

## **Patient Working Group Minutes 18<sup>th</sup> October 2023**

**Attendees: 5 PPG Sue, Rachael, Lorna.**

**Apologies: 3 PPG memvers**

To start the meeting everyone introduced themselves to a new member of Bethesda's PPG.

### **1. Sign off previous minutes**

Everyone was happy regarding the previous minutes.

### **2. Matters Arising**

**All of the previous matters arising were actioned, these included;**

- Switch over dates on website (for new systems)
- Pharmacy information added to website
- New phone system added to next PPG agenda.

It was mentioned that a previous topic when diabetes UK attended the surgery he felt as though it was not advertised very clearly and that it wasn't regarding foot checks. Lorna said they did advertise this but maybe in future look at how things are advertised. We have to be mindful that we can only allow our PCN to take part so have to be careful where things are advertised.

It was also asked why the ambulance has been moved into a parking space. Rachael said that this is due to the flu clinics and will be moved back.

### **3. Staff Update**

Rachael said that Nurse Sabine is leaving and Claire a new HCA will be starting with us. Rachael explained that it is hard to hire a fully trained practice Nurse but we are trying to upskill our staff to help with demand. Nurses Linda and Sherrie are the only nurses that are able to do chronic disease management and Nurse Fleur is currently in training for diabetes management.

To try and help with the demand GPs now have one session a week where they see patients with Long term conditions so they can come up with a management plan to help with the appointments and care for patients.

It was asked if there is a nurse who oversees diabetes, Rachael explained that there is not but Dr Jha one of the partners oversees this and has meetings every week with Nurse Fleur and the pharmacist Ross to aid with teaching and any queries they may have.

### **4. Phone System update/feedback**

Rachael explained that the from staff point of view the new phone system is much easier and flexible, she also explained that the STATs are really good and so far all comments have been positive but asked for feedback from the PPG. The feedback was she would like to offer is that sometimes with the call back feature the receptionist does not hold onto the phone long enough.

**Action: RC to speak to the Reception Manager for feedback to Reception**

***Post meeting note: Rachael spoke to Alison and feedback was circulated to the reception team.***

It was said that the phone system has improved a lot and the call back option is working well.

It was also previously said that along with other patients used to feel dread when having to phone but said he feels with the new system it will be much easier. It was discussed how econsults are a good way to make an appointment and that they are triaged by an Acute Care Team member so the patient sees the most appropriate clinician.

#### **5. Website requested update**

It was agreed to discuss this when a member can attend. **Action Jo to check with PPG what he wishes to discuss at next meeting.**

A discussion took place and Rachael explained that GP appointments cannot be booked online because they may not always be used appropriately but patients are able to book blood tests online and hoping to move towards the New Problems Clinic being available online which is any condition that has been present under four weeks.

#### **6. Measures to be put in place when a clinician is off to avoid delay**

A member of PPG advised that he had an issue when a nurse was not in the surgery causing some delay. Rachael explained that unfortunately we cannot help staff sickness and we do have measures in place to try and keep work maintained.

#### **7. My GP patient survey results**

A member of the PPG gave out some survey data, it was asked who gets selected. Rachael explained that we have not seen this data until now and only a small number of patients are randomly selected so the data is not really accurate.

It was noticed that our percentages were better than both The Limes and Northdown Surgery. It was agreed that primary care is changing a lot and some people are stuck in old ways and we need to try and re-educate patients to learn how and when to receive timely appropriate care.

Lorna explained that there will be some training within the PCN to try and loose the Receptionist title and the role turn more into a patient adviser. Training is being done in November for the Reception team to start the process.

It was discussed how the surveys only went to 355 patients and not all replied and we have 19100 patients so it is not accurate. It was discussed how we could do our own survey for patients.

A member of the PPG explained that they was part of the Dane Valley residents Association, Lorna advised that the PCN are focusing a lot of work in this area and would be good to discuss.

#### **8. Covid Vaccination timetable**

This item was put on the agenda by Terry and he was not present at the meeting. Jo explained that A member of PPG expressed some concerns regarding the delay with the Covid Vaccines. Rachael explained that unfortunately for Flu and covid vaccines the pharmacy get the delivery first even when we order our flu vaccinations a year in advanced.

Rachael said that we had our first covid clinic on the 21<sup>st</sup> October which is the first time we could book to clinic due to the delivery on the vaccines that unfortunately we have no control over.

#### **9. PCN update**

Lorna said that the ambulance is still currently decommissioned but will be used to access the local community that don't always come to the GP surgeries. It will be a 'Health on Wheels' and will be sign written with this in different languages to reach the whole community.

Activity update Lorna said there is a care navigation training – which is a pilot scheme that has been commissioned by the ICB for reception and admin staff. Lorna said the aim of this will be to give both staff and patients more confidence with the backup from GPs and will include constant updated training.

Lorna discussed with the PPG that it may be helpful for a subgroup for our PCN to have reps to get together and agree on data we would like to get together. **Action: Lorna**

AOB:

Rachael advised the CQC visit was cancelled due to the clinician that was due to do the inspection could not attend. Rachael said they will be back but not sure when at the moment.

There was a discussion regarding the dementia coffee morning confusion where someone was told that pt carer cannot come with them. Lorna said that the SPLW (social prescribing link workers) arrange this and it may be an EKids policy, but as far as she is aware if someone needs support then they are welcome to bring someone.

It was asked on patient access he can only see the problem and not the consultation. Jo explained that this will change as of the 31<sup>st</sup> October and patients will have full access to everything on record, unless GP deems it unsafe.

**The next meeting was agreed of Wednesday 13<sup>th</sup> December at 10am**