# PATIENT PARTICIPATION GROUP

Wednesday 10th April 2024 - 6.30pm

Western Elms Surgery Chair AP Minutes LL

#### 1. Attendees:

PPG: Alan P, Chris G, Susan P, Beti, Hazel McC, Philip, Sue J, Peter, Alice, Debs and Sam

Surgery: Lisa, Lucie, Jane, and Dr Anderson

Apologies: Colin McC, Patricia, and Ann

The meeting was held in person at Western Elms Surgery. The meeting was also accessible via zoom for those who could not attend in person.

Alan asked everyone to introduce themselves to the new member of the PPG, Sam.

### 2. **Matters arising**

Alan started the meeting by welcoming everyone, hoping everyone has been keeping well.

#### Telephone system

Lisa informed the group that we are still working through it. The site survey has been completed at WES, however not at CL. They forgot that we have two sites and have cancelled meetings on two occasions. They have confirmed they will be doing the site survey at CL in May. Xenon were procured by NHS England and were hoping to get all associated costs in by year end. Some training has already been completed and Angie has done lots of work in the back office to ensure that we will be ready.

NHS app ambassadors - Saturday date

We would like to hold a Saturday morning walk in clinic at CL on 4<sup>th</sup> May to advise and inform patients how to use the NHS app. We will get two tech savvy members of the Patient Services Team and invite patients to come in. Perhaps, we could hold one once a month and pick different topics such as requesting prescriptions or medical records. Chris advised that he wasn't available on 4<sup>th</sup> May but could do an alternative date.

We have a core staff in every Saturday. This includes a doctor, nurse, and an HCA. We would like to introduce blood clinics on a Saturday so that we have a phlebotomy offering to support phlebotomy in secondary care. Some surgeries don't offer any. Bloods can be collected securely and confidentially and it would be great to add it to our bow. Saturday appointments are not available at the RBH.

#### Questionnaire

Lisa asked the group whether they were happy with questionnaire that was distributed. Perhaps we open it out more to include MDT. The FFT feedback is really informative, although the information includes a lot of war and peace. We are very good at dealing with all complaints and invest a lot of time. The feedback we get from FFT is anonymous. Sometimes we need more context around incidents to ensure that we can properly investigate them.

Chris asked whether patients are going to be honest whilst being in the waiting room. Lisa responded that patients aren't generally shy in coming forward and we want feedback that we can do something about. However, it needs to be constructive criticism. PPG members to provide availability to Lucie – Lucie to make contact.

The minutes were voted as accurate and accepted.

## 3. Guest Speaker – Chris Anderson, Partner

Dr Anderson joined the practice last July as an associate GP. He confirmed the exiting news that himself and Dr Camilla Arthur had both become partners as of 1<sup>st</sup> April 2024 and the partnership now consisted of 8 partners. He confirmed that he would be continuing in his role as PA mentor, mentoring the 5 Physician Associates. They are not doctors but do a similar role to a GP apart from they can't prescribe. They have a GP supervising them who is their mentor. They are available during the day and have dedicated time to supervise them. We have a Lead PA who is supervising the other PAs.

As of 1<sup>st</sup> April 2024 we are now Elm Park PCN. We were with The Potteries but we decided that would like to go it on our own.

Peter asked whether we were big enough to do this.

Lisa responded that PCNs are made up of practices that have between 7000-15000 patients, with exception of us, The University of Reading Medical Practice and Brookside Surgery. The Potteries were taken over by Operose Health last September. Our model is very different to that of a company and we felt that we could make decisions overnight with our partnership. We are really excited about the future and there are lots of things we might now look at. There are potentially things we did do that we could do better and be more efficient.

Alan welcomed Camilla and Chris to the partnership and hope that they will be happy in their new roles!

### 4. Financial

The balance for WES and CL is £2,798.57.

Lisa informed the group that Dr Millar has cleaned off all his tools and there is no need to purchase any new cautery equipment. We may look to purchase a new derma scope which looks at lesions and spots and then we can send photos off to the dermatology department.

# 5. **Surgery News**

FFT – statistics from February 2024 onwards

Peter commented on the FFT feedback that patients appear to be getting irate about having to wait at length for appointments. Perhaps, we could advise patients if there is likely to be a wait.

Chris asked whether the system advises the clinician that the patient has arrived. Lisa responded that the system notifies the clinician that the patient has arrived, then when you have been called to the clinician it updates the timer to the length of time you have been seen and then when the patient leaves, the clinician records them as left.

Some complaints are around the patient requesting a telephone consultation but not receiving the call. Lisa commented that we always ring a patient twice if they don't answer the first time and some doctors send a text as well. There would be an audit trail on EMIS to ensure that it had been documented and we can provide evidence to support that.

There appears to have been some dreadful experiences regarding phlebotomy. Lisa confirmed that we will be investigating this as there have been some variable experiences.

Chris commented that if a patient has been registered at either WES or CL then it becomes a habit that you go to that one particular surgery for your appointments. Lisa responded that the appointment location is advised on booking and via our text messaging service. NHS England pays for our text messaging so that we send communications 48hrs and then 12hrs prior to appointments. We have been WECLS for 6 years; we are one surgery with two buildings

Lisa confirmed that we will review waiting times and phlebotomy.

### 6. **Patient Voice**

The February Patient Voice meeting was cancelled.

### 7. **AOB**

Accessing patient records - CG

Lisa informed the group that records have been digitised and we you can look at your medical records. However, digitisation only goes back so far. We have summarised patient records since 1990 from the patient's paper record (Lloyd George). This system became defunct and was put onto a clinical system. Every medical record is summarised with the key points that had happened and from then on everything has been electronic. All paper records are stored alphabetically on both sites.

Since last November, all patients have been able to view their own medical records through the NHS app. Prior to that, we can look at cases on an individual basis. You can put in a request for a SAR (Subject Access Request).

With regards to copies of medical records, these were given back to the individual not a solicitor. We were receiving so many requests that this is now outsourced to an external company. Sam commented that if the police needed to request from a victim their medical history, they would need to complete a form requesting their medical history and liaise with the Medical Defence Union. Lisa advised the group that Lucie isn't the PA to the PPG and that the PPG email should not be used for individual issues. If you have an individual issue, you should contact we.scripts@nhs.net and not the PPG email. Debs commented that the PPG meeting is about the whole service and not about individuals. AP closed the meeting by thanking everyone for attending. 8. Date of next meetings: Wednesday 5th June @ CL @ 1.00pm Wednesday 7th August @ WES @ 6.30pm AGM - Wednesday 9th October @ CL @ 6.30pm Wednesday 4th December @ WES @ 1.00pm