberdeenshire to be part of the Modernising Primary Care pilot. This piece of work has tasked practices with finding different ways of working to cope with the workload of primary care, which in its current form, is not sustainable as there are many GPs retiring/leaving the profession and not enough new GPs coming through the training schemes.

Banchory practice will look at the make-up of the practice and trial a different skill mix to support the GPs in patient care such as making use of Nurse Practitioners, Community Pharmacists and Physician's Associates. We are looking to train up our existing Practice Nurses, who already do minor ailment clinics, to be able to prescribe.

We are also looking at empowering our reception staff so they have the information at their finger tips to be able to direct patients to more appropriate Clinicians or Services.

- PPG Logo

LS's daughter has designed a new logo for the patient group, which was sent to JH. It was agreed that LS would send this to SC who could then circulate it to the rest of the group for their comments.

#### **4. Community Renewal**

Anne Docherty from the Community Renewal project introduced herself to the group and explained that she is working with the practice as part of the Modernising Primary Care project, which is a national initiative exploring ways of improving primary care. NHS Grampian has commissioned six practices to try our new radical/experimental ideas. These practices came up with three main themes to start this piece of work:

- GP Team (Co-ordinator of care)
- Relationship between primary and secondary sectors
- Deep community engagement

In order to tackle the last theme, deep community engagement, NHS Grampian has employed Community Renewal. Community Renewal has designed tools to engage with the community and have worked in areas of deprivation with harder to reach patients. Their aim is to:

- Look at patients in a holistic way
- See how information gets to patients
- Ensure patients see the right person at the right time
- See how doctors can work differently
- Empower reception staff to help patients without seeing the GP.
- See what assets are available in the area – the community have the answers

Anne's role is to work with the practices and speak to patients to get as many people involved as possible to work out what GP Practices will look like in the future and how do we get there?

The Community Renewal project is funded until March 2017

SC said she would like to involve the patient group in the Community Renewal project by asking them to make a directory of services in the area which would be of interest to patients. BS said a good starting point would be the 'Banchory Directory' and 'Charity book'. All the members agreed they would put some contacts together in preparation for the next meeting. It is hoped that this information could then be easily accessed by the staff at the practice to signpost patients to appropriate individuals and services.

## **5. Patient Survey**

SC advised the group she would like to do a PPG patient survey annually, where the patient group highlight potential areas which need improvement and ask specific questions on what we do to improve these areas. She asked the group to think of areas to focus on for the next meeting so that the group could then develop questions relating to these areas.

The plan will be that following the survey, the group will look at all the improvement suggestions and take them forward. A report can then be produced to inform the patient community of what improvements have been made and put on the practice website.

## **6. Feedback from Patients**

IM advised the group that patients are able to put their suggestions/comments in the box in the waiting room to be discussed at each meeting. SC also suggested that the minutes from the PPG minutes could be put on the website with more information about the group, to raise the profile and promote the good work the group does, which everyone agreed.

Having a 'Virtual' PPG was also discussed, whereby patients are able to email comments, suggestions etc to be discussed at the meeting if they're unable to attend personally. SC will develop a vPPG registration form and put it in all new patient packs as well as having it available on the website and in the waiting room.

## **Date and Time of Next Meeting**

Tuesday 15<sup>th</sup> September 2015 at 7.30pm