



Minutes of the Patient Forum

Date: 27/04/2010 at Fairlands
 Present: JP, PR, JH, DM, JB, JBa, MW, IR, AC, Dr Norris (JSN) & Sarah Casemore (SC)
 Apologies: JM
 Minutes taken by: Sarah C

Areas discussed:

- Welcome & introductions given for this inaugural meeting.
- The group was informed that the main focus of the group was to act as a two-way communication channel between the Practice and the users of the service provided.
- The group is not to be used as a conduit to air personal problems or grievances but to be pro-active in helping to find resolutions to common issues.
- The group is to meet 3 times a year & notes will be posted on the Practice website with member details only given as initials to maintain confidentiality

| Issue | Ideas | Action/Info |
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| 1. Frustration about the lack of appointments at Fairlands | <ul style="list-style-type: none"> • 'sit & wait' for 1 hour in morning and afternoon instead of lunchtimes • Reinstate the system of no appointments just turn up and be seen | <ul style="list-style-type: none"> • SC to discuss these ideas with the Partners |
| 2. Appointments cannot be booked 2 weeks ahead when the Doctor has requested it | | <ul style="list-style-type: none"> • SC to remind receptionists that this can be done if a request slip has been given to the patient after their consultation |
| 3. Concern that internet appointments are given priority over those who use the telephone system | | <ul style="list-style-type: none"> • Reassurance that this is not the case and if an internet slot is not booked it reverts to an appointment that can be used as a 'same day' one |
| 4. Confusion about whether patients can choose to be seen at Normandy or Fairlands | | <ul style="list-style-type: none"> • Patients can be seen at both sites as medical records all on the linked computer system. However staffing and clinics are not always provided at both sites so please enquire at time of booking. Most patients who are registered at Normandy are entitled to have their medicines prepared on-site due their |

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| | | home postcode, so if unable to be seen there this may lead to frustration. |
| 5. Concern over lack of continuity for medical care | | <ul style="list-style-type: none"> The choice of sites should reduce some of this frustration |
| 6. High number of people who fail to attend their appointments leading to waste in the system and an extended waiting time | <ul style="list-style-type: none"> Publicise this more widely to the patients Target those who fail to attend | <ul style="list-style-type: none"> SC to keep promoting this on internal newsletter and via the website/reception desks |
| 7. Unaware of patient newsletter | | <ul style="list-style-type: none"> Although available on webpage, print off more to available at both sites |
| 8. More advice on how to treat yourself at home for common ailments | | <ul style="list-style-type: none"> Keep this section on the website & practice newsletter |
| 9. Overrunning of appointments | | <ul style="list-style-type: none"> Promote one symptom per appointment and book more time if more complex |
| 10. Why is there a Doctors meeting on a Monday morning when this is the busiest time of the week? | | <ul style="list-style-type: none"> SC to speak to Doctors about rescheduling this if possible |
| 11. Uncertainty about the process between test taken to results received | | <ul style="list-style-type: none"> When results come back via the lab, they are linked to medical record and although visible to the receptionists & Drs they cannot be released to the patient until the Dr has reviewed and authorised their release. |
| 12. Lack of reception staff on the desk between 8-8.30am as answering the telephones instead | <ul style="list-style-type: none"> Employ someone to cover the desk | <ul style="list-style-type: none"> 3 telephone lines coming in and 3 reception staff to answer the calls. The touch screen is on for self check-in and if urgent the patient can come to the side window for attention. It is costly to employ a member of staff and there is no guarantee that they won't be taken away from the desk whilst undertaking a patient enquiry. |
| 13. Is the Practice now too big (nearly 12,000 patients) and should it close its books or employ more Doctors? | | <ul style="list-style-type: none"> The process to close to new registrations is extremely complex and not favoured by the Primary Care Trust. |

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| | | <ul style="list-style-type: none"> • This will be discussed with the Partners |
| 14. No clock in reception | | <ul style="list-style-type: none"> • SC to arrange |
| 15. Non-clinical reception staff should not be asking what is wrong when making a booking | | <ul style="list-style-type: none"> • The reception staff are only asking for a 2 word summary to make the clinical prioritisation by the GP easier when faced with a list of symptoms or telephone calls to make. |
| 16. Known allergies should be flagged up as an alert | | <ul style="list-style-type: none"> • This will alert during prescribing but it is best to mention it during your next consult to ensure everything is listed. |
| 17. Carers information | | <ul style="list-style-type: none"> • Confirmation that if we know that a patient is also a carer this alert will be added to their notes and flexibility on appointment booking will be offered |
| 18. There is a problem with people over-ordering drugs which should either not be needed yet (especially around bank holidays) or not used once issued & collected | | <ul style="list-style-type: none"> • Promote this through the newsletter |