

PONTELAND MEDICALGROUP

PATIENT FORUM

Monday, 9th January, 2009
Ponteland Primary Care Centre

Notes of Meeting

Present: Dr. Mark McCaldin (Partner), Mrs. Janet Boakes (Practice Manager), Sister Helen Baty (Senior Practice Nurse), Mrs. Shirley Hill, Mr. Colin Scott, Mrs. Joan Hentze, Mr Alfred Rutherford, Hilary Aldcroft (IT Manager), Gillian McMullen (Reception Supervisor)

Apologies: None

Notes from last Meeting: Agreed as accurate

Matters Arising:

Texting Appointment Reminders – The practice continues to build a database of patient mobile phone numbers. It had been interesting to note that when the MJOG system used for sending reminders had been “down” for a few days over the last week, the numbers of patients failing to attend the chronic disease clinics at that time had increased. The practice has also started collecting email addresses so that information about changes or new initiatives occurring may be sent to patients electronically.

Dinnington Developments: Janet reported that the Trust had committed a small sum of money from the capital fund to be invested in the Dinnington surgery to address some of the problems with the building, particularly around health and safety issues. It was anticipated that these improvements would be made before the end of March.

Extended Hours: Janet reported that the uptake in appointments for the two evening surgeries had increased and the questionnaire being used to determine why patients were attending appointments outside normal working hours would continue.

General Practice Assessment Questionnaire: The report from the recent Patient Survey had been distributed to the group prior to the meeting, and this was discussed at length.

Patients at both Ponteland and Dinnington had expressed a desire to book appointments on-line, although Mark explained that due to problems with configuration of our current clinical system it would be some months before this was possible.

It was anticipated that the adverse comments received from Dinnington patients regarding the poor accommodation would be reduced once the improvements to the premises were made.

We, therefore, agreed to set priorities around changes to the appointment system, making improvements to telephone call handling and working on improvements to the patient experience when reporting to Reception and waiting in the waiting room. An action plan for the coming twelve months has been prepared and the group was asked to comment on this before sharing with the wider practice population.

Janet also reported that work had commenced with the web-designer to develop a means to carry out surveys through the website so that additional information could be collected over the next year.

Rapid Access Clinic: Janet and Mark reported that the demand on the Rapid Access Clinic (RAC) was increasing to such an extent that it was becoming unmanageable. It had been thought that a temporary way of managing the demand was to reduce the opening hours of the clinic, which at least would allow the doctors time during the middle of the day to carry out visits and paperwork. The group agreed that this was an acceptable short-term solution, giving some time for the practice to investigate alternative ways of managing the demand. Janet suggested that the new times could be:

Monday – Friday – 8.30 am – 11.00 am and 3.00 pm – 5.30 pm

It was agreed to commence this at the beginning of March and Janet was to arrange publicizing this immediately. Mark agreed to work on a new list of criteria for patients attending the RAC before March.

Role and Membership of the Forum: Janet commented that the group had been in existence for two and a half years, and this was an opportunity for members to consider stepping down. She suggested that she discuss this with each of the members individually outside the meeting, after they had had the time to reflect on this.

Date of the next meeting: This was set for Monday, 11th May, 2009.