# **FRIENDS OF NIGHTINGALE**

#### Minutes of meeting 28.11.2019 @ 4.30pm

- Sam Meikle Opened the meeting with an explanation of group expectations outlining rules of conduct.
- Feedback from attendees about telephone system. Sam had seen evidence of patients calling numerous times without getting there calls answered. One patient on more than one occasion waited on the line until he was caller number 1 then got cut off. Telephone does not allow you to know in what position you are in the queuing system. Having to call at specific times of the day not always practical as may interfere with work commitments also if you do not call early enough in the morning you are told to call back at 2.30 and if you do not get through at that time you will not get to speak to a GP on that day and then have to call back the following day. This can go on for days at a time. Requesting more incoming phone lines. User busy is constant.

Attendees feel that in some cases patients walk into A&E purely because of the frustration of trying to get a GP appointment after calling multiple times and on different days.

- Feedback from Dr SW re telephone system. Dr Williams tried to explain that we can audit the patients that called and got through as we keep a log of patients that call and we are unable to offer an appointment to. Unfortunately we are unable to audit patients that are unable to get through on the telephone line.
- Feedback From (PM) JW re telephone system. PM Jill White explained the capabilities of our telephone system and discussed the patient surveys which took part before the system was put in place. Patients told us in the survey that they would prefer to know where they were in the queuing system. Jill also explained what a "RUBY" patient was this system has been in place for over 1 year. (RUBY patients are our most vulnerable housebound patients that are added to a Dr call back list whatever time of day they call)
- Feedback From attendees regarding Reception. The general feedback was that the reception team are very welcoming and accommodating. Greeting patients with kindness and help. One concerned attendee said they were a little concerned regarding patients with Little nor no English language skills as witnessed an incident previously and thought that it could have been handled better.
- Feedback from attendees regarding Area Regeneration. Valid concerns were raised in regards to the regeneration of the immediate area. Concerns were raised as the population in this area is expanding and so is our list size. Concerns are that we have not enough GP's (also requesting more male GP's) and or space. Not enough receptionists to answer calls if we extend our telephone lines. How do patients get through if it is a genuine emergency? Is the practice struggling?

- **Feedback from PM.** Explained that we were unaware of this being the case but will be looking into it., Jill also gave a brief explanation on how to utilise and browse our website.
- Feedback from attendees regarding GP appointments. One attendee was concerned as said when he did get an appointment he was told needed bloods and to go to reception after consultation and book the appointment. Patient did so then had to come back days later to have a blood test which took all of 30 seconds which amounted to the patient having to take 2 days off work for both appointments. Another attendee was concerned as said never gets to see same GP twice in a row or named GP at all.
- Feedback from PM. Jill announced that we have recently employed a new salaried GP, Administrators and an IT person. Also expressed the request for more funding if it was available for possible more clinical rooms as at some point we will need more GP's due to the volume of patients we house.

### FI8NAL FEEDBACK FROM HE MANAGEMENT TEAM

### **REBECCA SIMPSON**

## JILL WHITE

- **RS** Rebecca has been involved in incorporating 2 new programmes to the practice. PGP-Productive General Practice & Well Organised Practice Programme.
- JW- Introduction to the NHS App & On-line call back services