# PPG Meeting Minutes Thursday 7<sup>th</sup> November 2024

# In Attendance:

Rachel Kennouche (Business Manager) Clare Sampson (Ops Manager) Dr Trish McCully (Salaried GP) Mel Rivington (Care Coordinator) 3 Members of the PPG Core Group 4 Members of PPG

Minutes taken by: Leanne Manford (Secretary)

Agenda No.	Agenda Item	Action
	Welcome Chair welcomes attendees and shared appreciation to previous Chairperson, Clive Jones for all that he did for the PPG before recently stepping down from his position.	
1.	2023 Patient Survey Overview (Practice and PCN) CS displayed data on the National Patient Survey and shared how the practice are proud to have improved in several areas. The patient's responses have been reviewed and collated and compared to previous years. Areas for both admin and clinical have shown good results. Where the score has decreased (although only by a marginal amount) we will look into specific areas to see if any action can be taken. There was a 36% completion rate out of 723 surveys being sent out.	
	New areas have been introduced to the survey including digital aspects which will be covered later on in the digital update item of today's meeting. Part of the NHS plan is to look at digital access, whilst continuing to support those patients who do not have access to digital options.	
	The practice historically conducted an in-house patient survey but this was paused during the covid pandemic, we feel now it would be a good time to reinstate this in order to ask specific questions relating to our patient population. The PPG Core Group are looking at being involved in the running of this survey in early 2025.	
	This survey is not the only area in which the practice receives feedback. There are quarterly Healthwatch reports, Family and Friends test, Google reviews and patients can give feedback via Cheshire and Merseyside ICB.	
	The in-house patient survey will be promoted via the practice website, social media and within the practice. PPG members will actively promote and run the in-house survey within the practice, as they have in previous years. The Core Group are looking at creating a shorter in-house survey so that it is quick to complete and hopefully will get a larger response.	
	The Family and Friends test is a contractual aspect and averages a response rate of 90-94% each month. Patients are sent a text message following appointments or can fill out a form in practice. These responses are looked at for trends and a 'you did we said' exercise is performed and activity is shared within the practice newsletter and on social media.	

Patients telephone numbers are one of the admin team's objectives with a target to gain 90% of mobile numbers by the end of the financial year. When patients turn 16 the practice will obtain a mobile phone number for the patient, as the practice will no longer be communicating with their parents but will contact the patient directly. Currently the practice has 83% of mobile numbers recorded and 69% of email addresses recorded. If a patient advises they do not have a mobile number this is coded on their records so that they are not asked again and so that they can be included in the target figures. The practice doesn't currently code when a patient does not have an email address but this may be something that is looked at in the future.

We are pleased to share that we are at the top end of the PCN and ICB figures for the National Survey, with 88% of patients saying that their overall experieice of the GP practice was good. Nationally and locally we are above the average.

# 2. Practice Update

#### Vacination Campaigns

The majority of the practice focus is now on the winter pressures period, dealing with vaccination campaigns and viral/respiratory acute illnesses as the winter approaches.

The RSV (Respiratory Syncytical Virus) vaccine is now offered to patients aged 75-79 and those who turn 75 from 1<sup>st</sup> September 2024. It has been a popular and successful campaign to date with 134 vaccinations being given, with a further 163 booked in. There was slight pause for these in October due to flu/covid campaign but they have now picked up again.

The Flu and Covid clinics are now well under way and CS thanked the PPG members who helped with queue management and inputting data.

These vaccines are offered to patients aged 65+ and those 18-16 with an underlying health condition. It has been a successful campaign so far with 1,540 covid vaccines and 1,721 flu vaccines administered.

## Staffing

Dr Jones, Senior Partner has recently retired after working at the practice since 1997.

Sr Sarah Smith has also retired after being at the practice for many years.

Ricky Harrison, Paramedic has relocated and moved out of the area so a recruitment campaign to replace Ricky is underway.

Sam Regan, Clinical Pharmacist is also due to leave the practice soon to go travelling.

Dr Khan and a member of the admin tean are currently on maternity leave.

We have a new Clinical Pharmacist starting on the 11<sup>th</sup> November 2024 and Dr Hannah Bates, Salaried GP has recently joined the practice.

We have recruitment campaigns out for Nurse Associate/Practice Nurse, Admin Apprentice and an Advanced Nurse Practitioner to replace Sr Sarah Smith and a Paramedic to replace Ricky Harrison.

GP Trainees will be joining the practice from December 2024 and are qualified doctors who are training to become GP's. The practice has had to go through an approval process to be a training practice.

The Practice also supports medical students, nurse students and pharmacy students so there are several trainees/students within the practice at different times.

## 3. Digital Update

Digital drop-in sessions at the Practice are being provided to try and support patients in accessing the NHS App. The benefits of this service include the ability to book appointments and order prescriptions. The PPG listening table had identified issues where patients needed support in this area.

Ten drop-in sessions have been held so far, with all 66 patients who attended now being able to use the NHS App and Patchs. As the sessions are 'drop-in' patients do not need to book.

One of the requirements to have the NHS App is to have an email address and mobile phone number registered on the patient records. An email and text message will be sent to confirm patients identity. This has been one problem area as patients details did not always match up with the details on their medical records. The practice Care Coordinator also provides support in this area by updating patient's medial records.

One home session for a housebound patient was arranged and carried out by a member of the PPG (consent received and DBS checked) as the patient was unable to attend the drop-in session. Positive feedback received from the patient.

Patients are asked to complete a feedback form following the drop-in session and the feedback has been very positive.

Whilst patients are at the session they are also shown how to use Patchs. Patchs is an online consutation service. Between April and October 2024 the practice has received and actioned 888 online consultations via Patchs (these include admin and clinical queries). This is an increase of 329% compared to the same time period last year.

CS explained how feedback is sent to the online service which will hopefully make the system smoother. Members of the practice team can also submit requests for any changes they feel necessary.

Travel questionnaires and sick note requests can now be sent via Patchs which ensures that the clinician has all the information that they require.

A translation service is now embedded into Patchs so that a patient can submit a request in their own language which will translate for the practice. This will hopefully help eliviate communication difficulties over the phone.

It is a contractual requirement to provide online consultations and Patchs has been procured by NHS England for GP Practices to use. GPs have tick boxes to answer when completing the Patchs which will help the AI within the system to learn what are appropriate questions and how to direct patients. 79% of patients within the practice have used the NHS app for at least one service.

By providing patients with the option of online services, it releases capacity on the telephone lines and at the reception desk to support those patients who cannot use the digital tools available.

The NHS App is available on computers, laptops and tablets as well as on a smart phone.

A member of the Core Group commented on how many patients are putting in paper prescription requests. Suggested putting sign on box to advise patients that they can request prescription on the NHS app.

 Ops Manager to promote use of NHS App/ordering of repeat prescritions via the app on the prescriptions box CS

# 4. PPG Core Group Update

The PPG Core Group is made up of 6 members and they have individual areas which they manage. Members of the Core Group discussed these areas.

#### Listening Table

The listening table is held every 3 months on a Monday morning between 9 and 11am. Promote NHS App, Family and Friends Test and can listen to any other concerns that patients may have that are not clinical. The aim is to be representatives of patients and take issues forward to the practice.

When patients come into the practice they are handed a piece of paper, explaining what the listening table is and who is on duty that day. They ask patients to think if they have anything that they wish to speak about, and have found this has a bigger uptake than trying to grab people as they walk past.

#### **Practice Newsletter**

The group asked what sort of things patients would like to see in the practice newsletter that they are not seeing. The newsletter was historically circulated via email but this does not happen anymore as the practice website was upgraded and this facility is no longer available. Work is taking place to try and reinstate this option. Currently patients can access the newsletter from the practice website or in person at reception. Discussed how newsletter can be emailed to the Virtual PPG group.

It was decided that a section on ordering prescriptions online and GP trainees will be included in the newsletter

- Update social media to advise when and how the newsletter is available
- Add section onto the Winter newsletter to promote requesting prescriptions online
- Write section on GP Trainees to be included in newsletter
- When available email newsletter to PPG email, to be circulated

RK suggested including the organisational structure as the workforce has significantly developed. There are now various different roles within General Practice which patients might not be aware of.

## Email group (previously known as the Virtual PPG)

For some years there has been a PPG email group, which currently has 50 members. It was set up so that patients could share comments on the practice

MR MR/KH

TMc MR however it has not been successful in this way and is mainly just used for communicating information such as the PPG meeting invitations. TMc suggests sending regular reminder emails to promote the email group. This is already done but has not had much response.

Patients can only be added to the email group if they ask to join. Patients have not shown interest in joining the group when it has been promoted via the listening table.

Patients can send emails to the Boughton PPG email and the message can then be sent out anonymously so that patients email and name are not shared with the whole group. TMc suggests having forum within practice website where these comments could be made. In summary email group is useful but could be used a bit more.

#### **Digital Access**

The next drop in session is Thursday 14<sup>th</sup> November between 2pm and 4pm and the practice is looking at running a session monthly going forward. Quite a lot of people who come to sessions have been given handout by GP/clinician.

#### Leaflets and information sheets

Core Group provide feedback and suggestions to practice.

# Signage and Notice Boards

The practice has recently improved signage within the practice and patient feedback has been positive on the whole, however there is some patient confusion about how to access the yellow zone. Patients often sit in the main waiting area instead of the waiting area in the yellow zone and clinicians are having to walk through to find their patient.

CS shares how a sign has been put up above the check in screen to help with this but she will re-visit to try and mitigate this further.

- Further look at signage and its effectiveness for the yellow zone, consult with patients for suggestions/feedback.
- Review and improve the signage for Room 11

CS reported how external signage is also going to be updated with the new logo.

PPG Noticeboard – PPG member is leading on this area has buddied up with a contact within the practice. The board has been cleared and it will be built back up again in a more readable format.

A member of the PPG report that the contents of the messages on the television screen have improved.

#### In-House Patient Survey

PPG Core group are looking to specify what questions are to be included in the inhouse survey which are pertinent and specific to the patients attending this practice. The PPG Core Group explained that questions do not need to be asked on areas that the practice is already aware of or are working on. Chariman asks the group to feedback any questions that they think will be relevant. One member suggested the environment within the practice.

General discussion about the phone message, this has now been shortened however there is important information that needs to be included on the message.

CS

CS

**PPG** 

Member suggested putting the information about the callback system at the very beginning of the message – **Ops Manager to exlore this option**.

The group also discussed how to get the survey out to a large number of patients. Comments about how those not attending the practice very often will not have feedback. For these patients we could ask what services they think would be useful – we could promote services that we have or provide information on services that we can direct patients to.

The Practice can look at group sessions/consultations/support groups to provide education/advice on certain health conditions/services. These would not be for patients to discuss their own personal specific problems/conditions.

Have thought about setting up a walking group but this could provide issues with insurance. RK shared how other practices do this and how Louise Gough, Social Prescriber has a walking group.

## **Vaccination Clinics**

The PPG Core Group work with the practice by volunteering to help with the flow of the clinics, especially on Saturday clinics. It is very beneficial for the Core Group, as when patients are waiting this gives them the time to talk to patients and promote the role of the PPG. During vaccination clinics patients are not attending because they are unwell, so they may be more receptive to have conversations.

CS thanked the PPG as we could not do a lot of the work that we do without your help. It is lovely when receive positive feedback but constructive feedback is very important so that we can look into this and try to make improvements.

CS encourages PPG group that they can feed in and get involved with Core Group if there are any areas they are interested in.

## 5. Open Forum

A member shares how she thinks were are very lucky to be registered at Boughton Health Centre.

Chairman shared his feeling that the annual PPG is poorly attended due to the difficulty in inviting patients to the meetings or raising their awareness that the meeting is taking place. Chariman would like to invite all patients by text message but this is not feasible. General discission and idea sharing - member suggests utilising Facebook. The Practice has a facebook page but the PPG currently doesn't. Chairman shared how previously they have, however patients tended to use as a way to pass on complaints so he felt this was a difficult area to manage.

Close 15.35