

Bute House Medical Centre

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Dr H M Shah MBBS

Dr Nasrin Razaq MBChB, MRCCGP, DRCOG

Dr N Davies MBChB MRCCGP DCH DRCOG

Dr K Dissanayake MBBS MRCCGP DFRSH

Dr K Kothari MBBS MRCCGP

Present

Practice	Patients
Dr Nicola Davies – GP	P.M
Ellie Ryan – Practice Manager	D.C
	D.A
	K.G
	A.A
	R.D
	M.K

Apologies

C.B

B.L

R.P-T

NOTES	ACTION
<p>Welcome/Introductions</p> <p>The first meeting was opened by Dr Davies who thanked the patients for taking the time to attend. All attendees introduced themselves.</p>	
<p>Purpose for forming a PPG</p> <p>Dr Davies explained that the key purpose for developing a Patient Participation Group was to involve patients in the organisation and direction of the Practice, to give patients the opportunity to contribute their views on the existing services we provide and to suggest services that could be of value in the future. It was also noted that the PPG meetings were not to be seen as a forum for individual complaints and that we should respect each others rights to contribute/participation in this and subsequent meetings.</p>	
<p>Terms of Reference</p> <p>Dr Davies referred to the Terms of Reference that had been forwarded to each of the group prior to the meeting. The main points within the Terms of Reference were discussed amongst the group. These included:</p> <p>PPG membership – it was noted that this is open to any registered patient of the practice.</p> <p>PPG meetings – the meetings will be held every 8 – 10 weeks at the surgery, will commence at 6.30 pm and last for between 1 – 2 hours. Each meeting will be chaired by one of the GP's in rotation and the Practice Manager will be in attendance to take the minutes. It was noted that the group may wish to appoint a secretary in the future if they would prefer to take responsibility for the minutes and agenda.</p>	

Any other business

A discussion was held amongst the group on the Practice and the services currently being provided. All of the patients present had positive comments to make about the practice. The comments made included the following points:

- Impressed by the quality of care
- Polite and friendly staff
- Services available to patients
- On-line access for booking appointments and requesting scripts
- Practice web-site

One patient representative commented on the notice within the waiting area showing the total number of DNA's during the previous month. All present agreed that they were shocked by the number of appointments wasted by patients who fail to attend without cancelling a booked appointment. The patient representatives suggested that the Practice should look at other ways of notifying patients of the number of appointments being wasted other than just the notice in the patient waiting area. It was suggested that the surgery should make patients aware that they are able to cancel booked appointments on-line. It was also suggested that we might benefit from having a separate telephone line for booking and cancelling of appointments.

It was noted that the surgery was no longer offering appointments during extended hours. Dr Davies explained that the service was initially introduced for a trial period only. During this period patients attending for an appointment in extended hours were asked to complete a questionnaire to establish whether the service would be of long term benefit. Dr Davies reported that the results of the questionnaire had shown that the extended hours service was not beneficial to the high proportion of our patients as it was not being used by the population the service was aimed at, for example, patients who are not able to attend surgery during the core opening hours due to work commitments. Providing this service also resulted in fewer doctors being available during the core hours. It was noted that, due to the findings of the questionnaire, an agreement had been made by the Partners to cease the service.

The following suggestions for improvements that could be addressed were put forward and discussed:

- More prominent notices requesting patients turn off their mobile phones.
- The public toilet on the ground floor needs attention, it was reported that the toilet is very grubby and the flooring is split in places. It was suggested that the area should be refurbished.
- It was noted that the mat at the entrance to the ground floor waiting room needed replacement or repair.
- To provide more accessible information on what services were available at the surgery. It was suggested that the services should be displayed on one dedicated, solid notice-board rather than on several small notices scattered around the surgery.
- It was noted that there were no Patient Information Leaflets available in the patient waiting areas.

ER – for discussion at next Clinical Meeting

*ER
ER – for discussion with HMS*

ER – refer to HMS

ER

ER - to send copy of leaflet to group

Suggested date of next meeting – 8th November 2011 TBC

NB - CONFIRMED DATE OF NEXT MEETING – 22ND NOVEMBER 2011