

PPG meeting 3 May 2023

Present:

Odetta Pakalnyte (OP), Debbie McCarthy (DMC), John Goldring (JG), Dr Deere (JD), Anita Mcleod (AML)

Patients: Suzie (S), Jeff (J), Tavia (T)

JG: indicated that there had been a good response to the patient survey. Great majority of patients' responses were positive. He suggested a mailshot to patients regarding services offered by the surgery as they might not be aware of all of them.

DMC: confirmed that all services were listed on the website which was the main information platform and was constantly updated. Due to time and staff constraint, it was difficult to send letters/texts furthermore patients' pushbacks were received when texts were sent out, other information were also shared by texts, ie blood tests, etc.

JG: noted that patches were not really working for the surgery, not a great success for patients neither for West London.

DMC: indicated that there was a slow uptake as it was another pathway to communicate but with the same amount of staff at the surgery to deal with. Patches was presently limited to administration as patients could call and speak to GPs on same day at the surgery if required.

OP: believed it works for some patients and for certain requests.

DMC: acknowledged that they were various ways of communication to fit patients' preferences.

JG: revealed that another point mentioned on patients' survey was the fact that receptionists were acting as triage nurses when patients were calling to be placed on morning Duty Doctors 'lists.

DMC: explained that GPs and NHS England have requested a triage to protect Doctors and avoid putting inappropriate routine requests (housing letter for example) onto Duty Doctors lists and therefore would delay patients who needed to speak to a Doctor urgently.

JD: Conceded that patients might feel the question as an intrusion when asked by a receptionist but filters had to be in place due to increase pressures and, by enquiring the duty Doctors list would not become inefficient. He suggested that maybe receptionists query could be worded differently.

JG: Confirmed that on the survey receptionists were well though off, so there might be a conflict.

AML: Agreed that her colleagues were doing a really good job under the pressure to distinguish an emergency call from a routine call bearing in mind that up to 60 calls could come through in a few hours on a Monday morning.

JG: was surprised by the number of patients happy to get a doctor's phone call as opposed to a face to face appointment.

DMC: granted that it was a mixed response depending how convenient it was for the patient.

JG: Patients mentioned that the request for quicker appointments was noted on the survey.

DMC: confirmed there were 2 permanent Doctors and 2 locums Doctors at present. Doctors recruitment was very difficult and patients had to do more self-care. However, waiting time was only one week at the Elgin Clinic and patients might not realise how this was a relatively low waiting time compare to other surgeries.

JG: thought there would be more patients attending the meeting, only 4 patients were present which was a disappointingly low attendance.

JD: confirmed that it was disappointing to have so few patients present at the meeting as everyone tended to want everything but no one was prepared to do anything for it.

J: suggested that they may be bombarded by too many emails and maybe should be reminded to attend 24h prior to the meeting.

JG: proposed a different meeting time, maybe early morning or late afternoon. He was aware that 10 people stated they were interested in helping but did not turn up for the meeting. Medicine was essential to our life and he would have hoped that more people would participate and bring up ideas.

DMC: clarified that it was difficult to run a business and changing timing to an early or late meeting would affect the running of the surgery along with staff personal lives.

S: stated that she was interested to work on a newsletter.

DMC: explained that we do not have the finance for this however a leaflet could work.

OP: stated that some PPG produced a A4 format newsletters, they could be printed out and left on the reception counter.

T: would be happy to contribute to a newsletter but understood that by asking for information she would create more workload.

JG: asked possibility of linking Tavia, Suzie and himself to help with the creation of newsletter but wanted more people to come forward and participate.

OP: expressed wish to go back on the subject of the best way to ask patients their medical issues when calling to be put on the Duty Doctors'list without being intrusive?

MCL: explicated that her colleagues are very careful and if patients did not want to mention their issues, then the doctors will have to accept this.

J: pointed out that everyone needed to move on, NHS was under lots of pressure and if it had to be asked the question would have to be answered. If some patients find it offensive to start with in due time they would accept it.

JG: confirmed that this did not appear as a major issue for the practice in patient survey. Asked if all staff have seen the answers to the survey.

DMC: stated that clinical staff had but not the admin team.

JG: next meeting would be on 2nd of August 2023.

OP: confessed that she was leaving her job and wished them the best.

All thanked her for her support.