KINGS MEDICAL CENTRE

Patient Participation Group Meeting (PPG)

at 17:00-18:15 on the Thursday, 12th January, 2023

Location: KMC meeting room

MINUTES

**Attendees**

Sara Callen, Bernard Mooney, Frank Solarz, Jack Forsey, Russell Coffer, Chris Parle, Guy Kilbey, Eva Leung (All Patients), Dr J McLaughlin, Gary Thorogood (Kings Medical Centre)

**Apologies**

Lucinda Culpin, Peter Farrier

**Chair**

Chris Parle

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| 1. **Introductions**

**Meeting opened by Chris Parle**PPG members introduced themselves and new PPG members (Guy Kilbey and Eva Leung) were introduced to the other attendees.CP & GT Welcomed the new group members and said that it was very positive that the group members were increasing in number.GT-discussed and welcome rescheduled meeting (postponed on the 15th December due to weather (Snow & Ice) thanked group for understanding |  |
| 1. **Actions from Previous Minutes**

Previous meeting minutes were agreed by groupActions from previous meeting;1. GT circulated survey results-completed 23.09.22
2. GT share Accurx Patient online services information-completed 18.11.22
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| 1. **Appointments and Appointment Data**

Data from 26th Sept to 25th DecemberTotal Appointments 9616,Face to Face Appointments 6725Telephone appointments 2755 (136 Unknown)Appointments on the same day 4588Telephone calls to practice in December 9635, November 10282GT-noted difference Dec to Nov likely due to 330 new patient triage requests and two Christmas Bank Holidays.Monday, Tuesday and Friday remain highest volume call days in that order. Three receptionists on duty for our busiest shifts on these daysContinuing until the 31st of March utilising additional capacity funding to provide 5 extra GP session (3hrs each) every two weeks to provide additional capacity of GP appointmentsGroup asked if there was any history or comparative data of appointment numbersGT shared information for the last four years.2019-308302020-313742021-323812022-35275Data showed Practice had delivered 14.4% more appointments in 2022 than in 2019 and shown 1.7%, 3.2% and 8.9% increases respectively annually since end of 2019. |  |
| 1. **Update/Experience-New Patient Triage system**

GT-Following soft launch, the new Patient Triage system was launched on the 28th November. This system replacing the older Doctor Link system.Since the 28th of November we have received 330 requests via the new system (217 medical / 113 Administrative). Previously Doctor link generated approximately 15 requests per week. So based upon current usage (47 per week) we are well ahead of usage compared to Doctor link.Teething issues-Patient understanding. The system is for non-urgent (ie, not for same day requests) The group agreed that we should look at the wording on the current landing page to ensure that Patients are using the Patient triage portal for the correct requests. GT also confirmed system only open when practice is openRC-asked if this was going to be fully promoted to all patients to increase the awareness. GT-Until we can increase understanding and get the correct message regarding this non-urgent facility, we will not be rolling out a mass communication. Currently learning how to operate this in conjunction with telephone requests, full communication at this stage would not offer the best service to our patients. Dr M-agreed that some urgent requests were being put through this new system, two day turn around means it should only be used for non-urgent requests.CP-queried if Patient repeat prescription could be requested through this platform. GT confirmed that patients were able to use system to order repeat prescriptionsSC & EL agreed to support the practice with the wording of the landing page. GT will circulate the current message to SC & EL.  |  |
| 1. **Introduction to New Paramedic role and New Health and wellbeing coach role.**

GT-Shared information with the group about these two new rolesEL-We need to try and communicate what these roles are to the wider patient population to increase awareness of the services available. Great to have but even better if more patients awareGT-We can try to do this via the Practice web site and Initial Patient NewsletterPost meeting EL offered support as has experience in digital communications. GT will pick up with EL Separately. Group discussed the Extended access appointments that were now being offered by the Primary Care Network. Dr. M noted that these gave practices extra capacity. RC asked if we could let patients know about these out of hours services? GT noted that the reception team had access to book these appointments and could offer these to give greater flexibility to patients who found weekend / evening appointments more convenient but said that patients could not book these directly (booked via reception). Practice working to keep this as seamless as possible. GT agreed that patient communications around this point will be increased within the appointments area of the website and within any initial patient newsletter. |  |
| 1. **Practice Access Patient Survey**

GT-Keys points that Practice and PPG need to addressPatient awareness of website (only 39% surveyed used it)Patients ordering repeat prescriptions via NHS app (only 23% knew you could)-impacts on reception call handlingEntrance to Practice needs improving to allow better disabled access and congestionPatients would like to request appointments through the website-New Accurx patient service offers this facility |  |
| 1. **Any other Business**

BM-Discussed impact of loneliness. GT agreed to use any information that BM could provide for us to use in the practiceCP-discussed issue of Prescription wastage and the cost wastage that this has on firstly the practice and also at a larger scale within the NHS. Group agreed that this should be a continued discussion point and would like GT to arrange a local pharmacist to attend the next PPG meeting |  |
| 1. **Close**

Propose Thursday 20th of April for the next meeting |  |
| 1. **Actions**

**A.**GT to send minutes of meeting out to group by 26th of January**B.**GT to send Accurx landing page wording to SC and EL so wording can be reviewed and amended as required by 26th January**C.**GT to circulate Accurx triage user guides to new members of the PPG (GK & EL) by 26th January suggestions reviewed and changes made by the 16th February**D.** Patient awareness of all roles/services the practice can offer. GT to work with group to format News letter and digital communications to patients. Aim to publish News letter in February, GT to ask for volunteers to help with Structure of news letter based on Patient survey feedback. This needs to include focus on website and NHS app and Services available and also patient prescription self management (using the survey results) **E**. GT to continue to work with Partners to formulate plan for Entrance **F**. BM agreed to provide literature on loneliness that can be displayed within the practice and be made available to patients online**G**. GT to invite local pharmacist to next PPG meeting to discuss prescription wastage issues and how the practice could work toreduce this |  |