THE PATIENT PARTICIPATION GROUP

MINUTES OF THE MEETING HELD WEDNESDAY 12TH JUNE 2019 AT THE SURGERY

Attendees:

Dr Shazia Tahseen	GP Partner	Dr Azeem Yussouf	Registrar GP
Patricia Graham	Patient	Karen Cockfield	Patient
Clive Roberts	Patient	Ann Fox	Patient
Sue Southon	Patient	Clare Bowling	Patient
Nancy Perrin	Patient	Sue Osborne	Patient
Cathy Smith	Patient	Janet Goodchild	Receptionist & Note Taker

1. Welcome by Chairman

Unfortunately Michael had sent his apologies for not attending due to ill health so Janet welcomed everyone to the meeting especially the new members and advised that Brian Behrens also wanted to join but wasn't available this evening.

2. Apologies

Apologies were received from Michael Harris, Janice Bird & Brian Behrens. Martha Haruna had not been in touch so Janet will try to contact her to see if she still wishes to be part of the group.

3. Minutes of the previous meeting (March 2019)

With the addition of the "have" between they and computer in paragraph 4 under Matters Arising and the change of spelling to stationery in paragraph 4 under Any Other Business the minutes were approved as a true record.

4. Matters Arising

Members believed that the Appointment System could be made to work better, it was felt that this was due to there not being enough GP appointments available overall and not at times that suited individual patients. Dr Tahseen said that there are limits as to how many patients a GP can safely see each day and give those patients the attention and care that they need. She explained that when clinics were bookable up to 6 weeks in advance there was a much higher incidence of D.N.A's (Did Not Attend) and it was felt to be counterproductive and so the surgery reverted to having 4 weeks in advance.

This led to discussion about how to deal with the DNA's, the Group were advised that immediate texts are sent when a patient misses an appointment but there is not a simple mechanism for tracking multiple offenders although the GP's do speak to the patient, if appropriate, when they are seen.

Clive suggested that a macro could be written to extract information from the system to enable follow ups with regular offenders, he will liaise with Dr Tahseen to see if this is possible both from a technical and legal point of view and whether it would cause any confidentiality issues and what the cost implications would be.

As patients could have extenuating circumstances for missing a series of appointments it would not be possible to operate a blanket "3 strikes and you are out" policy.

It was asked if something could be added to the web site about these missed slots; Janet will follow this up.

There is still some concern about how many appointments are available to book on line, Dr Tahseen said that out of 10,000 patients approximately 3000 are registered for the on line system, and the surgery has to be fair to all of the patients which is why only a percentage are available on line. She then suggested that perhaps members of the group could spend time in reception to see how it actually works and what the demands on the service and staff are and to offer constructive feedback that could be used to tweak the system.

Clare said that she would be happy to sit in at 8am and Cathy at 2pm which are the 2 key times of the day. They may need to sign confidentiality agreements as they may be able to see or become aware of personal and possibly sensitive information about other patients. Janet will arrange dates for them to attend.

The Surgery is part of a PCN Hub that is being set up but we are unsure as to how and what off site appointments we will be able to book for patients and hope to be receiving information soon. Under the provision of this scheme from 1st July 2019 the surgery will no longer be opening on Saturdays. Other surgeries that will be part of our hub are Larkside, Kingfisher, Castle Street, Wenlock & The Town Centre Surgery.

For clarification: **Primary Care Networks** (PCNs) are a key part of the **NHS** Long Term Plan, with all general practices being required to be in a **network** by June 2019, and Clinical Commissioning Groups (CCGs) being required to commit recurrent funding to develop and maintain them.

We are also linked to a scheme whereby various types of appointments, including Nurse and GP can be booked via reception for both evenings and weekends at either the Medici Practice in Windsor Street or at the Gardenia Avenue Surgery (Leagrave) which has proved very useful and convenient for some patients but not everyone is willing or able to travel or wants to pay car park charges.

It was commented that perhaps the surgery has too many patients for the number of GP's, Dr Tahseen advised that NHS England will not allow us to close our books to new patients under our current contract and that many surgeries in Luton are under similar pressures. DNA's exacerbate the situation as does the increasing demands from patients for a GP appointment that could more properly be dealt with by another health care professional e.g. Pharmacist or highly trained Nurse.

The pressures on space also restricts the number of clinic appointments that can be offered, the GP's do conduct a number of telephone consultations every day, and Dr Yussouf does a telephone clinic on Thursday mornings as the Midwife uses one of the consulting rooms. Dr Yussouf explained that it is not always appropriate to prescribe over the phone and visual examination can be a very important indicator of a patients health & well being that really needs to taken into account before recommending a particular treatment or course of action.

The old upstairs consulting room is now used for administrative purposes as it is not considered suitable for access by patients under current health & safety guidelines.

A portacabin is not a viable option due to council & planning issues as well as health & safety, the CCG have said no to Butterfield Green as well as a complete rebuild of the current building which would be needed as the existing foundations would not support upward expansion. The PPG could possibly make a direct appeal to the CCG which might help.

Generally the GP's at our surgery feel that their time is better spent seeing as many patients as they can rather than triaging all phone calls, although they are aware that some surgeries are currently trialling this system and could possibly consider this in the future depending on feedback.

A question was raised about the efficiency of the receptionists at the surgery, Dr Tahseen said that receptionists are given training and that we are obliged to have regular surgery closures for PLT (Protected Learning Time). Everyone also completes annual online training and appraisals are conducted annually by the Partners. However when new staff are appointed there is a huge amount to learn and even experienced staff are not infallible. It can be very stressful on front desk. She said that we are now running through some scenarios at the monthly staff meetings to underpin everyone's knowledge, she also asked if any one would be interested in attending a future PLT session to take part in reception training by giving the patient's point of view in some role play situations.

All test results are reviewed by a GP and it is their responsibility to decide on the most appropriate action this is not something that cannot be delegated to the Admin Team. If action e.g. prescription required or appointment with Nurse or GP then this is tasked to reception for completion. Patients may also ring in for their results, a receptionist will usually be able to tell if they are back but may not necessarily be able to give any detailed information, however they may not just knock on the Doctors door and ask for results without an appointment.

It was noted that when calls come from the surgery it comes up as "private number" on mobile phones and patients can be reluctant to answer unless they are expecting a call. Dr Tahseen said that she would follow this up with the telephone company and also that the call back system is not working as patients are getting cut off just as the call is answered.

Various patient parking options were discussed but there seems to be no easy solution, other than using the public car parks in the village which are fortunately free but do not offer easy access for those with reduced mobility.

5. Practice Report

Dr Tahseen was delighted to say that Dr Yussouf had proved such a valuable addition to the team. He will be with us until August and then be back next year. Dr Hussain should be back in November for his 2nd rotation so we may have a gap from August to November but we could be asked to take another Registrar on for that period.

We have not yet been successful in recruiting another paramedic but we do now have a Minor Illness Nurse with 20years experience working on Tuesdays and the Advanced Nurse Practitioner working on Thursdays, both of whom are valuable additions to the team as well as a permanent Practice Nurse and our Health Care Assistant / Phlebotomist. Everyone said how well Caroline our HCA interacted with the patients and how efficient she is.

We also have regular locums and again they work well at the surgery.

New receptionists have been appointed and are in training.

The Partners are not actively recruiting a new Practice Manager and with the help of Sultana, the Practice Secretary as well as working alongside other practices within our PCN are covering well. They are however open to the possibility of a new appointee if they are made aware of a suitable candidate.

6. Patient Group Input

Most subjects have been covered under Matters Arising.

It was asked if Michael attends any meetings or forums with other PPG Chairs. No one was aware of any invitations that he may have received or if he had attended any. Nothing has come though via the surgery that anyone was aware of.

7. Any Other Business

Karen advised that due to a possible conflict of interest due to her new job with Health Watch Luton she would be resigning form the group. More information can be found about HWL on their website healthwatchluton.co.uk. Patricia also stated that this would be her last meeting. In Michaels' absence Janet thanked both ladies for their attendances and support.

Michael had asked if "The Terms of Reference" and "Constitution" could be issued to new members, Janet will action this and send out with the minutes.

The meeting closed at 7.50pm.

8. Date of Next Meeting

Wednesday 4th September 2019, 6.30pm at the Surgery