

PPG Meeting 20/9/2023

Minutes

In Attendance:

Rachel Kennouche – Business Manager

Clare Sampson – Operations Manager


Dr Andy O'Brien – Salaried GP

Mel Rivington – Care Coordinator

Clive Jones – PPG Chair

9 PPG Members

Minutes taken by: Leanne Manford

Agenda No.	Agenda Item	Action
1.	<p><u>Care Coordinator Role Update</u></p> <p> Care Co-Ordinator Role Update.docx</p> <p>Care Coordinator, Mel, shared a presentation on what her role involves, this includes helping patients who need assistance with navigating primary care, signposting to local services and signposting to carers services. Mel receives referrals from clinicians and members of the admin team. Once Mel engaged with a patient, she will make a follow-up telephone call to ascertain if there is anything additional, she is able to help with.</p> <p>Patients can self-refer to the Care Coordinator by contacting the practice, via telephone or on-line consultation.</p> <p>Across the PCN there are other care coordinators that Mel links up with, along with the Social Prescribing Link Worker.</p> <p>Mel discussed with the group the various training courses she has attended to enhance her knowledge and support patient needs better. She has training planned that will allow her to understand benefits available to patients and how they can apply. Helping patients who do not have access to the internet/smartphones (digital exclusion) is an area of focus for Mel's roles.</p> <p>Mel shared how she has helped patient's by referring to Alzheimer's society, Making Spaces, Healthbox, Social Services and our in-house Social Prescriber. Mel provides listening support on a regular basis for patients and has made home visits where appropriate.</p> <p>Mel updated the group to explain the Local Young Carers Service has just been taken over by Cheshire Young Carers. The practice currently does not have any patients who are identified as a young carer. Mel is pro-actively working with Clinicians in the Practice to identify young carers. She is also working with Cheshire Young Carers to try and establish if patient consent can be sought so they can pass on information to the GP of their carer status.</p>	

	<p>As part of her role Mel has devised a directory of local services, this was to support the admin team and clinicians signposting patients to voluntary sector organisations. The PPG asked if this document could be shared.</p> <ul style="list-style-type: none"> • <i>MR to circulate/share the directory of services.</i> 	MR
2.	<p><u>Practice Update – provided by Rachel and Clare</u></p> <p><i>GP Recruitment</i> The practice has recently appointed two new Salaried GPs – Dr Oliver Wright and Dr Dan Jones. The practice is currently well staffed, and the clinical team has expanded to include a wide range of clinical skill mix, these include musculoskeletal specialists, mental health practitioners, paramedic, and nurse associates. Primary care is expanding the range of services patients can access in Practices and across PCN's. By having these extra roles/skills for patients to access the GPs can consult with patients with complex medical conditions.</p> <p><i>Flu and Covid Autumn Vaccination Campaign</i> The practice has delivered its first flu and covid session, this received positive patient feedback. NHS changed the guidance at short notice to request all GP Practices start the campaign earlier than previously requested.</p> <p>Various clinics are now available for patients to book into, with the aim to have patients who wish to have the vaccinations completed by the end of October 2023. For patients who have not been able to attend the designated clinics, catch up appointments will be available. Patients have the choice to have the two injections together, separately or to only have one of the vaccines.</p> <p>Patients report how well the text messaging service works for booking flu/covid vaccinations and long-term condition appointments. However, there was a discussion about the length of time the link is valid for and a query regarding emailing information instead of texting, which was answered with an explanation that all GP practices tend to use text messaging to contact patients rather than emails.</p> <p><i>Practice Logo Results</i> The practice has been looking at new logo ideas, a steering group was set up which included members of both the admin and clinical team. It was narrowed down from 20 logos to 2 logos then circulated to all staff and the core PPG member to vote for their favourite. This has now taken place and RK revealed the winning logo.</p> <div data-bbox="304 1576 639 1906" data-label="Image"> </div> <p>Rebranding within the practice will now take place which will include new signage to incorporate the additional practice space that is now available. All signage will be</p>	

updated, and a re-numbering of the consulting rooms will take place to improve the flow throughout the building. The needs of patients e.g., dementia signage, will be taken into consideration when ordering the new signs. RK asked for the PPG core group to be involved with the process.

- **CS + KH to contact the PPG core group to arrange.**

CS + KH

Online Consult/Patches Transfer

CS explained Patches has been procured by NHS England for 5 years nationally for all GP Practices. This software allows patients to submit an online consultation for admin and clinical queries. Patients can access Patches via the NHS App or the website.

The Practice introduced Patches at the beginning of August 2023, to date the patient feedback has been particularly good. The new software also enables GPs to deal with the patient query at the time without having to have several contacts with the patient. The GP can also invite patients in for an appointment if required. Patient admin queries can be sent through Patches as well as clinical issues. Queries will be dealt with by the most appropriate person within the Team, this could be a GP, Clinical Pharmacist, Paramedic or Advanced Nurse Practitioner. Should the query be admin related a member of the admin team would action this request and respond directly to the patient.

The software has a built in “red flag system” so that patients are directed to hospital should they submit details that need to be seen in an emergency setting i.e. A+E. The practice will be made aware if a patient has been given this advice and continued to contact the practice.

From a patient’s perspective they will see very little difference in Patches to the previous Online Consult tool as it is accessed via the same routes and follows a very similar format. The main difference between Patches and Online Consult is the way in which the practice reviews, actions and responds to the online consultation request.

Responses are always within 2 working days, although if a routine appointment is needed, this will likely be booked outside of these 2 days.

The Practice and PPG Core members are currently promoting the NHS App. This allows patients to access a range of NHS services. The NHS App can be downloaded to a phone or tablet and for those patients who do not have a phone with this capability, they can also access the same services in a web browser by logging in through the NHS website. Once a patient has full access to the NHS App they will be able to –

- Order repeat prescriptions and nominate a pharmacy
- Book and manage appointments
- View their GP health record
- View their NHS Covid Pass
- Register their organ donation decision
- Choose how the NHS uses their data
- View their NHS number
- Use NHS 111 online

As part of the PPG core members manning the listening table, they are planning to

trial an introductory drop-in session to help patients to log in and use the NHS App to book appointments, order repeat prescriptions and view their medical records on-line.

General Practice Improvement Programme

The practice is involved in a programme run by NHS England which provides dedicated time with a facilitator to support Practices to identify where we can adjust our current processes to help us improve in the following areas –

- **Understanding and managing demand and capacity** – This focuses on how we can best utilise the capacity we have to meet the demands on our appointments.
- **Improve the telephony journey for patients** – We had already done a lot of work on our phone system, but we have an opportunity to review trends in call volumes and how we utilise our phone message.
- **Improve the online contact journey for patients** – This work links in with Patches (online consultation tool) and the work we are currently doing to improve our website and make it more user friendly.
- **Enhancing care navigation** – Ensuring that patients are booked in with or directed to the most appropriate clinician or service for their needs. As a practice we have already worked hard on our signposting skills, but this programme enables us to continue to review this and look for further ways we can improve.
- **Managing Practice workload** – This programme provides the time for us to meet with colleagues across the practice (admin and clinical) to review all of the non-patient facing workstreams that come into the practice (e.g. medical reports, registrations, prescriptions, medical records, clinical letter processing etc) to ascertain if there is a way we can manage these more efficiently.

As part of the programme, the Practice will also attend virtual group sessions with other practices across the country where ideas/best practice can be shared on services/processes.

Within the NHS things can change very rapidly and it is important to take the time away from the day to day running of the practice to review all our processes with a fresh outlook and perspective and ensure that we are working in the most efficient way. Due to the rapid changes within the NHS, we can often be still carrying out tasks that are no longer needed or there is a new simpler process that we can follow. Therefore the 'thinking time' this programme offers is invaluable.


The PPG group feedback their frustration with the length of the current telephone message. CS explained that there needs to be certain information provided in the message, so that patients are aware of the time that they can ring for different services, however, agreed that the message will be reviewed and shortened.


- **Contact Check Communications phone system) to ask if having the ring back option at the beginning of a call would be an option for patients.**
- **Link in with PPG Core Members for input into the phone message review project (who will role out to wider group).**

CS

CS

During the meeting one member of the PPG asked how many GP appointments we offer each week. CS advised that on average the practice offers around 400-500

	<p>GP appointments per week (this figure does not include the appointments we offer with our other clinicians). CS advised that we have previously published the Practice Statistics in the newsletter which shares data such as the number of appointments attended, number of medications issues, referrals raised and number of appointments booked online. This is due for publication again and will be included in the Autumn newsletter.</p> <p>Positive feedback received from PPG members regarding the ring back service. CS advised that the admin team encourage patients to utilise the ring back service as much as possible.</p>	
3.	<p>2023 GP Patient Survey Overview (Practice and PCN)</p> <p> 2023 GP Survey Overview.docx</p> <p>CS reported positive results with this year's GP Patient survey results. The results demonstrated improvements on the previous year against both the National and PCN averages. With regards to the number of patients who described their 'Overall experience of this GP Practice was good', we received the second highest result within our PCN at 81%.</p> <p>We are aware that the number of surveys sent out to our patient population was 337 which is only 2.6% of our overall patient population of circa 13,000 and the number of responses received was 122 (0.94% of our overall patient population). Therefore, this does need to be taken into consideration when analysing the survey results, however, as we compare the survey results year on year, we are able to track any improvements made or areas that still require further input/focus.</p> <p>CS advised that with % of patients who responded that they 'Find it easy to get through to this GP Practice by phone' has started to increase and RK explained that this is a positive reflection of the investment the GP Partners made in 2021 to install a new cloud-based phone system. It is now part of the GP contract for practices to be using a cloud-based system, so we were ahead of the curve in this regard.</p> <p>CS advised that the number of patients who find the receptionists at this practice helpful has also increased to 88%, which is greatly appreciated, and this is shared with the team.</p> <p>The national survey is only sent to patients once a year however as a practice we value all forms of feedback both positive and constructive, as this is vital for us to improve our services and patient satisfaction. Patient feedback is also a particularly important part of CQC, therefore as a PCN it has been decided to pull out 5 key questions from the national survey (see embedded document for details) and send out text messages to patients following appointments to ask these questions. This provides real-time results/feedback and the results have already demonstrated an increase on the national average results.</p> <p>The PCN patient survey will be published quarterly in our newsletter/via the website and it will be made available to the Core PPG members to share at their listening table. The PPG are open to feedback (positive or negative) at the listening table, and they shared that most patients come out of their appointment satisfied and</p>	

	report that it is the best practice in Chester.	
4.	<p>PPG Model/Aims of the Group</p> <p> PPG Model and Aims.docx</p> <p>The PPG Committee have come together to re-fresh and re-brand the group. Following support with Rachel and Clare the group have agreed to re-brand as “core members” rather than committee.</p> <p>The core group explained how they felt the committee was not communicating as well as it could have been with the wider PPG group, which is not how they wanted things to be. The Core Group want to be able to call on other PPG members to help with projects that they are interested in and have the skillset for. The group intend to communicate better and involve the wider PPG more regularly including the virtual PPG group. Moving forwards the minutes from the core group meetings will be circulated to the wider PPG members.</p> <p>The core members are leading on projects such as a Youth PPG group, reinvigorating the Practice Newsletter and PPG Noticeboard along with setting up a listening table. All these projects are to support engagement with a wide range of patients. Recently CS, Ops Manager, has linked the PPG project leads with the most appropriate admin team member so they have a direct means of contact so ideas can be shared.</p> <p>The PPG members at the meeting asked if the PPG meeting could be held bi-annually. CS explained that following the restrictions of the pandemic, the meetings have never got back up and running as beforehand however this is an area the Practice and Core Group are keen to support.</p> <p>The Core Group thanked the practice team for all the help that they provide.</p>	
Close	3.50	
Next meeting	March 2024 – date to be confirmed	