

University Medical Group – PPG Meeting – 17th August 2022 6-7pm

Chair: Dr Elizabeth Johnston

Minutes: Fiona Mullin

Attended by members of the PPG both in person and via teams.

Agenda

1. Appointments

Presentation given by Dr Johnston with appointment data taken from the NHS Digital GP Appointments Data Dashboard. Appointments have been stable over the last year in the main. The number of appointments available with a GP are stable to increasing. The split between face to face and telephone appointments is almost the same. Questions were asked for at this point.

Q. What about pre-bookable appointments, why are there never any pre-bookable appointments available any more?

Approximately 50% of the appointments are booked in advance. FM informed the meeting that the majority of the appointments that are not attended by patients (DNAs) are from pre-booked appointments.

2. Care Planning

Q – who looks at the care plans?

A – Westcall – it gives them more depth, they would look at the latest care plan.

PPG member commented that didn't realise could find care plan review online and had found that it wasn't uploaded with the most up to date information ie keycode wasn't on the plan.

3. Social Prescribers and health inequalities

The social prescribers have been a valuable resource, they are able to give time to patients to help with things like filling in forms, signposting to charities that can assist with patient issues and support patients to access services and help with health inequalities. The social prescribers have helped numerous patients who might be homeless, lacking in social contact, poor mental health, carers, refugees.

4. Patient Survey

EJ – We need to be in the top 5 for the area, we are usually up there with Balmore Park and The Boathouse Surgery. Patient survey results are down from last year which is not a surprise. Recipients of surveys are not chosen by the practice, they are sent externally, 800+ surveys were sent out and 183 responses received.

Questions and comments from the PPG

- It could mean that language and communication is a barrier for some patients.

- Have you been monitoring serious conditions such as cancer? NHS England are saying there is a spike in referrals and some late referrals.
EJ – During Covid, any patients with serious worries were seen, each GP had slots available at the end of every day where they could bring patients in for face to face examinations if they needed to.
- What is the latest situation with the walk in centre, has that gone? EJ – yes. NHS 111 will triage and send patients the minor injuries unit.
- Is there any corresponding data from the Royal Berkshire Hospital? EJ – The RBH say they are getting more people with the emergency department. A&E sometimes provide lists of inappropriate attendances at A&E, proximity is a factor as well. This would be more of a wider system discussion. A&E do need more support.
- When are the Covid boosters going to be available? EJ – September/October time.
- Social prescribing? What do they do, is there a budget? EJ – They liaise with other charities, Ridgeline Trust, Alana House etc and help people fill out forms etc. It reduces the number of GP appointments required for this type of work and saves some GP time. Social prescribing is a really useful resource and beneficial to the patients.
- Online appointments – not enough time to fill in the relevant information and appointments get taken before being able to complete booking.
- On joining the practice, PPG member wanted to have 1 GP but have seen nearly all of them and when wanted to discuss a result with the GP who requested it, was not able to speak to that GP. Is it not better for continuity to be able to see or speak to the same GP?
EJ – 2 of the challenges the practice has are access and continuity of care. As a practice we said we were going to prioritise access and try to mitigate that with GP bookable slots where only a GP can book into to follow up with patients they need to follow up with. There are practice bookable slots available for reception to use. GPs are asked to use their GP bookable slots for follow up but they do run out of them.
- Does the practice do over 40s check ups?
EJ – NHS health checks stopped with Covid. Reading Borough Council funds them and the purpose is to try to pick up undetected disease and cardiovascular disease prevention. The practice does do them but they are not a priority at the moment. If a patient contacts us, is eligible and we have capacity, we can book them for the health check.
- Studies have been done about the Nepalese community having a proclivity to diabetes. As a GP practice, are you going to be trained to do 'prevent'.
EJ – We are a PCN (Primary Care Network) which gets funding for social prescribers and other roles. Health inequality is an area that we have been focussing on. Areas are reaching our targets for people on statins, working on hypertension, we are not targeted on ethnicity at this time, we could do that in the future.
- Can there be a page on the website to explain about appointments and the telephone system.

Action: Online bookable appointments – patients can't 'hold' them while filling in information and they get taken before completing the booking – This is the current system - FM to contact the clinical system provider to find out if this can be changed – Response from Emis – clinical system provider confirmed that currently no way to 'hold' the appointments.

EJ – We appreciate the support and input from the PPG and it is wonderful to be able to have a face meeting again. Thank you everyone for coming or attending from home via Teams and thank you for your comments, questions and suggestions and we look forward to seeing you at the next meeting in due course.