MINUTES OF THE LUPSET HEALTH CENTRE PATIENT PARTICIPATION GROUP HELD ON 26th July 2023 AT 14.00pm

**Present:** *LR (chair), ED (secretary), MC, MM, JB, RB, KG, SI*

**Apologies:**

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| **Item** | **Description** | **Action** |
| 1. | **LR** thanked everyone for attending and opened the meeting.  |  |
| 2. | **Apologies – none** |  |
| 3. | **Minutes and matters arising from previous meeting.**MC mention in section 9.2 of previous minutes, there is an error with initials of PPG members. ED confirmed she will correct this error. | **ED to amend initials on previous minutes, section 9A.** |
| 4.4.1.4.2.4.3.4.4.4.5. | **What is happening in practice?**Workflow and Document ManagementLR explained that all practices in the Primary Care Network (PCN) had recently completed an audit of letters received by the surgery, including hospital correspondence, medication letters etc. The audit compared figures across the PCN which showed how many letters were received and in which format, for example, email, post, or electronically. LR explained that there will be a new process starting in September 2023 where a dedicated PCN workflow team who will cover all PCN practices, will deal with the incoming letters. The practice scanning team will continue to scan all documents, which will then be passed to the workflow team electronically for them to deal with and code on the patients’ record. LR said the workflow team will arrange any follow up actions, examples being, blood tests, appointments etc. Medication letters will be sent to the pharmacy team. Any letters not dealt with within the allocated timescale will be distributed to all GP’s present on the day. KG asked what the turn around time will be and LR said it is 24 hours. LR mentioned that currently the GP’s spend around 30 minutes each day dealing with letters. KG asked if the GPs would have more time for appointments as they will not be looking at as many letters, LR said no, as this is all to help the GP’s and to try and prevent burn out.JB and MC both expressed concerns about new cancer diagnoses and how they will be dealt with appropriately. LR explained that any letters with follow up actions will be passed to the appropriate department once it has been seen by the PCN workflow team. For example, if a letter needs urgent action by a GP, the workflow team will pass a message to the On-call GP team via a dedicated task group and ensure that it is brought to the attention of staff and GPs as appropriate. GP AppointmentsRB asked how many patients the GPs currently see a day. LR explained that the GP’s are contracted to 25 patient contacts a day, this could be any form of contact, telephone, face to face etc. RB then asked about the Triage system and if it is still in use. LR explained it is no longer in use as care navigation has been introduced, meaning patients are navigated to the most appropriate clinic, department or person and the appointments could be via telephone or face to face. RB expressed concern that the receptionists are now just ‘gate keepers’. MC asked if the receptionists had all had appropriate training to enable them to decide where to navigate patients to. LR explained that receptionists are not ‘gate keepers’, they are highly trained individuals, and although they are not clinically trained, they have received and continue to receive appropriate training on care navigation. LR said that care navigation is not a new thing that has just been introduced, it has slowly been progressing over several years.Med3 (Sick note)LR explained the new process for sick notes and that it had, up to the date of this meeting, saved at least 15 GP contacts with patients. This freed up appointments for other issues. LR said that there will be a way to request sick notes via Patches once it has been fully set up.Telephone message RB asked why the telephone message which states there are no appointments left, was still on the telephones. LR explained that she had noticed this a few days prior to this meeting, and the message was removed. Flu SeasonLR explained this year’s appointments for flu vaccinations are already on the system to book. This currently just applies to over 65’s as we are still waiting for the confirmed date of delivery for the under 65’s vaccines. LR asked for feedback on whether the PPG members thought it was a good idea to run a blood pressure, weight, and height check clinic at the flu clinics. Patients would be informed of what test they needed whilst in their flu appointment, and then would be directed to the room where the blood pressures etc would be done. Everyone agreed this would be a good idea. |  |
| 5.5.1.5.2. | **Statistics for Lupset Health Centre**Incoming telephone dataLR explained she now has access to data including the number of incoming calls, number of abandoned calls, number of patients currently waiting in the telephone queue, longest call time etc. LR showed the data from 1pm on the 26th July 2023. RB asked how many members of staff answer the phones at 8am, LR said it is eight members of staff. LR explained that a call back feature will be introduced in due course which will enable patients to select this option and receive a call back, rather than wait on the telephone until it is answered. KG mentioned an issue with the number of patients able to be in the phone queue at any one time. LR said this is currently 50 patients, but a call back feature will be introduced in due course. This will enable patients to select an option for a call back, rather than waiting in the phone queue. Medication reviewsLR explained that every month there is a medication review audit done which showed over the last three months, the total of reviews completed has been increasing. The medication reviews are completed by the GP’s, the Pharmacists, and the Pharmacy technicians. The audit figures are discussed in the partners meeting and shared with all the clinicians.  |  |
| 6.6.1. | **Patient feedback**Friends and Family Test LR explained that we are receiving around 250 friends and family reviews per month. Some are good and some are not so good. For example, some gave positive feedback regarding staff and how the patients were treated, and some gave negative feedback regarding appointments and issues with obtaining them. JB asked if patients are still able to book appointments online. LR said there are no GP or nurse practitioner appointments available online as we cannot care navigate patients to the most appropriate service if they are booked online. This issue has been raised with the ICB (Integrated Care Board). KG asked if it was a requirement to have online appointment booking. LR explained it is, but we still have phlebotomy appointments etc online. Online non-urgent appointments will be issued via Patches, once the system is in place. The patients will be able to submit a request for a non-urgent appointment and they will be contacted by the practice. JB mentioned an issue with the phone system during the last Target training day and said there was a message stating the surgery was closed from 8am. ED will contact the phone company RPM to ensure this doesn’t happen again.  | **ED to contact RPM.** |
| 7.7.17.2. | **Staff updates**Surgery updatesLR explained the in-house staff updates including:* Dr Sharman is on maternity leave.
* Dr Anjum is covering Dr Sharman’s maternity leave.
* Dr Apara will be joining us in August 2023.
* New GP registrars start 2nd August 2023.

PCN updatesLR explained the PCN updates including:* Occupational therapist leaves 31.08.23.
* New GP assistants have been recruited.
* New Pharmacy technician has been recruited.
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| 8.8.1.8.2.8.3.8.4. | **AOB**Air AmbulanceLR mentioned she had received an email from the Air ambulance service asking if we would like them to come and speak to the PPG members. Everyone agreed this would be a good idea. LR will contact them and arrange this for the next PPG meeting.GP meetingPPG members mentioned that they still hadn’t had a GP come to a PPG meeting and asked if this could be arranged. LR said she will ask the partners. PPG members recruitmentRB asked if the surgery is making use of the computers as much as possible to try and recruit new PPG members. LR explained that we have advertised in several ways including on social media, the practice website and poster boards in the waiting area. RB mentioned the need for a more diverse age range of PPG members. SI said the issue with this is that most younger patients are working and/or do not have the time to dedicate to the PPG. SI asked if the there could be the option of allowing members to attend meetings virtually, which may help with the issue. LR explained that is possible. KG mentioned she would be happy to attend an upcoming flu clinic to chat to patients and try to recruit them. LR agreed this was a very good idea. Care navigationKG asked if the number of patients care navigated could be discussed at the next meeting. LR confirmed she can provide the figures at the next meeting. | **LR to contact Air Ambulance Service.****LR to speak to partners.****KG to attend flu clinic to try and recruit new members.****LR to provide care navigation figures.** |
| 9. | **Date of next meeting:** Tuesday 24th October at 10.00am.  |  |