



MEETING: Patient Participation Group
DATE: Wednesday 11 September 2024
TIME: 6.30pm
VENUE: Meeting Room, Mayford House Surgery

RECORD OF MINUTES

Persons Present

Nicola Tallentire (Practice Manager) **NT**
Josh Parker-List (Assistant Practice Manager) **JPL**
Dr Ailsa Mitford (General Practitioner & Practice Partner) **AM**
Lisa Pickering (Management & IT Support) **LP**
Five substantive members of the PPG were also present.

Para. No.		Action Owner
<u>1</u>	<u>Welcome and Introductions</u>	
1.1	The Chair welcomed everyone present to the meeting. The member of Practice staff responsible for Management & IT Support (LP) was introduced to the PPG, and full introductions were conducted around the table.	
<u>2</u>	<u>Apologies for Absence</u>	
2.1	No additional apologies for absence had been received.	

<p><u>3</u></p> <p>3.1</p> <p>3.2</p> <p><u>4</u></p> <p>4.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> <p>4.6</p> <p>4.7</p> <p>4.8</p>	<p><u>Minutes of previous meeting dated Tuesday 25 June 2024</u></p> <p>These had previously been circulated.</p> <p>The minutes were agreed as a true record of the meeting.</p> <p><u>Matters Arising from previous meeting.</u></p> <p><u>Minute 4.13 – Practice Mission Statement</u></p> <p>Work on the Mission Statement is ongoing and will be circulated as soon as it is completed. Ongoing</p> <p><u>Minute 4.19 - Reception Noticeboards</u></p> <p>The PPG noticeboard is currently displayed on the wall to the right of the reception desk. This is within the small, secluded footprint that is masked from the waiting area by the privacy screen.</p> <p>It was felt this was perhaps not the best place to achieve the greatest exposure, as most patients and visitors would not be remaining in this area for any length of time. They would also be more focused upon their interaction with reception staff than with contemplating any information material on the wall to their right.</p> <p>ACTION: A new location within the waiting area will now be identified.</p> <p>In respect of the noticeboard content, a PPG member had submitted some suggestions via email and these were displayed for the meeting to peruse. They will also be circulated to the remainder of the group after the meeting for greater consideration.</p> <p>In summary, the suggestions were:</p> <ul style="list-style-type: none"> • A clear, banner style title for the board to identify the subject matter; • An introductory summary covering ‘Who We Are’; • A list of aims beneath ‘Our Goals’; • A brief summary of ‘Recent Achievements’; • An advice section of how to ‘Contact Us’. <p>Discussion took place on this and various other suggested content.</p> <p>In respect of the suggested means of contacting the PPG, it was felt the options should remain broad in order to remain accessible to all, and to include a possible QR code, a dedicated email address, a webform and even a simple slip of paper that can be handed in the reception.</p>	<p>NT</p> <p>JPL/LP</p>
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<p>4.9</p> <p>4.10</p> <p>4.11</p> <p>4.12</p> <p>4.13</p> <p>4.14</p> <p>4.15</p> <p>4.16</p> <p>4.17</p> <p>4.18</p> <p>4.19</p> <p>4.20</p>	<p>Similar information to that which will be displayed on the noticeboard is also readily available on the Practice website, including a webform, so the presence of the board will serve to extend the reach to those who may not be as comfortable with computers.</p> <p>LP advised that she was happy to respond with acknowledgements of receipt and updates to any correspondence received via the dedicated email address.</p> <p>Opinion was expressed that the achievements content on the board should be time-limited and updated at periodic intervals to remain current. This periodic review could be picked up at each PPG meeting.</p> <p>A PPG member had already devised a brand identity logo for the PPG which would be suitable for both the board and the website, and this was very well received.</p> <p>The Practice website application form to join ‘the PPG’ would now be amended to refer to joining ‘the Virtual PPG’, and would also require the standard three ID checks – name, address and date of birth – as part of the application process.</p> <p>Progress will now be made with relocating the board itself and starting to populate content.</p> <p>ACTION: Two identified, substantive members of the PPG will liaise with each other to progress the desired content and structure.</p> <p>ACTION: In the meantime, PPG members were asked to submit their views for consideration following receipt of the email referred to in 4.5, above.</p> <p><u>Minute 4.27 – Virtual PPG</u></p> <p>LP had previously circulated the requested email to existing Virtual PPG members, on the understanding that no reply meant they no longer wished to participate.</p> <p>Twenty-nine (29) patients had expressed a wish to continue their participation.</p> <p>These will all now be incorporated again and they will receive a copy of the PPG minutes once they have been formally adopted at the next quarterly meeting.</p> <p>ACTION: The minutes of the June 2024 meeting can now be circulated to members of the Virtual PPG.</p>	<p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p>Chair</p> <p></p> <p>PPG</p> <p></p> <p></p> <p></p> <p></p> <p>LP</p>
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<p>5.9</p> <p>5.10</p> <p>5.11</p> <p>5.12</p> <p>5.13</p> <p>5.14</p> <p>5.15</p> <p>5.16</p> <p>5.17</p> <p>5.18</p> <p>5.19</p>	<p>This action is intended to ensure services are maintained and patients are kept safe, but continuing to carry out unfunded work cannot be sustained.</p> <p>Meetings are ongoing region-wide to work through the implications.</p> <p><u>Surveys</u></p> <p>LP gave an overview of survey findings from the 2024 GP Patient national survey and the ongoing (in-house) Family and Friends feedback.</p> <p>The national survey provided a significant amount of feedback material which has been useful to evaluate and discuss change where necessary.</p> <p>The GP Patient survey is run by IPSOS on behalf of NHS England. The survey is circulated to over two million patients registered with a GP (3% of the overall national total). It is sent out on an annual basis every January, and this year responses were due to be returned by 19 March.</p> <p>All areas for Mayford House showed improvements year on year with only a single exception – ‘Helpfulness of reception and administrative team’.</p> <p>However, some mitigating features in this area surround the fact the new digital telephone system was not fully rolled out at the time of the survey being circulated, and staffing levels and rotas on reception have been improved since the turn of the year to better manage demand.</p> <p>Both of these enhancements are, however, positively reflected in the separate Family and Friends feedback which is more current, and is also updated monthly.</p> <p>Nevertheless, Mayford House still scored higher than the national average in this contentious area (<i>‘Helpfulness of reception and administrative team’</i>), which is still seen to be suffering from a widespread, post-Covid reaction to changes in all practices’ processes.</p> <p>In respect of the entire national survey, Mayford House was still higher than the national average for practices in ALL surveyed areas, and in some of these areas was <u>significantly</u> higher than the national average (very high 90s as opposed to mid-80s).</p> <p>Following assessment of some of the resulting themes, LP suggested that she could hold some IT clinics to assist patients who may struggle with accessing the Practice website, as ease of contact by this means scored only 54%, and greater knowledge could easily serve to improve the overall patient experience.</p>	
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<p>5.20</p> <p>5.21</p> <p>5.22</p> <p>5.23</p> <p>5.24</p>	<p>In respect of the in-house Family and Friends feedback, this is circulated by text message to patients after they have had an appointment (telephone or in-person).</p> <p>In August 2024, 364 of the 447 patients surveyed rated their experience as Very Good.</p> <p>Results acquired in August 2024 continued the trend of June and July 2024, and these proved to be very encouraging.</p> <p>Where specific complaints are referred to in surveys, these cannot be individually addressed as the surveys are completely anonymous, however the themes raised are always reviewed and addressed as a matter of urgency.</p> <p>A Mayford House staff survey is also due to be circulated the day after this current PPG meeting.</p>	
<p><u>6</u></p>	<p><u>Any Other Business</u></p>	
<p>6.1</p>	<p><u>Social Prescriber</u></p>	
	<p>NT advised that only one Social Prescriber was now operating within the Practice.</p>	
<p>6.2</p>	<p>This was a government funded post along with two other allied roles - Mental Health Practitioner and First Contact Physiotherapist Practitioner.</p>	
<p>6.3</p>	<p>The Social Prescriber is intended to support patients who may be vulnerable or lonely, carers or cared for, or those who may make regular GP visits for non-medical problems. They also assist by signposting patients who may have problems filling in forms or who require access to other useful resources, such as Citizens Advice Bureau.</p>	
<p>6.4</p>	<p>They will also follow-up on such patient contacts to ensure satisfactory progress.</p>	
<p>6.5</p>	<p><u>Dementia-Friendly Café</u></p> <p>NT asked the PPG, on behalf of Practice Social Prescriber, for some advice regarding whether it felt a regular dementia-friendly café event or group is needed in Northallerton.</p>	
<p>6.6</p>	<p>This generated some discussion amongst well-informed people around the table and, whilst fully in support, it was established that Northallerton already possesses some similar forums, such as a monthly breakfast at the Fire Station for carers and cared-for, and a</p>	

	dementia-friendly group that meets at The Living Room in the Garthway Arcade, off the High Street.	
6.7	The Darlington and Stockton Times was suggested as another helpful resource, as its 'Towns and Villages' section regularly advertises similar events taking place locally.	
6.8	Some suitable locations for a café-style meeting in Northallerton were also suggested as potential options.	
6.9	ACTION: The views and suggestions of the PPG would be fed back to the Social Prescriber.	NT
6.10	<u>South Tees Hospitals meeting</u> A member of the PPG was due to attend an upcoming meeting and asked for any topics that were suitable for raising.	
6.11	Following on from underlying issues outlined within 'Collective Action' at minute 5.5 above, it was suggested that the hospitals are urged to fulfil their clinical obligations to patients without instead directing them back to GP practices for them to conduct follow-up work that should remain within the hospitals' remit.	
6.12	For example, sick notes after surgery should be provided by the specialist surgeon, and not the GP practice who will have no knowledge of, or responsibility for, the patients' follow up care.	
6.13	They should also cease issuing incorrect advice and guidance to patients concerning who has responsibility to support and follow-up with the patient after hospital involvement.	
6.14	This invariably has an adverse effect on the patients' welfare and can be very confusing and frustrating.	
6.15	<u>Child-friendly Facilities in Practice</u> It was raised that there are currently no child-friendly facilities, such as toys or other such simple entertainment within the surgery waiting room.	
6.16	Fully aware that these were removed during the pandemic in pursuit of better infection control, it was hoped that something could be reinstated to distract small children who can quickly become bored and restless.	
6.17	LP stated the national guidance is that these should not be reinstated for reasons of best practice in respect of infection control, especially as they would also need regular sanitising and maintenance throughout each day, something which would be beyond the capacity of the Practice cleaning staff.	

<p>6.18</p> <p>6.19</p> <p>6.20</p> <p>6.21</p> <p>6.22</p> <p>6.23</p> <p>6.24</p> <p>6.25</p> <p><u>7</u></p> <p>7.1</p>	<p>It was suggested that adults could still bring toys in with them for children to play with whilst waiting, but any other suggestions are actively sought.</p> <p>Action: PPG members to consider this matter and submit any suggestions to LP.</p> <p><u>New applicant for the PPG</u></p> <p>JPL advised that he had received an application from a patient to join the PPG.</p> <p>In light of the history of the Virtual PPG, it was discussed that to accept the application would be unfair to the previous 80+ applicants in 2021 and the current 29 Virtual PPG members, all of whom were informed that they were unable to be accommodated in person due to the weight of applicant numbers.</p> <p>This huge response had directly led to the creation of the Virtual PPG, which now acts as a second tier of patient engagement and communication.</p> <p>After 2021’s experience, we had tried to then target existing applicants in order to better spread the representation of age groups, gender, ethnicity and accessibility within the PPG, but this was fraught with issues, not least confidentiality, and had elicited few successes.</p> <p>It is considered to be a very delicate dilemma, as a willing volunteer is always considered to be priceless, but 80+ and 29 remain unmanageable numbers to attend meetings in person.</p> <p>It was therefore suggested we should continue to undertake legally and morally acceptable forms of targeted recruitment in the future in order to maximise the breadth of representation.</p> <p><u>Date and Time of Next Meeting</u></p> <p>Wednesday 11 December 2024 at 6.30pm.</p> <p>There being no other business, the meeting was concluded at 8.20pm.</p>	<p>PPG</p>
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