

PATIENT REPRESENTATIVE MEETING

$\underline{24^{TH}\ JULY-2PM}$

MINUTES

Staff Dr Paul Skinner (chair)	Ann Hall (Practice Manager)	Agnieszka (Asst Practice Manager)
Patients:	JB	MC
MD	NF	CH
SJ	NT	JT
IM	Т7	MW

1. Review Actions from Previous Meeting

ACTION	STATUS
AD to investigate training video links for Patchs	Reception now send a link with short video regarding use of Patchs. The Social Prescribers are also planning some drop in training sessions
Consider Newsletter Templates	Template given to the discuss with the group
PPG Group to consider what they would like to be included in a Newsletter	Feedback from group included in minutes below
Continue to advertise and promote the PPG in order to make it more representative	All new patients are asked if they would like to join the group. We have posters in the reception area and information on the website

2. Staff Update

New GP – finalising on-boarding with a plan to start on 6th September.

Details will be added to the website once she has started at WKS. She is a very experienced local GP with over 20 years' experience.



3. Additional Roles (ARRS)

As part of our work with our Primary Care Network (PCN) we now have 2 Paramedics working within West Kensington Surgery. Sarah is an experienced Primary Care Paramedic and Amy has recently started Primary Care Paramedic Training but has extensive experience as an Ambulance Paramedic. Both Sarah and Amy will be doing Home Visits across all 5 surgeries within the PCN. The paramedics will do both emergency and planned home visits. Patients who are unable to attend the surgery should request a home visit in the same way and the GP will decide on the best next steps.

4. Improved Triage System

The group were asked for views and experiences of the total triage system. They felt it was dependent on what information is put into the system by the patient. Overall it was felt the system works well but odd occasions where the system has not worked. The question was asked "why can't I submit patchs outside working hours". Dr Skinner explained there had been problems with inappropriate and multiple late night submissions possibly related to drink! Also the concern that if a submission comes in when the practice is not open an emergency might be missed as not viewed until the next day.

Patients will be asked wherever possible to complete an online Patchs form with as much detail as possible so that the clinical team can review to decide on the best next steps. This may be a telephone call, text message, request for more information, request for blood or other tests, face-to-face



appointment with a GP or another member of the clinical team. Where a patient has no online access they are now able to use Patchs Telephone Assist by calling the main reception number and selecting Option 2. Elderly and vulnerable patients are still able to call the reception team and will be asked for some information which will then be added to the doctors list in the same way that patchs requests are. All Patchs and telephone requests will be seen, and a plan made for the next steps, within 36 hours (Monday to Friday) and those assessed as emergency and urgent requests will be processed on the day. The doctor has a range of appointments to choose from, dependent on clinical need. This could be an emergency on the day appointment, an urgent appointment or a routine appointment.

5. Feedback from the group of the experience of using Patchs and Accessing Care

The Group felt generally the surgery is running well and it has become much easier in the couple of years to access care. There was praise for the reception team being helpful and friendly.

6. <u>Feedback on experience of getting through to the surgery on the telephone</u>

Nobody in the group has used the telephone call back feature. This system offers patients the option of a call back if their call hasn't been answered after 3 minutes. Patients felt there has been an improvement in ability to get through on the phone hence this facility hasn't been used. Phones are answered quickly and they rarely have to wait. The Management Team have been analysing data over the last year to gain an insight into the busiest times and staffing levels have been altered



accordingly. Monday has the highest call volume (particularly from 8-10am). Through the week - early morning, lunch times and the end of the day have peak call volumes. For patients who are calling with a non-urgent issue generally the quickest time to get through to the surgery is 10.30am-12pm, 2-4pm on Tuesday, Wednesday and Thursday.

7. Extended Hours

Nobody in the group had used the extended hours appointments.

The Extended Hours appointments across the PCN from 6.30-8pm Monday to Friday (1 day a week at West Kensington Surgery – mostly on either a Monday, Tuesday or Friday). There are also Saturday clinics across the PCN with one being held at West Kensington Surgery on a rotating basis. There are some online bookable appointments for these Saturday clinics.

8. WKS Newletter

AH showed the group a template Newsletter for comment and the group agreed that this is the format they would like to see and the Newsletter will be issued every quarter. Additional ideas from the group to add to the Newsletter:

- Information that Pharmacists can issue medication for emergencies if a patient has run out and not submitted a prescription request in time



- Which pharmacies offer pharmacy first scheme with some information about the scheme
- Information about Patchs tutorials

9. Consultation ID System – ideas on its use for Pathology results

The Group were asked for comments on their experience of getting pathology results. There was some confusion about where to get results.

Dr Skinner confirmed that clinicians are going to put more text about any abnormal blood test so patients do not need to call reception.

Patients are encouraged to sign up to the NHS App, Airmed to get results.

10.<u>PCN PPG</u>

The PCN are considering starting up a PPG across the network and would like to know if there is any interest in getting involved in the running of, or attendance at this group.

A couple of members showed an interest and asked, if and when a date is sent, the group can be invited.

11. Ideas from group about Improvements in services or facilities & AOB

- As hoping to have a more diverse PPG could consider offering meetings at different times.
- ii. Would like more information on the website regarding the Pharmacy First Scheme and which local pharmacies offer this service.



ACTIONS

- AH Issue 1st Edition of the WKS Newsletter
- AD Add information to the website on which local surgeries offer the
 Pharmacy First Scheme
- AH If a date is confirmed for a PCN PPG meeting ensure the group is invited
- PS Ensure clinical team add more information directly to patient regarding abnormal pathology results
- AH Work with the Social Prescribers to set up Patchs Tutorial face to face sessions at West Kensington Surgery
- AH/AD to organise the next meeting in January 2025