Meeting of Patient Participation Group at Parkview Surgery

February 23rd 2015

In attendance:

From the practice: Natasha Das Practice Manager Kathy Phelan Receptionist

Patients: Mr Robert Dowling 03.08.1930 White British

Mr Rodney Scott 21.02.1967 Black British Mr William Tutt 28.01.1956 White British 12.07.1963 Other Asian Mr Nyguen Mrs Carmen Edwards 18.02.1958 Black British Mr Keith Hardy White British 01.10.1955 Mrs Margaret Robins 02.10.1932 White British

Representation:

Practice List size currently 4000 and consists of mixed population and a large number of elderly. The members in attendance represented different ethnicities; one a father whose whole family registered brothers and sister's family as well and their parents registered so inclusive of different patient groups. Part of the PPG but unable to attend on this occasion are members of the Irish and Asian community

Selection:

An advertisement for the group and inviting participation was put up in reception and on the practice web site and in addition to this patients who had previously attended groups were personally invited. At this meeting there were two new members.

Agenda:

Members were asked to bring views on current practice services, were shown recent CQC report, comments from nhs choices and the number and nature of complaints this year. Members were also asked what they valued most and what services should be most protected if resources continue to be reduced

Discussion:

General comments about the surgery:

As in previous years the views were extremely positive: 'I always get on well with the nurses here, very good service.' 'Receptionist staff are polite, GP / Nurse are very good and thorough.'

Discussion about possible alternation in local service provision was mixed but general feeling was that emergency GP services were already very accessible so was change really necessary and were there resources to support this?

Did not mind other doctors having access to records as would expect this to happen anyway.

Although do sometimes have to wait a while in reception do not mind this as means doctor is spending time with patients, prefer to wait than be rushed by doctor in consultation.

Are we advertising our services widely enough, do people know what we offer and do patients really know about online access, appointments and prescribing? Can we advertise this better?

Members happy to leaflet and help design leaflets.

Shall we restart newsletter.

Understand if resources further reduced consequence will be longer wait for routine appointment, see this as inevitable but can we make better use of existing appointments?

Conclusions

Generally very happy. Noted low number of complaints and overwhelmingly positive feedback from CQC feedback cards and contrasted this with what they hear from friends registered elsewhere. Keen to have newsletter and leaflet advertising services.

Supportive of putting work into front of surgery to maintain the garden. Two members agreed to attend neighbourhood meeting on Friday.

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