

Royal Arsenal Medical Centre Patient Participation Group Meeting (PPG)

Date/Location: 21 November 2023 - Royal Arsenal Medical Centre

Time: 17.30

Attendees: Jolanta - Office Manager (J), Karina - Practice Manager (K), Helen - Patient (H),

Steve - Patient (S), Paula - Patient & Minute Taker (P)

Apologies: Alexandra - Patient (A)

Name	Details	Action
J	Welcomed attendees to meeting.	
	All agreed to the creation of an email group for convenience of future communication. Minutes to reflect first names only for confidentiality.	J to create email group
	Disseminated Consent form to patient attendees. All signed and returned to J during the meeting.	
	Asked for nominees for Chair and minute taker.	
	Disseminated the Patient Participation Group (PPG) Policy Document to all.	
P	Agreed to take minutes and proposed that we delay selection of Chair until all patient representatives were present.	All - agree Chair at next meeting
J	Future PPG meetings to take place in Feb, May, Aug & Nov 2024 on Tuesday evenings.	J to disseminate future dates
J	Advised that the Practice is improving patient access on-line, sending links directly to patients via mobile.	
S	Commented that some users are not sure which is the easiest way to use the online portal for the Practice.	
J	Advised that the Practice is sticking to as simple a process as possible - sending a text message and link so patients can access information at their convenience. Patient feedback has been positive.	
H	Commented that she found the link useful. Also found it much easier to cancel appointments rather than have to telephone. Suggested that because the Practice is also on Facebook, that this could be used to communicate and promote the Practice and services provided. Suggested that a template be provided so that Facebook users could give feedback more easily.	All to consider wording of survey
J	Asked how the practice could improve reviews.	
All	General discussion about how society is constantly seeking feedback and what is the best way to receive it. All agreed that more feedback is needed.	
P	Asked J & K why feedback was needed.	
J	The Practice is working hard to positively change attitudes and perception in the community, and positive feedback also helps to improve staff morale.	
P	Asked about the volume and type of complaints received.	

J	<p>Advised that at present the Practice is 9th out of 10 practices for poor ratings in the borough of Greenwich via Google.</p> <p>Not all feedback is bad, but patients are more likely to provide negative rather than positive feedback.</p>	
P	<p>We must aim to obtain more feedback overall and especially aim to get more patients feeding back with their positive experiences.</p> <p>Commented that she had recently had excellent help but wasn't sure how to provide her feedback.</p>	
S	<p>Suggested the use of a simple rating questionnaire (like those used by retailers) using an index of smiling/grumpy faces which patients can tick to feedback on a series of simple questions e.g., ease of booking appointments, help at reception, dealt with in timely manner etc.</p> <p>Use of this simple tool may provide more frequent feedback and could be targeted at specific points of interest or patient type by the Practice.</p>	J&K to consider
J	<p>Handed round the Friends & Family Feedback card for attendees to read.</p>	
P	<p>Commented that she had not seen the card in reception and asked whether it could be incorporated with the simple rating questionnaire and be used to highlight some of the other services offered at the Practice site e.g., podiatry?</p>	J&K to give more prominence to Family & Friend Q'aire. Consider the 'smiley face' rating Q'aire
K	<p>Advised that not all services on site are related directly to the Practice and the intention is to home in specifically on the Practice services.</p>	
P	<p>Asked what patients complain about the most.</p>	
J	<p>Commented that patients complain about several issues and highlighted the issue of hospital referrals. Bar exceptional cases, the Practice has no control over when patients receive their hospital appointment e.g., Ear, Nose and Throat referrals are particularly slow.</p>	
H	<p>Asked how the Practice help can educate patients about their inability to expedite referral appointments.</p>	
All	<p>Discussed ways we could explain that delays are not the fault of the Practice. All expressed frustration that some patients do not appreciate the state of the NHS waiting lists when it comes to their own health issues.</p>	
S	<p>The Practice also needs to remind patients that it may be easier to obtain over the counter medication rather than make a doctor appointment in non-urgent situations.</p>	J&K to give more prominence to notice in reception
H	<p>Proposed that the Practice needs to explain the referral process simply so that patients have a clear understanding of the process and timescales involved. This way they are less likely to complain about the Practice.</p>	

	Suggested that better use of posters on the Practice walls, literature and social media could assist with this aim.	J&K to consider
S&H	Proposed the use of media students to mock up some information about the Practice which could then be used on Facebook and other sites e.g., Instagram.	All – further discussion needed
All	Discussion about client complaints and the level of intolerance, particularly amongst younger patients.	
P	We need to use the right medium to communicate to distinct categories of clients to manage their expectations.	
K	Advised that telephone answer times had improved. More staff are answering the phone lines at 8am and back-office staff can provide help at exceptionally busy times.	
P	Commented that she had recently phoned the Practice and had found the use of more options i.e., press 1 for appointments, 2 for prescriptions etc. had meant she was quickly diverted to the right person to deal with her query.	
J	Advised that the Practice was trying to introduce an 8am urgent/ routine /duty document programme to divert patients to calling at the best time to categorise urgent cases. The Practice is also promoting the eConsult system for non-urgent/routine cases.	
S	Praised the eConsult system. He had recently used it and said it was 'really good'.	
J	Commented that the average response for eConsult queries was 2 days, but in busy times, the Practice has managed expectations to let patients know that the response time may be delayed.	
H	Commented that patients wouldn't mind a slight delay if the Practice kept to the amended timeframe proposed.	
J	Advised that there are lots of Do Not Attend (DNA) appointments.	
P	Asked whether the Practice monitors the DNA numbers.	
J	Advised that the numbers are monitored and after 3 DNA's the Practice will write to the patient and consider de-registration in exceptional situations subject to NHS guidance.	
P	Suggested that the Practice should publish a % cumulative record of DNA's so that patients can see just how many appointments are lost when they don't notify that they can't attend their appointment. It would be a powerful statistic.	J&K
S	Suggested actual numbers are published as they represent a more powerful insight into the issue.	J&K
H	Proposed promotion of the appointment text link to remind patients how easy it is to notify when they need to cancel an appointment.	J&K
P	Asked about instances of violence at the Practice.	

K	Advised that the Police had to be called twice in the previous week to deal with violence by disgruntled patients at reception. It can be stressful and frightening for all staff and sadly, these are not isolated cases.	
J	Proposed that more patients are invited to attend the next PPG meeting.	
H	Proposed that the PPG should include a younger patient representative.	
P	Emphasised the need for more statistical information to help understand key issues which could then be conveyed to patients to help them understand just how many patients are being cared for and the issues (e.g., DNA's) that affect service.	J&K
S	Proposed an on-line newsletter to feature key messages that the Practice wish to relay to patients. He likes to write and would be happy to assist.	All to consider at next meeting
J	Proposed that more feedback is obtained from patients about what they want to be informed about.	J&K
J	Thanks to all attendees for their time. Meeting concluded.	