

**306 Medical Centre**  
**Minutes of PPG Meeting held on Thu 10 Mar 2016**

**Present:** **Staff:** Mo Dawood (MD-PM), Dr M Chawdhery (MC-GP), Safiya Ali-Ibrahim (SA-Nurse),  
**Patients:** Phillip Lipsidge (PL), Kathleen Lipsidge (KL), Kwame Ocloo (KO), Richard Cooke (RC),

**Apologies:** **Patients:** [Redacted] (Redacted)

	<b>Agenda Item</b>	<b>Timings</b>
1	<b>Meet, greet &amp; eat</b>	12.15 - 12.30
2	<b>Welcome &amp; Introductions</b>  Introductions - A big welcome to all.	12.30 – 12.35
3	<b>Minutes of the last meeting and any matters arising</b>  7a) After due deliberation it was agreed to amend the Mission statement by qualifying quality, so the statement now reads:  <b>Mission statement:</b>  We aim to provide high quality primary health care services with a personal and caring approach in a friendly environment; with the best interests of our service users at the heart of all we do.  We aim to achieve this by maintaining a happy, professional, safe, adaptable and sustainable practice, nurturing a culture which provides continuity and is responsive to patients’ needs and expectations within the framework of the NHS.	12.35 - 12.45
4	<b>Commissioning update and Locality Group Meeting (if any).</b>  Challenges attending the meetings noted, particularly venue and timing. Mo shared that other practice managers in the locality also faced similar challenges. CCG was exploring an online PPG forum and this was well received by members as may be more effective.	12.45 – 12.55
5	<b>Progress on agreed 3 Priorities for the year</b>  1. <b>New seating in reception - Achieved</b>  2. <b>Review appointments and strive to improve wait times for routine appointments to within 2 weeks, based on patient feedback.</b>  • This was considered reasonable and currently appointment wait	12.55 – 13.10

times for any GP usually 5-8 days but does sometimes increase for named GP and holidays.

- Challenges include, DNA's, whilst greatly improved with SMS facility, there is still room for improvement.
- Choice of appointments provided, from early morning to late evening and these can be booked in person, by telephone or online, but for practical reasons not by email. Online availability increased to over 40%
- Considering 3 additional GP sessions and Dr Mujic joining as salaried GP in May and an additional Friday session added with Dr Kamal Patel. There are some concerns about funding regarding potential risks from the planned PMS Review

### 3. 3<sup>rd</sup> Priority – Further practice developments

We made further more detailed submissions at the end of Dec 2015 and we were again required to respond to further queries on 19 Feb 2016. To save time later it was felt that the process should have made it clear that quotes had to be specifically broken down in detail in each of the areas as this would have saved time, particularly with tight deadlines. We have today received confirmation with approval for the planned developments as follows:

- a. Installation of wheelchair ramp at the front – This would also allow wheelchair users access from the front entrance. In the event of an emergency this would allow easy access for stretchers to enter the building. Also this would provide additional safety in the event of a fire making all fire exit doors wheelchair accessible.
- b. If practicable the installation of three single automatic doors to allow easy access for patients who are on wheelchairs, or mothers with buggies and children.
- c. Landscaping back garden to facilitate the creation of children's play area with a covered wheelchair/cycle and buggy parking.
- d. Soundproofing works in the waiting area for patient confidentiality, particularly the wall adjacent to the consulting room attached to the waiting area. This is an issue at the moment and patient confidentiality has to be reinforced by making the wall of the nurse's consulting room soundproofed.
- e. Converting the utility room in a holding room for cases requiring isolation or mothers requesting privacy to feed their babies.

Meeting with builder planned for Monday to progress the works as

	soon as possible.	
6	<p><b>GP National Patient Survey/Friends and family Feedback</b></p> <ul style="list-style-type: none"> <li>• <b>GP National Patient Survey January 2016:</b> <ul style="list-style-type: none"> <li>▪ 82% find it easy to get through to this surgery by phone (Local (CCG) average: 73% National average: 73%)</li> <li>▪ 68% usually get to see or speak to their preferred GP (Local (CCG) average: 53% National average: 59%)</li> <li>▪ 88% were able to get an appointment to see or speak to someone the last time they tried (Local (CCG) average: 79% National average: 85%)</li> <li>▪ 92% find the receptionists at this surgery helpful (Local (CCG) average: 85% National average: 87%)</li> <li>▪ 85% say the last appointment they got was convenient (Local (CCG) average: 86% National average: 92%)</li> <li>▪ 75% describe their experience of making an appointment as good (Local (CCG) average: 67% National average: 73%)</li> <li>▪ 60% usually wait 15 minutes or less after their appointment time to be seen (Local (CCG) average: 57% National average: 65%)</li> <li>▪ 52% feel they don't normally have to wait too long to be seen (Local (CCG) average: 47% National average: 58%)</li> <li>▪ 90% say the last GP they saw or spoke to was good at giving them enough time <ul style="list-style-type: none"> <li>▪ (Local (CCG) average: 81% National average: 87%)</li> </ul> </li> <li>▪ 87% say the last GP they saw or spoke to was good at listening to them. (Local (CCG) average: 84% National average: 89%)</li> <li>▪ 88% say the last GP they saw or spoke to was good at explaining tests and treatments (Local (CCG) average: 80% National average: 86%)</li> <li>▪ 82% say the last GP they saw or spoke to was good at involving them in decisions about their care (Local (CCG) average: 76% National average: 82%)</li> <li>▪ 85% say the last GP they saw or spoke to was good at treating them with care and concern (Local (CCG) average: 80% National average: 85%)</li> <li>▪ 94% had confidence and trust in the last GP they saw or spoke to (Local (CCG) average: 93% National average: 95%)</li> <li>▪ 92% say the last nurse they saw or spoke to was good at giving them enough time (Local (CCG) average: 86% National average: 92%)</li> <li>▪ 92% say the last nurse they saw or spoke to was good at listening to them (Local (CCG) average: 84% National average: 91%)</li> <li>▪ 94% say the last nurse they saw or spoke to was good at explaining tests and treatments (Local (CCG) average: 83% National average: 90%)</li> <li>▪ 90% say the last nurse they saw or spoke to was good at involving them in decisions about their care (Local (CCG) average: 80% National average: 85%)</li> <li>▪ 87% say the last nurse they saw or spoke to was good at treating them</li> </ul> </li> </ul>	13.10 - 13.30

with care and concern (Local (CCG) average: 84% National average: 91%)

- 94% had confidence and trust in the last nurse they saw or spoke to (Local (CCG) average: 94% National average: 97%)
- 75% are satisfied with the surgery's opening hours (Local (CCG) average: 74% National average: 75%)
- 81% describe their overall experience of this surgery as good (Local (CCG) average: 79% National average: 85%)
- 80% would recommend this surgery to someone new to the area.

All in all good outcomes and these reflect the efforts in the practice.

• **Friends and Feedback Dec, Jan & Feb Reviewed:**

Feedback generally very positive and the positive comments had consistent themes. Circulated Data for Dec, Jan & Feb now published on the website and copies on noticeboard:

**Feb 2016**  **91%**  **6%**  **3%**

**Recommended: 26 positive comments**

**Passive** *Nil Comments*

**Not Recommended**

✓ Both times I've been to this doctor I've left crying. Which isn't how it should be.

✓ GP would not refer me for cardiovascular and lung function tests that urgent care hospital sent a letter about stating I need. Instead gp tried to prescribe beta blockers for anxiety, which seems reckless. Very upsetting experience and now feel like I have to go private to be taken seriously and get the tests I require. Would definitely not recommend this practise to anyone as it feels like a battle every time I have an appointment.

**Jan 2016**  **95%**  **4%**  **1%**

**Recommended: 29 positive comments**

**Passive** *Nil Comments*

**Not Recommended**

✓ Because I was told a doctor was going to call me today and no one has bothered. I have recently had extreme issues with my brain and not once has my doctor reached out for a follow up or checked to see if I was okay even though the neurologist has contacted her many a times. I can never get an appointment when I actually need one. Awful, I am beyond fed up

**Dec 2015**  **77%**  **19%**  **4%**

**Recommended: 25 positive comments**

**Passive**

✓ Being told I can't leave a message and having difficulties getting through and when getting through, leaving a message. Although I like my GP, I feel very hurried, so no time to actually chat about health concerns and ask for much advice. Sometimes concerns are often left as I really don't like visiting/contacting the dr as I'm just hurried through the appointment. I had to ask the dr to look at my leg, she was happy to take my word for my leg concerns. Etc just generally a little unhappy.

#### Not Recommended

✓ I had appointment with dr Chawdhery even had a card to prove it and apparently no proof of appointment so had another doctor who was good but felt rushed and I needed a female doctor for this. Also no apology from receptionist

✓ The receptionist made me wait five minutes upon my arrival to my GP appointment, took her time entering my details, then told me I was late and turned me away, with the next available appointment offered at three weeks away.

✓ Dr. Mujic only looks at the numbers on a screen, failing to see the person in front of her and acknowledge their feelings /knowledge about themselves. Dr. Chawdhery, although rushed, was thorough and made me feel included and confident in her.

✓ Nurse unable to carry out day to day task

✓ Professional and caring service. Informing and preventional

- Explained that the Reports are in colour on the website and include patient comments positive, negative and passive. Comments in the main were usually positive as numbers suggested and inevitably a very small proportion of negative comments and some when reviewed were posted in the wrong section when they were actually positive. Copies available in the board.
- On average every month about 50 responses received.
- Negative comments reviewed and whilst these were not significant it was good to reflect on them to identify any areas we may fall short on from time to time. Positive comments reflected that in the main the respondents were happy with practice services and they gave a good balance to the survey.
- However it was felt that it was always good to reflect on good and bad. The feedback gave a snapshot of satisfaction/dissatisfaction, a view which gave a reflection on general performance, highlighting any improvements required.
- **NHS Choices feedback** - No reviewed received on NHS Choices

7	<p><b>AOB</b></p> <p>a. GP Net Earning declaration</p> <p>Contractual requirement and now published on website. Current publication shared. PPG members expressed their surprise at this requirement.</p> <p>b. PMS (Primary Medical Services) Contract Reviews and KPIs (Key Performance Indicators)</p> <ul style="list-style-type: none"> <li>• All Southwark practices are currently going through a PMS review. Currently as a PMS practice we receive an enhanced payment per patient compared to a GMS (General Medical Services) practice and through this process it is hoped that funding is population based and equitably allocated so that a patient registered at a GMS practice is not disadvantaged in any way.</li> <li>• GMS practices will also be able to claim enhanced payment per patient (£19.84 made up of 3 specified areas) by providing enhanced patient services by delivering on the KPI specifications.</li> <li>• Discussed the potential risk based on new KPIs. Potential risk of loss of some funds</li> </ul> <p>c. Needs Assessment Appendix C from Business Plan 2015_16</p> <ul style="list-style-type: none"> <li>• Shared this to seek views and agreement. The Needs Assessment was part of the Business Plan and showed areas that were for consideration such as capacity; telephony and IT; appointments; staff and staff skills levels; processes. Areas the practice had identified for continued review in light of the growing list size.</li> <li>• PPG members agreed that this showed with clarity that the practice was working to a plan to mitigate any challenges. It was felt that these areas were relevant from patient experiences when visiting the practice</li> </ul> <p>d. Indemnity Cost</p> <ul style="list-style-type: none"> <li>• Generally increasing costs discussed current premium about £21k from about £9k, a marked increase. We have explored other providers and have had no choice but to change provider to manage costs.</li> </ul>	13.30 - 13.40
	<p><b>Date of next meeting agreed: Thursday 16 June 2016 @12.30pm</b></p>	

Meeting closed at 1.50pm

**Proposed dates for future Meetings 2016:  
Thursdays @12.30pm: 16 Jun, 8 Sep, 8 Dec**