

Patient Participation Group (PPG) **Minutes**

Location: Woodside Medical Practice

Date and time: 03 October 2022 @ 5.00pm

Present: Mary Emmerson (ME), Linda Karnes (LK), Ian Milroy (IM), Frank Curry, Chairman (FC), Gill Dinwiddy (JD), Jim Hermiston (JH) Nicki Mott – Temporary Practice Manager (NM), Kate Hunter – Practice Manager (KH), Tracey Martin – Practice Medical Secretary (TM).

Apologies: None

Items of Discussion

1. *Review of previous meeting minutes*

Minutes approved.

2. *Group Member Introductions*

None.

3. *Practice Updates.*

○ New Practice Manager

Kate Hunter – newly appointed Practice Manager introduced herself to Members and explained that there will be a full handover in place before NM leaves. Members happy with this information.

○ Call volumes and telephone system

NM provided data on average calls per day.

June 112

July 124

August 140

September 147.

Data showed the average calls abandoned were between 14 - 16%, with an average wait of 2.22 to 2.47 minutes, whilst in January, the average number of calls was 137 per day of which 23% were abandoned and the average wait time was 8 05 minutes.

It was also noted, that since January, it has become apparent that if staff do not log out of the phone system when they leave a desk, then the phone will ring on the desk and not be answered/leaving the patient waiting on the phone (until they hang up). All staff are now aware of this and the importance of logging out of the phone system if they leave the desk.

It was discussed and agreed that the phone answering had improved, and is a reflection of the above and the number of staff increased in the administration team. It was also noted that the wait times at Woodside are thought to be low compared to other medical practices (and other call centres).

It was further discussed that the information each month is however limited i.e. it does not show of the calls that were abandoned calls, how many patients then called back.

Action: NM/KH to check with Redcentric (telephone system provider) to see if information is available and try to provide additional information on this.

Answerphone message:

Members stated that the answerphone message for the Surgery is confusing, possibly contradictory regarding repeat prescriptions, and too long. NM explained that there are things that need to be said on the message. Members also suggested a 'number in queue' would be helpful to patients waiting on the phone. The 8 – 8.30 message may also need review.

Action: NM/KH to review message and contact Redcentric to see if a 'number in queue' would be possible and speak to other PCN Managers to compare answerphone messages.

o Complaint Data

NM provided data on number of complaints received.

In the year Apr21 – Mar22 – a total of 18 complaints were received. These were as follows: 10 clinical, 6 admin and 2 other (appointments).

To date this year (2022) 8 complaints have been received which is broadly in line with the previous year.

NM explained the complaints procedure and outcomes i.e. complaint either upheld or not and stated that all complaint information is made available to CQC if needed and submitted to the NHS annually.

o Friends and Family Feedback

NM provided data on Friends and Family replies received.

June 54 responses (89% recommended)

July 26 responses (88% recommended)

August 98 responses (88% recommended)

September 105 responses (97% recommended)

1st three days of October 59 responses (following the Saturday flu clinic)

Members pleased that numbers are increasing

o Patient Access Online

Current data shows that from March to September the number of patients using the NHS app had risen a little to 23%, and is increasing slowly. It was noted that some patients were still struggling with the NHS App. NM unsure if there could be an IT issue but suggested it might be worth talking to Court Street who have an onsite IT person.

Action: NM/KH to speak to Court Street for advice and bring findings back to Members

o Staffing at Woodside

Members in receipt of staffing details at the Practice:

Woodside Admin staff:

NM was delighted to advise that the admin team is now fully staffed, with the introduction of 4 new staff members recently. NM confirmed that there is a high training burden at present, but this would soon settle.

Woodside Clinical Staff:

NM advised that regular Locums are in place to cover the hours lost by Dr Harwood leaving and until a new GP partner is found. These will be covered by Dr Penman and Dr Price and this is currently in place until January 2023.

Members asked if Surgery had a phlebotomist on site and were advised that there is full-time HCA in post now, and she is fully trained for taking all bloods and is available Monday-Friday am (so more availability than the previous hospital phlebotomist). Also noted, that blood tests are still morning only (unless very urgent) as the collection by the hospital is at lunchtime and bloods cannot be left overnight.

Primary Care Network staff (PCN):

As previously described:

Social Prescribers are in every day

Admin patient treatment co-ordinator (cancer care) – 1 day a week

Pharmacy Assistant – 1 day per week.

Learning Disability (LD) Nurse - specific clinics to identify those with a possible LD

Administrator for the PCN

PCN staff changes since the last meeting:

Practice now has access to two Nursing Associates – each for 1 day per week.

Pharmacist – due to start November – 1/2 day per week.

Practice has access to a remote Physiotherapists 1 day per week. This has been in operation now for several months and was never ideal due to the clinic being remotely done, but no face to face physio staff were available. One part time face to face physio has now been appointed, and will be in practice for half of the day, with the remaining day being via telephone calls. Members asked how a patient gains access to a physio appointment and NM explained that this is generally through the initial phone call with the admin staff, who are able to 'sign post' and book an appointment directly, or via a clinical appointment.

The difference between Partner GPs/Salaried GPs and Locum GPs:

Following discussions at previous PPG meeting all Members were in receipt of a table that NM had produced outlining the differences between Locums, Salaried GP's and Partner GPs i.e. the Partner GP's being responsible for the financial and 'running the business side' of the Practice as well as offering a GP service. The table was discussed at length and Members concluded that knowing about these differences was useful to explain and a simple version of this could be made available to patients. Also discussed was the further information on the number of items worked on in practice might be useful for the Members (i.e. no of prescriptions done each week etc), and the numerous sources of income that have to be claimed etc

Action: NM/KH to see what data could be prepared and shared

Clinical requirements and Clinical meeting agendas

The above discussion led to NM explaining that the practice has to meet many requirements and targets. The Members would like to learn more. It was suggested that a generic clinical meeting agenda could be shared initially.

Action: NM/KH to send an example of a Clinical Meeting Agenda

Routes of Care (Triangle of patient care):

The 'triangle' of patient care was discussed, and it was agreed that an updated version would be useful, and available to patients (on the TC screen) to help them understand the move towards the use of newer staff roles i.e nursing associates – with whom appointments might be offered.

Action: to be discussed again

Community Pharmacy Consultation Service (CPCS) for directing patients to:

NM noted that the practice and local pharmacy are now signed up to a scheme where practice admin staff can book patients a pharmacy appointment the same day (if they have certain minor conditions).

Action: NM/KH to share the details of which conditions can be seen at the Pharmacy with the PPG

○ *Extended hours from October update*

The new requirements for extended access will be implemented from the 1 October 2022. The work will be shared with the other PCN surgeries (Stirchley and Court Street). The PCN will have to provide cover from 6.30 – 8pm on Monday to Fridays and also on a Saturday from 9 – 5pm. Woodside will be required to provide 7 hours a week (compared to the 3.5 hours currently provided on a Saturday morning). The plans have not yet been finalised for how these hours are being provided, but some of these for Woodside will be on Monday/Thursday/ and Thursday Friday evenings from 6.30 – 8.00pm on a two week rota.

Action: Members to be updated with data when service up and running and information available.

○ *Patient numbers at the Practice*

NM stated that at present the number of registered patients at the Practice in July 21 was 6359. The figures from April 21 to Jul 22 show that the figures are fairly consistent and fluctuate between 6350 and 6400

○ *National Patient Survey results*

Members in receipt of data comparing Woodside to other local surgeries. Results are generally disappointing, but it was noted that many surgeries had disappointing results and some of this can be attributed the general lack of GPs (data sent to the group on the national problem of GP numbers in the UK).

This data included how easy patients can get through to surgery, are staff helpful, were patients satisfied by the overall service they were offered and appointment related questions.

NM stated that the survey was very general. The patient numbers in total completing the survey were only 115. The survey itself was lengthy which might have explained the low numbers returned and some questions on survey remained unanswered, so many questions were from even lower patient number responses. The survey was also conducted in January when the practice had low admin staff numbers and significant sickness.

The question 'how easy is it to get through on the phone' was discussed in more detail, as the survey showed this as being only 20% find it easy to get through to this GP practice by phone. (Stirchley 20%, Teldoc 28%, Donnington 19%, Wellington 20%, Court Street 70%,

Ironbridge 69%). It was noted that as discussed above that the phone response time has improved greatly since January

Woodside Patient Survey suggestion:

NM suggested a more targeted purpose made survey for Woodside patients and asked that Members assist in the production of a set of questions which would be more appropriately targeted to Woodside patients that could be sent using MJOG. Members were keen to find out from patients why they might have abandoned a call – i.e. lengthy wait time.

Action: NM/KH to draft possible questions and bring back to PPG to discuss again, compare data with PCN.

○ *Appointment update*

NM advised that Did Not Attend (DNA) information was going to be reviewed across the PCN and would offer additional information when available. Members noted that they would be interested in the face to face data for DNAs.

Action: NM/KH to see what data could be extracted regarding face to face data

4. PPG Membership

Members still recognise that the PPG Group still has under-represented groups and younger Members are needed. It was suggested that an action plan be put forward to try to recruit new Members. Suggestions for recruitment;

- Possible leaflet in pharmacy – whilst patients are waiting to collect prescriptions information at hand for them to see.
- Possible MJOG to target certain age groups
- The TV in reception could offer information about joining the PPG. Members also stated that currently the information available needed review as some may not be applicable.

Action: NM/KH to look at current information on TV with a view to update

AOB

- Members noted that guidelines suggest that a GP would attend the PPG meeting. NM confirmed that Dr Thompson would be happy to answer any questions.

Action: NM/KH to speak with Dr Thompson and perhaps agree to a specific time in the agenda to attend.

- Members asked if surgery website was up-to-date advising patients that Dr Harwood was no longer at the Practice.

Action: NM/KH to check website information.

- Members raised a query regarding the issue of repeat dispensing. NM explained that for patients who regularly get the same medication they do not need to visit the GP every time a repeat prescription is needed, and the GP is able to issue a pre-authorised prescription and send direct to a nominated pharmacy. NM advised that the NHS is greatly pushing this service. NM explained the differences between repeat dispensing and repeat prescriptions.

- Access to patient information from 1st November
This was mentioned in the previous meeting (had been delayed from 1st April22) and from 1st November patients will be able to access all of the data held from the 1st November22. The practice is prepared for this.
- Members raised that the reception area is not always ideal and confidential for patients and wondered if the reception staff had a place to discuss more confidential matters with patients if needed.
Action: KH to review with reception staff (whilst reviewing room usage)
- Members attended the flu clinic Saturday 01 October and wanted to congratulate the Practice for a very well organised clinic and Members wanted staff involved to be aware.
Action: KH to share with all staff involved

NEXT MEETING – MONDAY 16 JANUARY 2023 @ 5.00PM