

## **Minutes taken at PPG Committee Meeting on 1<sup>st</sup> February 2023 held at All Saints Church Hoole**

### **1. Welcome and Apologies:**

**Present:** Francis Burgess (Chair), Peter Maskery, Gilly Davis (Operations Manager), Jennifer Mudd (Operations Manager), Ian Lambert, Peter Hyland, Lesley Dooley, Tania Hinde, Kathy Rickets, Gill Jones, Annie Fletcher ( Student)

**Apologies:** Tansy Stewart, Nick Dent, Sandra Rudd, Clare Noble, Nigel Taylor, David Stork, Anne Rigby, Lisa Howells, Dr. Brindle.

### **2. Welcome and Introduction:**

A welcome was extended to all especially to Annie Fletcher – a sixth form student, with an interest in studying medicine, who sat in to observe.

### **3. The minutes of the last meeting:**

IL pointed out 2 errors – Minutes wrongly labelled PCG meeting and Lisa Howard not Lisa Howells

It was confirmed that the new telephone system has been in place since 23<sup>rd</sup> November 2022 and stats revealed that during period 2/1/23 – 26/1/23 there were 4520 calls and 991 people used the call back system. Patients should not call back a second time as the calls are knocked back and place in queue is lost as the system think you have received your call back.

There have been a reduced number of complaints and it was confirmed that once used to the system, it is not necessary to listen to the whole message as you can just press necessary button for the service that you require. There are no call back facility after 4pm as this allows the team time for processing prescriptions and other admin work.

An NHS initiative called Accelerate has enabled call times to be reduced to 2 minutes.

If any problems arise with the new telephone system it can be tweaked to suit all. It is possible to track a particular call to see which extension the call has been passed through to etc.

The online system for booking appointments via the NHS app is now working.

December 2022 and January 2023 were difficult months with many cases of flu, scarlet fever and Strep A and there were shortages of certain drugs.

The minutes were approved and accepted.

### **4. Election of Vice-Chair:**

No-one had come forward to fill this vacancy so it continues to be open.

### **5. An update on changes and developments at the surgery.**

The surgery is being used as a pilot site for online self-registration of new patients. This will reduce the processing time for entering new patients on to the system from 30 minutes to around 15 minutes. There will be a link to the NHS app which will give all the information. It is hoped this will reduce the admin workload. Paper registration forms could still be used for patients without access to the internet.

The “Lloyd George” wallets are to be emptied once the data has been digitised by an external agency. Everything will be secure and safe. The wallets themselves must be kept as they belong to the Treasury and may still contain X rays and CD’s which cannot be scanned onto the system. This digitisation will enable speedier transfer of records to a new GP although the system is not in place in Wales. The wallets are being sent in batches to be digitised. This is being funded by the NHS.

There are 2 full time new GP assistants; Macy and Tyler who will assist with clinical and operational tasks. One has clinical experience.

**IL** asked if they had to have specific qualifications and it was confirmed that they did not have to. These are Additional Roles Reimbursement Scheme (ARRS) supported by the Primary Care Networks (PCN's) by providing funding for reimbursable roles. These GPA's will take pressure off GP's and have their own clinics etc. They will also deal with work such insurance claim forms etc. Training programme is still being developed.

Blood tests will continue to be carried out at the hospital for the time being.

**PM** asked if the committee could be provided with a new organisational structure layout. **GD** agreed to this. Two operations administrators have left the practice and three new ones have been employed. Their hours are equivalent to two full time staff and this should provide cover for illness and holidays.

There will be a new online system for communicating with patients called PATCHS – this should make it easier for patients to access the most suitable treatment options via their GP. Currently SMS is used which can take longer. There will be a slow rollout for this new system to be set in place.

SMS text messages are sent by Accurx which is funded by the ICB (Integrated Care Board)

This new system is not public knowledge yet but all surgeries within the PCN will use it. Patients might be concerned about scams but no personal information questions will be asked.

Every patient interaction with the surgery should include something like “does your mobile number still end in .....” Phone lines will still be an option for people to use to book appointments.

**FB** attended the PCN/PCG road show and was disappointed with information as much was already known, although a useful handout was given. It was well attended with two people from each practice.

#### **6. Whatsapp Group – mobile numbers:**

**FB** asked if all those wanting to join the existing WhatsApp group could let him have their mobile numbers, so he can add them.

#### **7.” The worst winter ever for the NHS” – how was Park Medical affected and coping?**

The hospitals were overloaded, and the strikes did affect things. There were drug shortages at pharmacies. Every day the staff have a 10am meeting to raise any on the day issues and despite being very busy they coped.

**PM** requested that the minutes reflect how much the practice is appreciated and the work put in by all the staff to keep things running smoothly.

The Friends and Family survey results were shared, and the stats were presented for November 2022 – January 2023. There has been a drastic improvement. There has been a 10% increase in the rating good and very good.

**FB** said it would be useful to compare it with the PPG survey done 2 years ago.

It will be useful to mention in the future newsletter how things are progressing. Colleagues in the practice are always advised of positive comments and any criticism is addressed.

#### **8. The Newsletter for the surgery website and other means of distribution:**

**IL** thought it important to advise patients how to access services and to tell them how the surgery is doing.

It was thought a quarterly newsletter would be useful.

Printouts could be given to patients on request and the details put up on the television screen or a laminated newsletter on the notice board. Due to infection control, no paper leaflets are out on display for people to handle. Primarily, patients should be directed to check the practice website.

The minutes of PPG meetings are also to be added onto the website by the care co-ordinator or Richard.

#### **9. Updates on any actions taken since the last meeting:**

No further updates

#### **10.PCN Feedback from December 13<sup>th</sup> meeting and ongoing developments: proposed PCN patient Steering Group:**

A PCN level PCG had been suggested.

A Patient Steering Group could be formed from 4 PPG's to give feedback to PCN, although the group would not be in favour of the possibility of a PCN group replacing the practice level PPG.

For **IL** It was clarified that Funding comes from the PCN. Jennifer Mudd said the support from the PCN was good and that it pays for ARRS roles such as the clinical pharmacists etc. The PCN is quite powerful in dealing with the ICB.

**FB** said that there used to be a meeting of PPG chairs. **GD** said there is a national meeting too.

**11. Patient Survey 2023:**

It is hoped that this will be carried out in the summer of 2023. The last survey was influenced by the pandemic. **JM** has a template which could be used and it was felt that careful consideration should be given to the questions asked. A sub-committee may be formed nearer to July with a view to produce the survey by September. This should be formed at the next meeting.

**12. AOB:**

The practice is still waiting for funding for patient facilities although one toilet has been replaced. There is a downstairs toilet for disabled patients.

**GD** understood that the practice can be inspected at any time by the Care Quality Commission (CQC)

The last inspection was in 2016 and it is usually done every 4/5 years. The inspectors can look at things like the Friends and Family Survey, Health Watch, Facebook etc and things that might trigger an inspection might be safety issues or reports. The Practice has to demonstrate that it is Safe, Effective and Caring.

Helsby Practice PPG has a Facebook page and **FB** will speak to them. There is Facebook page for Park Medical and it has the apple and surgery logo.

**IL** expressed the need to contact younger groups of patients so they could express their views.

**JM** will see if she has a campaign poster for PPG.

**PM** asked if key points of meeting could be circulated soon.

**13. Date of next meeting: Wednesday 19<sup>th</sup> April 2023 2.00pm – 3.30pm at All Saints Church.**