#### PATIENT PARTICIPATION GROUP MEETING

Winchmore Hill & Park Lodge Practices

## Minutes of Meeting held on Thursday 17 May 2018 at Green Lanes Surgery

## 1. Welcome and Apologies

The Chairman, Mrs Betty MacLeod, introduced herself and welcomed everyone present. Dr R Noor (RN), Dr C Sankaran (CS) and Dr R Parbhoo (RP) were in attendance together with Mr P Loach, a member of the planning committee. An attendance sheet was circulated among the members.

Apologies for absence were received from Mr Anwar, Mr Bridgeman, Ms Dennis, Mrs Cox, Mr and Mrs Marigold, Mrs Rodman and Mr Sans, and also from the Practice Manager Ms T Trupia.

## 2. Minutes of Meeting held on 28 November 2017

The Minutes of the meeting held on 28<sup>th</sup> November 2017 were noted.

## 3. Matters Arising

Car Park

RN referred to the difficulty of accessing the car park and said that the practice was checking with Enfield council as to where the new signs should be sited. This would then be arranged as soon as possible. Some discussion ensued which encompassed:

- Unauthorised parking in the ambulance bay, it being noted that although the bay was marked with crisscross lines it had no specific "ambulance" sign.
- o Unauthorised parking in disabled bays and the question as to whether there were enough of these.
- The fact that restricted parking in neighbouring streets was only from 10.30 11.30 a.m., spaces were available there at all other times.
- The availability of free parking for 45 minutes at a nearby car park, although it was acknowledged that this might not help patients with mobility problems.

RN acknowledged the problems of unauthorised parking and agreed to act on a patient's suggestion to display alternative parking information on the website.

#### On-line Access

Several patients described difficulties in obtaining appointments both on-line and by telephone. RN explained the appointment policy. It was noted that appointments became available three weeks ahead of time. It was explained that if dates were released too far in advance this could result in more DNA, patients who did not attend. Receptionists and patients used the same appointments system and if a patient cancelled then that appointment slot became automatically available once again.

RN went on to explain that it was a question of balance between routine and urgent appointments, meeting the expectations of the patients and the availability. The practice offered even more appointments than was required of it by NHS England. Patients could request a telephone consultation with the duty doctor, all doctors were available and the practice is considering the release of nurses' appointments in the near future. There were some embargoed appointments, necessary to ensure that doctors could enable follow-up appointments in certain cases if and when required.

Responding to the suggestion that the practice issue text messages reminding patients about on-line access, RN said that this had been done and that Winchmore Hill actually had the highest number of on-line access patients in the whole of Enfield. While patients were encouraged to use this facility many of those moving from Park Lodge had lost their original access and needed to re-register.

## DNA - 'did not attend'

Responding to questions, RN explained in more detail the policy of the practice on DNA. Once a patient had been called two or three times, if they did not appear they would be counted as DNA.

It was possible to track how many repeat DNAs there were and if the practice had three DNAs from the same patient then that person was written to. If the situation continued then they could be removed from the list. It would depend on each individual case as people with mental health problems, the elderly and mothers with young children would be given the benefit of the doubt.

It was noted that in respect of hospital appointments patients were sent a text advising how much it cost if someone did not show up and it was suggested that this be considered for the practice.

#### Reception

A number of concerns were expressed regarding waiting times, time either spent queuing in reception or on the telephone.

It was explained that there should always be two receptionists at the front desk but that several members of staff had left, including a couple who had moved across from Park Lodge. Three or four new staff had been appointed and the practice is still recruiting for more. The role was not an easy one and it took two or three months to train new staff. It was also explained that, when Park Lodge was taken on, a very high tech telephone system had been installed which had some issues which are being actioned.

A suggestion was put forward that perhaps members of the PPG could help to reduce the pressure on staff. There were some simple tasks that would not require experience and should not jeopardise confidentiality. Examples were given of a volunteer obtaining mobile numbers for the practice; getting surveys filled in; distributing leaflets; and promoting on-line facilities. RN welcomed the suggestion and CS undertook to take the names of potential volunteers.

Patients emphasised that they were absolutely delighted with the clinical care provided but that customer service needed improvement.

#### 4. PPG Future

### Constitution

RN explained that Patient Participation Groups were a national requirement. Winchmore Hill practice had devised a constitution when PPGs were first introduced and this was available on-line. The practice valued members' comments. PL added that PPG membership was about partnership, the relationship should be that of a critical friend. It was noted that the constitution was in need of review but that time would not permit at this meeting.

Subsequent comments included:

- The fact that members were invited to put forward items for the agenda and yet, for both this meeting and the previous one, items submitted had not appeared. It was noted that items should be sent to the Practice Manager who would forward them to the Chairman.
- Provision in the constitution for three meetings per year and yet the last meeting was held five months previously, in November.

It was suggested that everyone present obtain a copy and agreed that Review of the Constitution be an item for the next PPG meeting.

## Chair Elections

It was noted that the constitution provided for the PPG to be led by a Chairperson who should be elected annually by the PPG. This provision gave the membership the opportunity to either retain a sitting candidate or to release them.

Tribute was then paid to Mrs MacLeod who had done an amazing job of chairing the PPG and supporting the practice throughout her term of office.

Discussion ensued on the question of continuity; the impracticality of electing a new chair each year; and how the next election might best be conducted. The mechanism for becoming a member of the PPG was outlined.

# 5. Telephone and Reception Queue and Waiting Time

This item was taken under Matters Arising.

### 6. Pharmacy

Patients raised various concerns regarding prescription.

RN stated that the repeat process should not be longer than 48 hours. There should also not be any issues as the practice had appointed an in-house pharmacist who now worked for four hours every day looking at all prescriptions and dealing with acute prescriptions. Many needed to be monitored and could not be put on repeat

It was suggested that reducing two months' prescription supply down to one month surely increased the pressures on doctors and was more expensive for the practice. It was noted that patients returned a lot of unused medicine and there was a lot of wastage and the practice continues to prescribe one month's supply routinely to support and sustain NHS resources.

#### 7. Practice Update

RN outlined a recent staffing update thus:

- o Four new reception staff had been appointed and recruitment continued.
- o One of the trainee doctors, finishing in July, would be retained as a salaried doctor.
- Another was considering a salaried position. RN outlined the distinction between partners, salaried doctors and those who simply wanted to be locums having less responsibility, "like a school of supply teachers".
- Another appointment was someone coming back into general practice, staying on as a permanent doctor on the GP Returner scheme for people with caring responsibilities.
- A deputy practice manager had been appointed to start at the beginning of June.
- Recruitment was taking place for a practice manager as Toulla Trupia would be leaving at the end of June if a suitable appointment had been made.

Questioned on the blood testing service, RN explained that this was run by North Middlesex Hospital and that any patient in the area who preferred to visit the practice could do so. The possibility of providing results by text was being explored although there were issues of confidentiality.

### 8. Any Other Business

#### **Data Protection**

Questioned on how new legislation would affect the practice, RN said that patient confidentiality would not change and information will be provided via prescriptions, website and posters in the practice soon.

#### Patient Reference Group

A patient referred briefly to a proposal by Enfield CCG to establish a Patient Reference Group.

#### Single Offer

A second question was about the Single Offer.

RN explained that the Single Offer was a move to get all the practices to work more closely together. A GP federation has been set up in Enfield which is commissioned to provide services by the CCG. All the Enfield practices take part in it.

Questioned on whether the budget was therefore being reduced, she explained that Enfield was in deficit like all CCGs and the contracts are being reviewed. There was a question about patient choices.

## NHS 70<sup>th</sup> Birthday Celebrations

Finally, had anyone at the practice started thinking about the 70<sup>th</sup> Anniversary in July. It was noted that the CCG were to hold a Public and Patient Engagement meeting on 13<sup>th</sup> June at the Dugdale Centre from 2 – 5 p.m. and members were urged to attend to keep abreast of what was happening.

### Dementia-friendly Environment

Referring to the notice in reception about zero tolerance, the comment was made that a more positive approach might help those people whose behaviour might be affected by their illness. RN explained that the notice was necessary to protect receptionists who put up with so much abuse and verbal comments and the staff are trained to take patients' illness into consideration.

# Hospital Results

Asked whether anything could be done to get results from hospitals more quickly, RN explained that hospital doctors wrote to GPs and their patients at the same time. Once the letters were put on the system, any doctor in the practice would be able to see them.

### **CQC** Inspection

In conclusion, RN announced that a CQC visit had taken place for the Park Lodge practice. An inspection had already taken place for Winchmore Hill in September 2017 but because Park Lodge had received a Requiring Improvement rating previously it had been felt by CQC that a re-visit was necessary. The Chairman had spent a whole day at the practice to give support and a report on the inspection had now been received. The news that Park Lodge had now received an **Overall Good** rating across the board for all areas was welcomed and applauded by the meeting.

## 9. Date of Next Meeting

Notification of the next date of meeting would be issued in due course. A patient thanked the panel for their time, the Chairman thanked everyone for attending and the meeting was declared closed.