

PPG Meeting Minutes

13th June 2024



Attendees: JW, SH, LJ, KS, WL, AB, MH, SN
Apologies: PS, GB

1. Ratify previous meeting's minutes/matters arising (all)

Previous minutes

- The minutes from March were ratified by the group and can now be uploaded to the website.
- It was agreed by the group that from now on the minutes could be ratified by email and uploaded to the website as soon as this has been done.

Matters arising

- Opening hours at Lodgeside have now been changed to close early on a Friday (5.30pm). This is now being considered for a Thursday to support safely staffing the practice.

2. Practice items (AB/MH)

JW meeting with Patient Navigators

JW (PPG Chair) met with some of our Patient Navigators which she found extremely interesting and noted the following points:

- It was a reminder that patients can be difficult and occasionally verbally aggressive to staff.
- There is a GP in the telephone hub every day between 8am and 11am to deal with any questions from the Patient Navigator team regarding signposting patients to the correct appointment/service.
- The staff JW spoke with overwhelmingly enjoy their job and feel well supported.
- Patients are generally happy to explain the reason for their call so that they can be signposted to the appropriate clinician/service.
- The team detect a slight shift in patients wanting to see/speak to clinicians other than a GP as they understand they are the most appropriate clinician to deal with their problem.

Patchs (online appointment/admin request system)

Patchs is open from 7am until 11am for patient requests, however, there is a limit to the number that can be submitted. The reason for this is so that we can process these efficiently and in a timely manner. If the Patchs system is not available, patients can phone the practice or speak to someone at the front desk with any requests.

Is there a message in Patchs to say we are at capacity (JW)? Yes, we have a message explaining capacity is full and when the service will re-open.

Following patient feedback Admin requests are open later in the afternoon. What time are the afternoon/evening Patchs open (LJ)? MH to check

Feedback for staff to read the Patchs request fully as a request for a reasonable adjustment was not made for one of the group.

'Nextdoor' thread re Fireclay

There has been a recent thread on 'Nextdoor' on which there has been some negative comments about Fireclay. This is unusual as normally positive comments! One patient mentioned they were 300th in the phone queue (having checked May call stats after the meeting, the highest number of patients in the queue at any one time has been 117, which was a very busy day!). Whilst having this discussion it was noted to the group that there is some new functionality in the phone system:

- Patients will now have the opportunity to request a call back whilst on hold and not just at the beginning of the call
- Patients can click on a link whilst on hold which will show a live update of where they are in the queue

Governance Bulletin

Having ready through our latest Governance Bulletin there were some questions from the group.

- What is Fireclay's process for a homicide review? After due diligence we will provide a copy of medical records to the police and safeguarding board as appropriate. There is then a case review. Internally we will have a review of the case at our clinical meeting and recently we have used as a case study for safeguarding training.
- How have you improved smear uptake? We received some one-off funding to improve our uptake for cervical screening. We used this funding in several ways:
 - To message patients who have not attended for their smear to ask the reason why. This provided some interesting responses which we followed up and used to help book patients in. For example, some patients were booked a telephone call with a Nurse prior to booking to explain the process and reassure the patient, or extra time was booked for nervous patients.
 - All non-attenders aged 25-39 were contacted, however this resulted in a small response.
 - A process was set up to enable a clinician to visit housebound patients and do the smear test at home.
 - We now have a newly qualified nurse who can carry out cervical screening so we have more capacity (it takes approx. 1 year to qualify)
 - Have you considered cultural reasons for non-attendance (KS)? We have previously used Caafi Health to contact patients where English is not their first language and this project was successful in booking some of these patients in.
 - Is it worth asking patients who have attended for the smear test whether there is anything we could have done better (SH)?
 - WL was very pleased to hear about our efforts to increase attendance for screening as this is a particular area of interest. We are also following up non-attenders for bowel screening to encourage them do this.
- How have you increased rates of MMR vaccination? We ran some searches to identify any MMR vaccinations that had not been recorded (coded) correctly or were missing completely. These were mainly for patients from other surgeries or who may have had them done abroad. Once these were identified we corrected the coding or requested information from the patient and then invited patients who had not had their MMR to give them the opportunity to book.
- What is MiDoS? MiDoS is a piece of software the patient navigators are using to help them signpost patients correctly. They can search for a symptom or condition and this then gives advice on whether an appointment is needed, who to book with or any advice for the patient.

Pharmacy First

This is a government initiative for patients to attend their local pharmacy for certain conditions. It is a great use of pharmacies as they are experts in medication! If they treat the patient, the GP will be notified and it will be recorded in the patient's medical record.

Community Pharmacies are changing and this service provision plugs the gap for them in terms of funding and also makes use of their expertise. We are incredibly lucky with the number of pharmacies in our area as there is a lot of choice.

GP Surgeries are notified by the Pharmacy if they have no more capacity to refer for Pharmacy First.

3. PPG items (JW/SH)

Healthwatch Update

Earwax removal services

JW had written a letter to Dr Geeta Iyer re provision for earwax removal in BNSSG. A polite reply was received!

Can we give a list of providers to patients? Southmead & Cossham do this. Agreed that we will dedicate a noticeboard at each site for posters and leaflets for local services. A disclaimer will be added that these are not our recommendations but may help as a starting point for patients.

Physician Associates (PAs)

This was discussed again at the Healthwatch meeting. JW was keen to explain how PA's are successfully used at Fireclay. The GMC are developing a framework for PA's.

PPGs

The results of a OneCare survey were discussed. Many practices do not want a PPG. We appreciate that we have such a supportive PPG.

Talking Therapies

SH is member of a sub-group of Healthwatch which has been set up to look at the services offered by Talking Therapies. GPs signpost patients to VitaHealth (a private company) who run the Talking Therapies service. They have had a meeting with representatives from VitaHealth who reported that they are providing the service they have been asked to provide. It seems that the ICB is only interested in the quantitative data and the number of patients they can get through the system. It is important that qualitative data is also collected to assess the effectiveness of the service. There is a service provision for low level anxiety/depression and for mental health in crisis but nothing in the middle. Private provision is limited and expensive. SH will continue to feedback on this project.

NAPP (National Association of Patient Participation)

We are currently a member of NAPP and paid annual membership in February. We are unlikely to renew this as not worth the subscription.

AOB

NHS App (WL)

When a patient registers with a new GP Practice, their online access does not follow and has to be set up again by the new practice and then only from the date of registration. This is quite frustrating. AB to follow up with WL if needed.

Proxy Access (LJ)

Do we limit online proxy access? Yes, it is currently limited to a proxy being given access to immunisations, allergies, appointment booking and ordering medication. If a patient requires further access then this is considered on a case by case basis via a phone call or email to the management team. AB to follow up with LJ.

4. Next meeting date

- Thursday 19th September 2024 @ 3pm