

Musters Medical Practice Patient Participation Group (PPG)

Meeting Minutes 13th June 2023

Next meeting 8th August 2023 6pm-7.30pm at the Practice upstairs meeting room

Attendees: Paul Midgley (PM, Chair), Mike Prior (MP), Louise Duffield (LD), Soraya Radjabi (SR), Sharon Ding (SD), Paula Maling (PaMa), Nicky Grant (NG), Jane Morris (JM), Dr Gavin Derbyshire (GD); Emma Strzelec (ES), Trish Gibbons (PT)

Apologies: Claire Daniels, Janet Johnson, Tom Wedgwood, Karen Veness, Kay England, Christine Jones, Roy South, Leanne Hennessey, John Burnett

Welcome and round of introductions – all.

Particular welcome to ES as this was her first PPG meeting ahead of her taking on the new PM role on 19th June. ES is relatively new into NHS practice management, currently working in Sherwood, previous experience in accountancy, HR and finance. PG is a part time PM and has a Local Medical Committee role, through which she has been asked to support the practice during transition to having a full time PM. Including recruitment support. PG will support ES's induction period too.

No conflicts declared against tonight's agenda items.

Minutes of last meeting confirmed as a true record. See copy below



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Actions from previous meeting:

All actions reviewed. The following outstanding actions were discussed:

- Phone menu message options/receptionists offering information about alternatives to GP, nurse and HCA appointments (e.g. with ARRS roles) – not yet actioned – ES to take on
- SystemOne training – additional NHIS support scheduled wc 19th June. NG offer to support also welcomed, ES will arrange to meet to agree what is required.

Practice update: GD

1. New Practice Management Structure and Practice Manager

PG and the GP partners have been working with CJ to look at how we run Musters from a Practice Manager perspective and how we could perhaps do things differently. Decision made to appoint full time practice manager (CJ has always been part time). Interviews held in April.

Delighted to welcome ES who was appointed following a thorough process which included questions about how to work effectively with the PPG. ES starts 19th June. PG will continue to work with both

CJ and ES as we transition to a new phase for Musters. Having a full time practice manager will fill a gap in terms of management focus.

2. New Salaried GP

Dr Jess Hall started as a salaried GP at Musters from 17th April doing four sessions a week on Mondays and Tuesdays. She was previously at Belvoir Health Group and comes highly recommended by their PPG.

3. New SystmOne support tool for receptionists

Dot recall uses AI to advise the reception team on the complexity of a patient's clinical history which enables via a different coloured system of dots to suggest different appointment lengths to ensure optimal support can be offered rather than everyone getting a standard appointment length. NG used this (in fact, Village Health Group developed this system) so is keen to assist its adoption.

MP welcomed this as he has complex needs and has found it hard recently to get appointments and had to resort to contacting CJ directly to schedule a doctor review. PG stated that individuals can be flagged using the Dot recall on the system to ensure their complex needs are recognised and appointments booked accordingly. GD said there are several new receptionists, and some experienced ones are struggling somewhat with the new system.

A good reason to ask NG to support the team, which ES/PG welcomed.

ACTION: ES set up NG meeting

4. Patient Call system/TV Screen

Good news! PartnersHealth/Rushcliffe PCN have agreed to replace the TV/call system. Watch this space – should be installed soon. GD welcomes this very much.

5. New Physician Associate and Practice Pharmacist starting

Our new Practice Pharmacist, Eliya, starts on 26th June. She is a trained prescriber too. Eliya works two days a week for Musters.

A second Physician Associate, Edena, starts shortly initially working as a Health Care Assistant (HCA) until her training is complete at end of the Summer. This is a 4 days a week role. Bryony, our existing PA, has made a real impact and it is hoped having Edena will further boost options for patients requiring appointments. PAs can do most things that a GP can do except prescribe drugs and request investigations involving ionising radiation (e.g. X-rays, MRI).

The First Contact Physiotherapy will operate in the extended hours service for MMP patients to be booked into.

6. CQC remote monitoring visit

After a long gap, CQC will do a virtual validation call with ES, staff and GPs on 12th July. One of the themes is patient participation. ES will send round a survey to the PPG to get our feedback. PPG welcomed this as a starting point for a new, closer relationship between PPG and the Musters leadership.

7. Reflections on the PPG, potential future support

PG reflected that the PPG is one of the most active she has come across, and will help ES, including with the SystmOne familiarisation/optimisation. And Care Navigation too (e.g. using patient messaging systems as an alternative to phoning in).

GD mentioned patients also require support/education to not always ask for GP when not the best person. Wants everyone working to the 'top of their license' so GPs aren't doing admin jobs, etc. Patients often reluctant to share with admin team over phone what they want an appointment for. And staff are reluctant to enquire too.

JM suggested using NHS App online messaging is a great way to gather more info as patient completes a few screening questions first so practice knows how best to respond to/direct their query. JM has access to several Notts practices who have implemented patient messaging and far from swamping the practice with 'another lane on the motorway', it has supported managing workloads and smoothed out the 8am phones rush and reduce staff and patient stress.

ACTION: JM and ES/PG to discuss.

MP mentioned previous PPG role encouraging completion and collating Friends and Family Test (FFT) feedback forms from patients was always useful to keep live feedback on patients' perceptions of the service. Should this be re-started? ES agreed – FFT was suspended during Covid but has been restarted so we do need a system to collect it again. PPG involvement would be welcomed. JM suggested could use NHS App to support FFT feedback. ES: CQC will ask about how practise collects feedback, so will have to say we are planning to involve PPG once again as won't have re-started before 12th July review.

ACTION: ES, JM and MP discuss how best to collect FFT moving forward

8. Optimising patient use of online services (including via NHS App)

JM suggested that many of the points discussed could be supported by optimising use of the functions built into the Notts NHS App. GD said there are plans to roll this out in a structured way. Starting with sicknotes and repeat prescriptions. PG said experience has been variable in different practices.

ACTION: ES, PG JM liaise to look into opportunities to be early adopters of NHS App functionality to address issues identified (and to link to practices who have already adopted these and can advise on how to make the transition smoother.)

Focus Topic: amend Terms of Reference

Given the changes to management, the PPG agreed to delay this topic till the October meeting to allow ES to get to know the practice and PPG better. In the meantime, see below an amended draft which addresses some of the NHS changes since last ToR were agreed.



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ACTION: ALL Please review and give any comments before the next PPG meeting.

Comms update

Reminder: Rushcliffe PCN's patient facing website has been developed to act as a hub for all local health and care information [HOME | RushcliffeHealth](#) including a comprehensive directory of local services, many are free of charge. This is maintained by the Social Prescribing team.

Facebook

MMP page has had 500 views in last fortnight. It has 78 followers. Dementia action week and Carers posts both got around 300 views each. LH is a great resource for FB topics as social prescribing team are very active posters. LD keen that the practice post directly onto FB so any point in time broadcasts can be made directly rather than messaging LD who then uploads as currently – will avoid delays, and is part of the comms channels strategy.

ACTION ES to discuss handover with LD

Comms Sub-Group

LH, PM and LD met last week re: next newsletter. Topics:

- prescription ordering comms campaign
- staffing changes/focus on new people including ES and new receptionists
- keen to get ES input into any other key topics to cover – **ACTION LD and ES to discuss**
- Timing – mid Summer once ES in post – **ACTION LD by end August**

LH: Self care – the Social Prescribers notice board in the practice has information AND we need the Practice website to signpost people to the new PCN website which has lots of resources there. Her colleague Nick Marlow cover Castle practice. Together, with the 2 PPGs, LH and NM would like to discuss optimising patient education for self care. Can we use the space at the rear of the practice to develop a patient resource centre? Radcliffe have one, works well. PPG get involved too. Sherie Belfitt, PPG chair at Castle, is very much in favour of developing a joint resource. SB joined us at the Comms subgroup.

ACTION: ES to meet with Castle Business manager to discuss possibility of developing an Embankment Patient resource centre to support patient selfcare/health engagement

Foodbanks – the Spring newsletter highlighted the location of food banks, and this is also available on the Social Prescribers noticeboard, and PCN website, so we need a link for the Practice website too.

ACTION: ES put information about Self Care and Food Banks on Musters website and links to the PCN website resources.

NHS App – helping the digitally excluded to access it

The NHS App/digital support drop-in session on 16th March was massively oversubscribed. Feedback from attendees was really positive. There is a big demand for such a service, so a similar Musters-focused sessions, via a booked appointment plot, is now offered.

ACTION: ES to liaise with Kai Pitman/jacqueline.kendrick@nhs.net to arrange for Musters session

PCN update

PM: RAPID group discussed what PPGs need to thrive. All PPGs fed back on their successes and needs. An action plan will be developed to support each PPG, and common themes identified to develop a RAPID support programme.

Dementia Friendly Rushcliffe

A 2 year project led by social prescriber Gwynneth Owen and Dr Jill Langridge aims to make Rushcliffe a dementia friendly borough. Not just the NHS. But all practices are undergoing dementia friendly training. GD confirmed all MM staff went to a recent training event. All practices also need to do an audit of their building to check for dementia-friendliness. There is online dementia friends training too.

MP asked if staff are aware when a patient calls if they may have dementia and to make allowances? ES confirmed the Dot recall system flags diagnosed dementia patients on the screen.

ACTION: ES to contact Gwynneth Owen to set up a 'walk through' and a specific follow up staff session on dementia friendly MMP (maybe as part of a QPDM) – invite PPG members too

Future items:

- Agree what support ES would like from the PPG – August meeting
- Terms of Reference review – October.
- Invite Bryony and Elena to talk through their PA role – December (and AGM)

ACTIONS ARISING

ES to add message to phone AND website about availability of appointments with the Physician Associate (PA), pharmacist, physio and social prescribers

ES/PG: invite NG into practice to discuss use of SystmOne to address appointment-making issues raised, and difficulties they are experiencing.

ES: put information about Self Care and Food Banks on Musters website and link to PCN website

ES/Kai Pitman: liaise to arrange for Musters patients-specific NHS App session

LD/ES liaise re: FB and newsletter

JM/ES/PG: liaise re optimising NHS App for care navigation, messaging, tirage etc

ES: send questionnaire to PPG ahead of CQC review call

ES/JM/MP discuss FFT re-boot post CQC discussions

ES: contact Gwynneth Owen re Dementia friendly practice walk round and QPDM session

ES to meet with Castle Business manager (Lisa Sullivan). Social prescribers and PPG chairs to discuss possibility of developing an Embankment Patient resource centre to support patient selfcare/health engagement

ALL: review draft terms of reference and feedback suggestions to PM before next meeting