Patient Participation Group 1<sup>st</sup> September 2014 Minutes

Present: Ubbi, Susan, Natasha, Maureen, Paul, Christine, Baljit and Serena.

The CCG have asked us to develop and agree an action plan based on **three** key priority areas.

Our agreed Priorities:

- 1. The referral process
- 2. Electronic Prescribing
- 3. Patient's expectations and responsibilities focusing on DNA rates.

## Action Plan:

 Helping patients understand the referral process. Our aim is to investigate this issue and explore whether it is a problem for patients. BJ said the Dr's could help by explaining the process at the point of referral, ie. "You should hear from the hospital for physiotherapy within eight weeks". Because the process differs for each patient it may be difficult to have a solution that suits everyone.

## Action:

SM raised this at the clinical meeting on 2<sup>nd</sup> September 2014 and the Doctors suggested that we produce a list of patients that have been referred, so that the PPG can give them a post referral interview and see how well they have understood the process.

2. Electronic prescribing has caused some difficulty for patients and chemists. It seems that patients are signing up for electronic prescribing at multiple chemists. Often patients do not remember that they have already signed up or do not realise that signing with a new chemist will invalidate their previous preference.

## Action:

At our meeting we discussed printing a token for patients, however at the clinical meeting on the 2<sup>nd</sup> September 2014 the Dr's agreed it would be simpler if they checked the chemist selected on the computer before sending prescription.

3. Patient expectations and responsibilities – We have agreed to focus on DNA's for this.

DNA's : June 2014 = 101 July 2014 = 97 Aug 2014 = 84

## Action:

To try and reduce these numbers the group will look at the current letters we send to patients when they DNA and possibly change the letter to come from the group rather than the surgery. At the clinical meeting on 2<sup>nd</sup> September 2014, Dr Weston-Price suggested that we also send patients a summary at the end of the year showing how much they have lost from the surgery

budget by missing appointments. I think we will need to concentrate on repeat offenders to make this cost effective. To discuss further at next meeting. SM to add monthly DNA rates to the website.

Other matters and future projects: Waste of medication – 33% of medication prescribed is wasted. Mental Health Management. Publicising the positive aspects of the surgery. To produce a surgery newsletter?

Enc: Flyer from CCG re meeting as discussed (sent by separate e-mail 03.09.2014) Sample DNA letter