

DRS SHAMSEE, WARD, WILDING & ASSOCIATES
Slaithwaite Health Centre
New Street, Slaithwaite, HD7 5AB
Tel: 01484 846674 Fax: 01484 841602

Minutes of Patient Participation Group Meeting

5th July 2012

Attendees: Dr James Ward, Kelda Childs (Operational Manager), Vilma Oreniss, Barbara Wood, Ann Middleton, Andrea Gregory, Clive Frost, Kevin Souter.

Text Messaging

It had previously been asked if patients could receive text messages for test results. Investigations had taken place, but there were many issues over confidentiality. The initial focus had been on getting up-to-date mobile phone numbers and consent to receive text messages. It was suggested that texts could be sent simply stating that 'your results are in - please phone the surgery', rather than giving the specific result. This could still potentially breach confidentiality by giving away the fact that a patient had undergone some form of test.

Patients have been receiving appointment reminders via text and some thought this an excellent idea. However, others thought the reminders were indicative of a 'nanny state'. It was asked if the text reminders had made any difference to the number of DNA's (Did Not Attend). Dr Ward's gut feeling was that indeed it had, but he had no figures to hand to support this.

A suggestion was made as to whether emails, relating to results, could be sent automatically from the clinical system. Email addresses were deemed slightly more personal and confidential than a text message, requiring the user to log in to view. However, how often do users check their emails? Text messages are instantly received.

GP On-line

Dr Ward is still currently investigating the possibility of offering simple medical advice on-line. At present, he is focusing on on-line pharmacy advice and the simple medical advice may come into fruition off the back of this. Again, there are many medico-legal and confidentiality issues to consider.

New Website

The new Practice website is now live and can be viewed at slaithwaitehealthcentre.co.uk. The general consensus was that this is a vast improvement on our previous website. It was asked if the GP's areas of speciality could be added to the site.

Saturday Morning Clinics

These continue to be popular with patients and are very well utilised.

PowerPoint Presentation

This continues to be shown in the waiting room and will be frequently updated with information for patients, including the dates of our Saturday clinics and the fact that we have a new website.

Telephone Triage

Some patients said they can feel very uneasy when receptionists ask them questions, such as 'can I ask what it's for?' Dr Ward explained that this form of triage was about being able to direct the patient to the correct clinician. For example, a GP would not be the best person to offer smoking cessation advice and a practice nurse would be more appropriate in this instance. He reiterated that the reception triage was not intended to create a barrier to appointment availability, but helps signpost the patient in the right direction. It was suggested that, when patients phone the surgery, a recorded message could be relayed warning that the receptionists may ask such questions.

GP and Nurse Staff Changes

Patients were reminded that Dr Wilding is currently taking a 12 month sabbatical from the surgery and that Dr Morton is leaving at the end of July to pursue a partnership. They were reassured that replacements had been sought and that the total number of GP sessions will actually be going up in the near future.

Nurse Julia Cook has now left the Practice and we are in the midst of recruiting new nursing staff. In the interim, Sue Haigh (formerly of District Nursing) will be providing nurse cover.

Blood Tests

It was asked why patients are advised to wait a week for the result of a blood test. Dr Ward suggested that most routine results are available within 48 hours, but some less common results can take longer. Although results may come back as soon as the following day, the GPs require time to process them before they can be released to the patient. This can be extremely time consuming, with up to 100 results in a day, and has to be fitted in around other duties, including surgeries, home visits, repeat prescription requests, phone calls to patients and 40 - 50 postal letters per day.

Preventative Measures

One patient was particularly happy with the preventative aspects of the way the surgery operates, for example, phone calls to patients and bereavement visits. These measures help to prevent the need to see a GP in the surgery and reduce the demand on appointments.

Summer Period

Dr Ward reported that the coming months may seem a bit odd in terms of which clinical staff are available and that this was due to the holiday period. However, the surgery has tried to ensure the same level of access to a GP appointment.

Carers

One patient suggested that carers of the terminally ill do not always know where to get help. One solution would be to direct people towards staff at the hospice who can offer help and advice. Dr Ward felt that that the route for support would be dependent on each individual situation. A further suggestion was to have someone specific to provide help at the surgery, such as a social worker. Dr Ward felt that there weren't really the numbers to support this and, again, reiterated that different cases require different approaches. The GPs and District Nurses do meet regularly to discuss patients on the palliative care list.

Purpose of PPG Meetings

The Patient Participation Group meets around every 3 months. The meetings are intended to let patients know what's going on at the surgery and also what we are trying to do to improve our services. They are also an opportunity for patients to let us know their experiences and thoughts on how to improve our services. Without this input we don't always know what's important to our patients.

ENT Outreach Clinic

This monthly service at the surgery has now been discontinued due to financial changes at Barnsley hospital. ENT referrals will now be seen in a hospital setting.

Date of Next Meeting

TBA, but is anticipated to be sometime in October.