

# Temple Cowley Health Centre PPG Minutes

12<sup>th</sup> November 2018 6.30pm – 8pm

## 1 Welcome by Peter Hulcup (Chair)

### Those Present:

- Peter Hulcup (Chair)
- Sheila Spencer
- Eric Spencer
- Janie Hampton
- Peter Micklem
- Graham Norris
- Caroline Morrell
- Chris Hawkins
- Alan Pope
- Jackie Barnard (Reception)
- Georgette Eaton (Specialist Paramedic/PPG Practice Lead)

### Apologises:

- David Evans (Practice Manager)
- Heather White

## 2 Terms Of Reference (Roll of Group) Reviewed and Agreed

## 3 Minutes and Feedback from Last Meeting – accepted and no changes made.

## 4 There was no Surgery Update for this meeting

## 5 Topics for Discussion

### 5.1 Appointment Mechanisms

The following was discussed:

- There was a general discussion regarding the difficulties in seeing 'named' GP, and also issues with seeing non-GP staff.
- Telephone appointments are often not useful – especially if not timed
- A clearer follow up plan would be useful (for example, who to contact if a condition worsens)
- A pathway to talk about urgent issues, but without requiring a face to face or a designated telephone appointment would be helpful.
- It was felt that the information around OXFED was not clear, and how patients could access it. A poster in the waiting room, and clearer information on the website and on social media would help.
- More information regarding appointment slots on the website was requested.

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- Members of the group enquired about a walk-in service.
- There was concern around the part-time nature of all GPs in the practice. This was explained by Jackie and Georgette to be positive for the patients, and the GPs themselves, and have no impact on their care.
- An ability to communicate long waiting times ahead of booked appointments was mentioned.
- It was enquired whether extended opening hours would be helpful, alongside other practices.
- Improving online access.

**ACTION:** Georgette to raise the highlighted points for discussion at the next the Practice Partners meeting.

**ACTION:** Georgette to discuss and implement a feedback processes for patients to feedback their experiences (positive and negative) to the practice.

### 5.2 Blood Pressure Machine in the Waiting Area

This was discussed, with some patients using home BP machines and others having experience of using it in hospital.

Georgette outlined that the cost of machines outweighed their benefit (and the risk of theft).

It was concluded that the group felt that this was not a beneficial at this time, but may be reviewed in the future.

### 5.3 TV Screen/Electronic Notice Boards

Georgette informed the group these will be coming soon, thanks to the previous hard work of the PPG. There is a scheme funded by the CCG which will provide one screen and the media player free of charge. The practice may add an additional screen (possibly two) out of Practice funds.

It was put to the PPG to consider the type of information that should go on these screens.

**ACTION:** PPG to list items of interest for electronic notice boards.

### 5.4 Water Cooler in Waiting Area

It was raised about having a water cooler in the main waiting room. Georgette informed that there is already a water cooler in the nurses' waiting room for patient use. There are no plans to put one in the other waiting room (also limitations on access to drinking water). It was suggested that a sign is put up in the waiting room for this.

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**ACTION: Georgette to put a clear sign up in the main waiting room.**

### 5.5 Web Site Improvements

The lack of user friendliness within the current website, and difficulties with navigation and information was highlighted as concerning. There was discussion about how the website could be better used to improve the patient experience, and also set out information in a much clearer way.

The group acknowledged the need that there was some information that was required to be on the website but there was consensus that it should be reviewed.

**ACTION: PPG to present ideas on how to improve website for next meeting**

### 5.6 Flu Clinic/McMillan Coffee Morning 6th October – Feedback

Georgette informed that we made a fantastic £307.59 for Macmillan and delivered over 200 flu vaccinations. The practice plan to repeat this next year and will have more people vaccinating early on. A huge Thank you to Peter Hulcup and his wife for helping and recruiting into our PPG, and thank you to those for attending tonight.

### 5.7 PPG Minutes add to medical Centre Web Page in line with other Practices

It was outlined that the practice manager, David, controls the website and social media. It was asked if other people in the practice could be involved.

**ACTION: Georgette to discuss with David and upload minutes onto website.**

### 5.8 Action Plan Notes - for Accountability and Feedback

Peter Hulcup showed the table he had put together to keep track of actions of the group. This table was accepted and will be included in the TOR. It was felt that this table would be good to print out and display in the waiting room or on the electronic notice board.

**ACTION: Georgette to put up in the main waiting room**

### 5.9 Patient Access - Only Repeatable Medicines can be ordered on Line? Appointment Status Limited availability On Line

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Jackie outlined that only repeat medicines are available for ordering through any method. Georgette outlined that acute (or one off) medicines will only be prescribed after consultation with a clinician. It was outlined by both Georgette and Jackie that all routine doctor appointments are bookable online and therefore equally bookable by telephone, in person or online. It was explained that nurse appointments cannot go online as there are many different types of appointment which have varying length, so these do require to be booked in person or by telephone.

### 5.10 Potential for another 400/500 Transitional Students due to new accommodation in the Area – How will the Practice Cope? Effect on Existing Staff & Patients?

Georgette explained this is unlikely to have an effect on us at TCMG as the majority of students register with their college doctors (Oxford Uni) or St Bartholomew's (who have a surgery on the grounds of Brookes). Students are also less demanding patients who (on the whole) do not access healthcare services very much. There is however 48 dwellings being erected opposite, which could mean >100 new residents. The practice is confident that we can absorb these patients.

### 5.11 What does the Practice need to do to improve the CQC Rating from Good to Very Good?

This was not discussed due to time constraints on the meeting. However, David, the practice manager has produced the following reply:

*"This is a difficult question! The ratings are: Inadequate, Needs Improvement, Good and Outstanding. The difference between Good and Outstanding is generally down to resource, whether this is number of clinicians, numbers of appointments, the range of services offered, additional work in the community, links and partnerships with other agencies. It would be worth having a read of the CQC website>GPs>Levels of Ratings to get a better understanding of how the rating system works."*

### 5.12 Raised Seating in Waiting Area for Patients with Disability?

Georgette outlined that there are already raised seats in the main waiting room and there are no plans to buy further chairs.

The group felt that these chairs needed to be signed.

**ACTION: Georgette to put up signs in the main waiting room**

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### 5.13 Is There a Budget within the Practice to support the PPG Group?

Georgette outlined that the practice is a small independent business, operating on very tight margins. The practice is, however, willing to support the progress and establishment of a flourishing semi-autonomous PPG. It is anticipated that the group themselves organise fund raising events either to become self-sufficient or support the practice for initiatives that they think would benefit other patients and service users.

### 6.0 Draft Schedule – Meetings 2019

4<sup>th</sup> February 2019

6<sup>th</sup> May 2019

12<sup>th</sup> Aug 2019

25<sup>th</sup> Nov 2019

#### A.O.B

- It was raised under AOB the importance of a practice partner or GP to be present at future meetings.

**ACTION: Georgette to facilitate**

- It was raised under AOB to have information about the GPs Nurses, Receptionists and other practice staff what they look like, and their roles clearly on the website and in the waiting room.

**ACTION: Georgette to facilitate**