



Medical Practice

Wellington Medical Practice PPG Meeting Minutes held on Tuesday 24th January

Attendees: Dr D Ebenezer, Managing Partner, Dr N Singh, Clinical Lead, Dr T O'Brien Senior Partner, , Mrs D Bott, Compliance & HR Manager, Mrs N Wakenell, Business & I T Manager. Mrs S Smith PPG Lead for the CCG (Clinical Commissioning Group) PPG Members, SD, LP,CC,BP,JM,JF,AB,PJ,TJ,JO,LF,KB,SO,IF

Dr Ebenezer (DE) welcomed everyone to the first PPG meeting and made introductions. DE also updated the PPG on the recent changes that have taken place at the practice with regard to new salaried doctors joining, those being Dr G Livesey, Dr J Ebenezer & Dr M Mascarenhas.

The floor was opened to hear **issues and questions** that patients are having with the practice as a whole.

Telephone access

• A PPG member stated one of the main issues is access to the practice by the telephone and disconnection after being on hold for a period of time; this was confirmed by other members of the PPG.

Call backs

- A PPG member stated that patients are not getting call backs when being told they will.
- A PPG member said that sometimes call backs are at inappropriate times.

Appointment availability

• A PPG member stated that more often than not there are no appointments left after 9.00 am.

• A PPG member stated that there are no Pre-bookable slots available.

• A PPG member asked how patients can access the practice in an afternoon when all the appointments have gone.

Front line staffing

- A PPG member asked how many staff do you have to answer the telephone lines.
- A PPG member asked why do the receptionists need to know the details of why you are calling.
- A PPG member asked why does a receptionist need me to confirm my telephone number every time I call ?

Medication issue following a hospital letter

• Why does a letter requesting medication result in a telephone call, why can the GP not just issue the medication?

Answers

Telephone access

• DE agreed that there are currently issues with the telephone system and that the CCG (Clinical Commissioning Group) are fully aware of the problems that we as a practice are having because of the outdated system we have currently installed and the increased demand for appointments. The CCG are currently in the process of bidding for new telephone systems for seven practices us being one of them. The new phone system will be a VOIP system (Voice over internet protocol). This will hopefully alleviate some of the access issues. With this system it will be able to tell you where you are in the queue therefore allowing the patient to decide if they wish to hold or try again at a later time, the patient will also have the option to select certain options, i.e. home visit request, prescription issues etc. this will also hopefully alleviate access to some degree. As an interim measure the practice and the CCG are working together with the existing telephone system to increase the current incoming channels from 15-21.

Call backs

• All patients are called back at least twice and each attempt is logged into the patients' medical record after 2 attempts at different times of the day if contact has not been made then that patient is marked as answer phone or no answer. If the patient is unavailable to take the call then the patient needs to make the receptionist who is booking the call aware of this at the time of the initial contact. i.e. I will not be available between 10.00 and 2.00 or could the call be after 1.00 etc. this helps both the GP doing the calls and the patient.

Appointment availability

• All doctors have an allocated amount of both telephone consultation slots and face to face slots to book on the day and three days a week they operate a QAC (quick access clinic) for none urgent but need to be seen problems, once these have been booked then any URGENT that come in on the day are passed on to the Duty Doctor to be dealt with appropriately. Each doctor has the capacity to pre book appointments for patients that they may wish to see again for a follow-up of if a patient cannot attend on the day and the doctor feels that the patient needs to be seen they will pre book an appointment slot. With regards to a patient wanting to book a pre-bookable face to face appointments unless otherwise stated will go through a GP first. When a GP speaks to a patient for example on a Monday but this patient can't make it to the surgery until Thursday the GP is able to book a pre-bookable face to face appointment at the time of the telephone consultation.

There is an alternative way to making an appointment other than by telephone we now offer online telephone consultations which you are able to book on the day, this information is available on the Wellington Medical Practice website at <u>www.wellingtonmedicalpractice.co.uk</u> and follow the instructions for on line access.

As stated if a call comes through in an afternoon that is deemed urgent then it will be passed to the duty doctor to deal with appropriately. Alternatively the receptionist will advise of alternative methods of seeking advice and guidance.

Front line Staffing

This can vary from day to day but generally we have between five and seven reception staff answering the telephones.

The receptionists need to know the reason for your call firstly to see if they can advise you of a more appropriate course of action. i.e. if you have an eye problem you will be advised to attend and optician who has signed up to the PEARS group who treat most eye problems, or the pharmacy who are now offering a minor ailment for certain conditions, the receptionist may be able to book you in with a nurse who can deal with your complaint. All of these do not need a telephone conversation with a GP so freeing up the GP to take more urgent calls. Another reason for the receptionist asking for details of your complaint is so that the doctors can prioritise the urgency. Also the reception team are able to book directly into the Quick Access Clinic if the medical problem is appropriate to this clinic. As we are primarily a telephone based practice the need for a patients correct telephone number is imperative and although some people have the same number for many years there are many patients who phone from many different numbers. Another reason for asking is we as a practice send out appointment reminders and therefore again it is important to ensure the correct number is on the patients file.

Medication following letters

If a patient has been seen at a hospital and a letter is sent to the practice informing the GP about a change in medication it is the GPs duty to ensure that the patient is fully aware of this change and understands the reason behind this therefore this will result in the patient needing a telephone consultation to allow safer prescribing of medications.

Other Suggestions to consider

Hearing loop to be installed. (this has been ordered and we await delivery) Lower desk to be used with wheelchair bound patients. Receptionists have been informed to ensure that they comply with this request.

Receptionists to be called something different e.g. call handlers or care navigators as patients do not feel comfortable telling receptionists their problems. Staff have expressed a preference to remain being called a receptionist until further training in care navigation is given.

DE stated that the practice currently has 14.500 patients of which only 750 of these patients are signed up to Wellington Medical Practice online services which allows patients to order repeat prescriptions, pre-book certain appointments view certain aspects of their medical records and seek advice and view what services we have available.

It was decided that the first thing the practice in conjunction with the PPG need to do is to promote this service by way of advertising through the calling system in the practice waiting areas and with a PPG notice board.

Next Meeting Tuesday 7th March