

## Forest Hill Road Group Practice 2015

### Patient Participation Group Meeting

**Date: 5 November 2015**

**Location: FHRGP**

**Minute taker: Ruby Homawala**

**Chair: E. Rylance-Watson**

**Present: List of members attending**

**Apologies: Joan Mclvor**

- Elizabeth Rylance-Watson introduced herself and explained that there had not been a meeting for 11 months due to a gap in the staffing and said how good it was to see so many people attending. Those present introduced themselves.
- Tina said all the previous minutes had been wiped from the website. She also read out an email from Joan Mclvor asking why there was such a long break between meetings and asking to receive enough notice of future meetings.

#### **ACTION:**

Sonia, the new Surgery Manager, said she would speak to the Data Manager to get the Minutes put back on the website.

- Elizabeth reported that she had met Rosemary Watts [NHS Southwark CCG, Head of Membership, Engagement and Equalities] who had given her the dates of the *Locality Meetings 2016*. In future PPG meetings would be scheduled a few days before the Locality Meetings so that any Action Points can feed in to Locality Meetings.
- There are things about the surgery that are very good that need to be protected and there are things that are not working well that need to be improved.

- Sonia had prepared a presentation and she started with details of Staff Leavers: Dr Raman, Dr Santhaman, Dr Persaud and Receptionist Hilary Knight. She said the Surgery was actively recruiting new staff.
- There were some new starters: Dr Michelle Franco, and Dr Roberts who would start in January. The Pharmacist Rachel Norris was a new post, and they had a new Receptionist Rikae Giorgio-Malcolm.
- Dr Masaba spoke of the excellent work done by the new Pharmacist Rachel and said how useful it was to have her.
- Rachel spoke about her specialism (diabetes) and how she could help with the prescriptions. Tom, a patient said it would be easier for patients if Rachel had her own phone number, as people have to wait a long time on the main surgery number to speak to Rachel.
- There were several suggestions regarding the phone system, including serious complaints about the length of waiting time before speaking to a receptionist, and a long discussion regarding the waiting time on the phone. Sonia said she was waiting for someone from the phone company to come and make some changes to the system to improve matters.

#### ACTION:

Rachel should get her own telephone number; Sonia to address problems with the telephone system. The problems with the phone system were also discussed with the previous manager Isabelle, in the past.

- This led to complaints about there being no parking available at the **Lister** where patients were sent if there were no appointments available at the Surgery. The Lister was also not easily accessible if one had to go there by bus as there were no direct buses available and it wasn't easy to get to, especially with children or if one was unwell. Patients had to be referred to the Lister by one of the Doctors. This also led to delays.

- There was a question about Mental Health patients and the lack of consistency of care with all the changes in the Medical Staff and the problem with appointments, as there was no possibility of getting the same doctor on subsequent visits. This led to a question about named doctors for those above the age of 75 if their named doctor had left the surgery. Dr Masaba informed the meeting that from March 2016 every patient would have a named GP. It was mentioned that there was no guarantee that any patient would get to see their named GP due to the lack of appointments available. In addition, letters from the hospital went to different GPs who were not aware of the patient's history. Dr Masaba said that the Doctors at the Lister had full access to the patient's medical records, so the doctors there are not working blind. At the moment only 40% of the Lister's capacity was being utilised.
- There was a question about why there were so few full time doctors at the surgery. Dr Masaba described a typical day: She normally saw 50 patients per day and also had to do administration and paperwork. She often had to come in on her days off to complete paperwork.
- Telephone consultations (triage) were discussed and patients said they found them problematic as the doctor often rang when it wasn't convenient for the patient, when they were at work or with their children, and didn't want to discuss their medical history when there were others around.
- There was a question regarding the system for mentoring new GPs. Dr Masaba said that the Forest Hill Practice was a Training Practice which was one of the strengths of the Practice and all experienced GPs mentored junior GPs. However, our Practice did not have more junior GPs than elsewhere.
- Going back to the subject of appointments, the Practice contract meant they had to have a certain number of appointments available per 1000 patients per week. The demand at the moment was overwhelming and this meant it was difficult to get appointments.
- A patient mentioned that it was also a responsibility of patients to help their Doctor to look after their health.
- There was a complaint that if there were no appointments available for three weeks, Doctors' diaries were not available for the fourth week, so the patient was not able to make an appointment. The only way to solve this was a

consistent and transparent appointment system, as was available at certain other Practices.

- There was also a complaint regarding the prescription system where a Pharmacy requested prescriptions on behalf of patients. Rachel agreed to try and resolve the problem.
- It was agreed by all that lack of communication was part of the problem, as patients who felt frustrated by the endless wait to speak to someone then sent in a complaint on the website which required Sonia to respond.

#### **ACTION:**

Delia and Tina who had previously offered to keep the notice boards up to date would work on that aspect of communication.

- There was a suggestion that the surgery appoints Triage Nurses so that Doctors have time to do other things.
- Many patients do not attend (DNA) and this waste the time of the doctors and takes up appointments which other patients could use.
- There should be access to a GP within a reasonable time.
- There was a request for regular meetings for Practice Issues so there would be an ongoing dialogue.
- Towards the end, a patient mentioned that though there were problems this was on the whole a good practice.

If we held PPG meetings to coincide with Locality Meetings, there would be six meetings a year which would help communication. The meeting ended with proposed dates for two of the following meetings circulated:

Thursday 8 January (TBC) Meeting and AGM

Thursday 3 March