

Minutes of a Meeting of the Patient Participation Group held at Dawley Medical Practice on Wednesday 24<sup>th</sup> July 2019 at 1.00pm.

Present: PJS (chair), JE, EB-D, DC, SW, NC, BK, BA, NM, SDH (note taker)

Apologies: DY, DH, MH, SM

CQC Report (circulated)

NM – the draft report had been received and the overall rating had changed to good. The only area that required improvement was ‘service responsiveness’. This related to the appointment system. However the data that had been initially looked at was January to March 2018. The appointment system at Dawley changed at the end of April 2019 so didn’t really reflect the true picture. The practice was required to send information back to the CQC but the final report wasn’t expected to be very different. The report does show the huge amount of work that had been done since last October and was a testament to the staff and PPG although more work was needed. BA – booking an appointment was still a problem. NM – wanted the PPG to understand the pressures the admin team were under.

**For action: - NM to provide the PPG with a breakdown on what the admin team does on a day-to-day basis**

Practice Patient Survey (circulated)

NM – This was a draft report; the numbers who had responded to this were higher than the national survey. The message coming through was that patients were happy once they had seen a clinician but getting an appointment was the problem. Again these results related to a time before the appointment system changed and it was still early days to see how effective the changes had been.

The Friends & Family Test (FFT)

NM – the results also showed a small increase in the number of respondents who would recommend the practice. (80% in January, 83% in May & June). The next step was to decide how this information should be shared with the practice population.

After some discussion the following methods were suggested – putting the whole report on the website, posters in reception, a digest of the report on the Jayex system, flyers in local centres (Dawley House, the Christian Centre, Dawley Town Hall, Little Wenlock Town Hall, Dawley library), sending a text message with a link to the report (need to check if there is a charge to the practice).

Patient Survey

NM – the plan was to let the new appointment system bed in and then carry out another survey. It may include a question along the lines of ‘what next?’ The PPG could really help with the General Productive Practice Scheme. This would be coming up in September and would be an intense look at specific areas of the practice (yet to be decided). One area that other practices had focused on was whether all appointments were clinically appropriate (1 in 5 are not). There was a big push from NHS England for signposting – with admin teams directing enquiries to the most appropriate service. There was a lot of training being organised. A directory had been promised for Telford & Wrekin but hadn’t happened yet. The plan was for the survey to start in August and then run till September/October until the same numbers of responses had been received. **For action: - the survey to be publicised on the website and by posters in reception.**

Telephone System

NM – the cost to come out of the current contract would be £28k + VAT. The practice was tied into the contract until 2024. Discussions were ongoing with the CCG to see if they could help but it wasn’t hopeful. A log of all the calls received last week had been printed off – it showed a total of 765 incoming calls and 93 abandoned calls. The average time for answering calls was just under two minutes; the

average time for abandoning calls was 2 minutes 13 seconds. A lot depended on the time of day the call came in. Extra staff had been put on duty first thing in the morning as this was the busiest time. It was also open to patients to register for Patient Access (this could be done by asking at reception for an individual access code). A certain number of appointments should be available online and signing up also allowed patients to order medication online. However if the facility wasn't used for six months a patient would need to re-register. **For action: - to provide EB-D with the name of the phone provider and the software package. She would look at the capability of the system.**

### National Patient Survey

NM – this was published last week (and related to the period between January – March 2019). 334 questionnaires had been sent out to random patients and 142 returned (a 43% completion rate). The results were very similar to the practice survey; the respondents were happy with the clinicians but not happy with the phones or appointments system. Again the survey was carried out before the changes to the appointment system.

### GP Workload

NM – Dr Bufton had been asked to redo her 'day in the life'. The last list was from a couple of years ago and if anything her workload was worse. She worked 3 days a week but each day was twelve hours long so effectively full time. There was a cultural shift in the NHS because of the crisis in GP recruitment. There was a really big push from NHS England to look at ways of managing demand; this could include the employment in general practice of clinical pharmacists and more Advanced Nurse Practitioners all of whom bring a different skills.

### Staffing

NM – It still wasn't known whether Dr Davies would be returning or if he returns, when or for how many days. The advert for Dr Yomi-Adeleke's position had gone out but there had been no response. Another ad would be going out shortly. In the interim the practice would be looking at employing a clinical pharmacist and locum GPs. It was hoped the practice would have a new manager shortly – a second interview had been held last night. The practice had said NM could provide support if it was required. A new nurse would be starting in September.

### Update on the practice generally

- i). Refurb – NM -The sorting of the lease was getting closer. However NHS England had now said they required more quotes for the work. Once these were obtained the matter would have to go back to the CCG Primary Care Committee. This needed to be done by next April. A third of the refurbishment costs would have to be paid for by the practice (this would mean a bank loan). There was no current funding available for new builds.
- ii). Extended Hours – NM – the existing contract provisions for extended hours appointments had been terminated and the new Primary Care Networks (PCNs) had to agree a plan for 8am – 8pm care 7 days a week by September. The care would have to be at a practice (not necessarily this one). It was not yet sorted but care would be offered within the network first then by other practices in Telford & Wrekin as a whole. Dawley had agreed to continue with the late night Tuesday but could offer no more (which would mean another loss in practice income). The advice was to keep using the existing numbers for extended access for the time being. A publicity campaign was planned for September.
- iii). PINCER – NM – this was a new safety project the practice had signed up to which related to prescribing safeguards. The clinical system did already flag up various warnings, but under the project the patient medication data would be looked at with the aim of flagging up potential problems.

### Healthy Hearts

NM – work was ongoing to advise patients already diagnosed with hypertension and/or high cholesterol levels to start taking atorvastatin or increase their dosage (this had been found to be better at controlling cholesterol levels and beneficial for controlling plaque in the arteries).

### PPG Terms of Reference

PJS – these had been drawn up some years ago and would need to be looked at again by the group. There were also discussions to set up a PPG group across the SE Telford (SET) Primary Care Network.

### Any Other Business

BA – had met with the head of the Lions PSA screening programme. BA wanted to know if he could put a poster up in the waiting room when the next screening sessions were being held. **For action: - *NM to ask the partners.***

### Jacqui Seaton

PJS – asked if the group would be interested in inviting Jacqui Seaton to talk to the PPG. She was Head of Medicines Management at the CCG and was very involved in the forthcoming changes. The group agreed.

### Date of Next Meeting

The next scheduled meeting was Wednesday 18<sup>th</sup> September 2019 @ 1.00pm

The meeting closed at 2.10pm.