

Minutes

Practice Meeting

25th February 2013

12:45pm

East Finchley Medical Practice

Meeting called by: CL

Type of meeting: Patient Participation Survey Findings

Facilitator: CL

Note taker: MH

Timekeeper: CL

Attendees: Dr Diane Twena; Dr Sanchita Sen; Catherine Bourel; Mulu Taye; Bernadette Farrell; Janice Marshall; Caroline Quinn; Marion Holley; Rabab Bukhari; Anum Mall

Agenda topics

5 mins

Q1

CL

Discussion: Q1: How easy was it to get an appointment with a GP for the time you wanted?

53% of the patients who responded said it was fairly easy. 33% said it was not very easy. 10% said it was very easy and 4% did not respond. All in all 63% of patients said that it was fairly easy to very easy.

Conclusions: The results are encouraging.

Action items: Need to improve on the level of satisfaction in the new 6 months. There will be a trial for a Monday morning walk-in clinic will be introduced in the Spring of 2013 to see if this improves patient satisfaction. There will be a partner's meeting on 11th March 2013 to discuss the possibility of offering some routine appointments between 16:00 and 16:30 so that parents find it easier to bring children to the surgery. All reception staff will be reminded that babies/infants should never be turned away and should always be given an appointment within the same day; this also applies to the frail/elderly, patients with special needs and the very ill.

Person responsible: All clinicians

Deadline:
31MAY13

5 mins

Q2

CL

Discussion: Q2: Were you able to see the GP you wanted to see?

41% of the patients who responded did not want to see a specific GP; 28% of patients were not able to see the GP they wanted to see. 26% of patients did see a specific GP and 5% did not respond.

Conclusions: We have 3 partners in the practice, Dr Sen and Dr Lawrence working 9 sessions each per week and Dr Twena working 4 sessions per week. It is more difficult to get an appointment with Dr Twena as she is only working part-time and only 4 mornings per week.

Action items: Once we endeavour to offer an appointment with a doctor of choice, it is not always possible to accommodate as not all the partners are working full time. For non urgent matters however, patients can always leave a message with the doctor of their choice who will always call back and assist.

Person responsible:

Deadline:
31MAR13

10 mins

Q3

CL

Discussion:

Q3: How easy was it to get an appointment with the GP you wanted to see?

38% of the patients who responded said it was fairly to quite easy to get an appointment with the GP they wanted to see; 45% said it was not very easy and 17% did not respond.

Q4: How important is it to you that you see a specific GP when coming to this practice?

78% of patients who responded said it was fairly important to very important; 17% patients said it was not important; 1% preferred not to say and 4% did not respond.

Conclusions: We have 3 partners in the practice, Dr Sen and Dr Lawrence working 9 sessions each per week and Dr Twena working 4 sessions per week. It is more difficult to get an appointment with Dr Twena as she is only working part-time and only 4 mornings per week. Whilst the practice realises that continuity of care is extremely important for all patients, demand for appointments is at times so high that the priority of appointments with a doctor of choice is often given to patients with long-term and/or serious conditions. Furthermore, today technology means that access to patients' medical records is instant and any clinician in the practice can access the patient's full medical history from past consultations, to test results, hospital letters, etc ensuring continuity of care without the need for the patient to see a particular doctor.

Action items:

Person responsible:

Deadline:
02APR12

Once we endeavour to offer an appointment with a doctor of choice, it is not always possible to accommodate as not all the partners are working full time. For non urgent matters however, patients can always leave a message with the doctor of their choice who will always call back and assist

5 mins

Q5.

CL

Discussion: Q6: How well do you know which days of the week your GP is available?

66% of the patients who responded said they did not at all know; 26% said they did not know very well; 2% knew quite well; 6% did not respond.

Conclusions: There is obviously a problem which the practice can remedy very quickly.

Action items: The practice will amend the practice leaflet and practice website, as well as publish in the waiting areas the exact days and times when the GPs/practice nurse are on duty. We will also publish on the website and in the waiting rooms the days that clinicians are on annual leave.

Person responsible: CL

Deadline:
31MAR13

5 mins

Q6

CL

Discussion: Q6: What would be the best time for you to see your GP?

32% of patients who responded said they would prefer between 07:00hrs and 08:00hrs; 46% prefer the normal surgery hours; 17% would prefer later afternoon between 17:30hrs and 18:30hrs; 5% did not respond.

Conclusions: The practice already offers early commuters clinic from 07:20 to 08:00 on Tuesdays (Dr Lawrence; Dr Twena) and Wednesdays (Dr Sen and practice nurse). There is no plan or any additional funding from Primary Care Trust to offer evening clinics.

Action items: All in all the majority of patients are satisfied with the current surgery hours that the practice is offering.

Person responsible:

Deadline:

Patients comments Feedback:

All in all the practice have been complimented on the level of care offered by the practice which we are extremely pleased with. However we have also received some negative feedback and we appreciate patients' constructive criticism.

Some patients commented that it was difficult to get through to the practice during certain hours of the day. We obviously need to improve on this and need to find ways to reduce the number of telephone calls during busy times such as early mornings and early afternoons.

First of all we will be changing the time when patients can phone for their test results which currently is every afternoon from 15:00 hours; this will be changed to a later time from 16:00 to 17:30hrs when the receptionist are less busy thus freeing the telephone lines for more urgent matters.

We have also applied for funding from NHS North Central London for a Patient's Self Check-in System whereby patients will be able to register their arrival for appointments without the need to queue up at the desk; this means that more time can be spent by the receptionist to answer the telephones during very busy times. We are now waiting for funding approval.

Some patients also complained that they could only see a locum doctor when they made an appointment; Dr Lawrence is now back from her maternity leave and this should no longer be a problem, except during doctors' annual leave.

A few patients commented on the fact that most routine appointments are offered in the morning; we will discuss at next month partners meeting the possibility to offer more routine appointments in the afternoon, between 16:00 and 16:30hrs so that parents can bring their children to be seen after school.

FINAL CONCLUSION:

CL to draw up a **Patient Participation Action Plan 2012/13** following the discussions of the meeting. Results of the practice survey and proposed action plan will be emailed to the members of the Patient Participation Committee for approval. Results of the practice survey will also be published on the Practice Website and in the Spring 2013 Newsletter together with the approved action plan.