# Reach Healthcare Patients Participation Group On zoom Wednesday 16<sup>th</sup> June 2021 at 6pm

# **Present**

Dr. Musoke
Ann H - Practice Manager
Carol – patient
Daf – patient
Helen – patient
Jeanette – patient
Ken – patient
Sue – patient/Chair

# **Apologies**

Received from Ann E, Kathryn, Shirley, Amanda, Lesley, and Lin.

The group was told that unfortunately due to personal commitments, Shelley has had to step down as a member. The chair had sent thanks to Shelley for her input to the group.

The chair said that as this was a 40-minutes zoom, it was likely the group would be cut off in mid-flow. Next time hopefully, restrictions will have eased, and the group can meet face to face, which is much more satisfactory.

# <u>Update</u>

Ann H and Dr. M gave updates re the practice and the new system of appointments that will be trialled soon using both online eConsult (accessed on website and MyGP app), and the telephone system.

The practice is very busy, even busier than in lockdown because there is much work being picked up, not just new issues, but many patients for various reasons had delayed contacting because of restrictions in place over the past year. The practice is therefore trying to work to clinical priority. eConsult is well used now.

# New system coming soon.

There are to be adjustments and changes to the two main systems of contact, eConsult and the telephone system, which should be helpful both to patients and to staff on the telephone. Soon, patients will be informed of those changes on the website. The chair asked that whatever changes are being made and information given to patients, will the practice please ensure that PPG members have advance notice, so they are not sharing outdated information. This was agreed to.

Every patient who contacts the practice on either system will be, before any appointment, triaged by duty doctors who will prioritise according to clinical need. This will mean that no one will be turned away and told to call again. After that, each patient will be contacted by different methods and given either an appropriate appointment, (telephone consultation or face to face) or prescription. The appointment will be either for the same day or booked in further ahead, which could be up to two weeks.

For patients who, following a blood test or other reason, have been contacted because the doctor needs them to make an appointment, when they do contact, an appointment will be arranged, and they will not be turned away and told to ring again.

Several members had questions or observations. There were concerns that some patients do not wish to tell all to receptionists, and there were also concerns that some patients have no internet, device or knowledge of technology. The latter will be triaged when they telephone in and will be phoned back. There is also a paper form for patients to fill in if they wish, which is called eConsult-light and they can fill it in by hand for the duty doctor direct. It is also hoped that when more people use eConsult and everyone being triaged, people who have no other option but to telephone in will have equal opportunity to access an appointment.

It was stressed to the members that this will be a new system and there may be issues which in practical terms need tweaking but once it is bedded in, it should be a better system for all so that no one is waiting on the phone for ages and then turned away with nothing.

It was observed not all patients feel their issue is urgent and the most important thing sometimes is just knowing an appointment has been booked, even with a wait. There was agreement in the group that 'bookable' appointments should ease frustrations.

eConsult and the telephone system will be treated as equal in terms of the triaging.

The group thanked them for explaining and hoped that this new way of working will give patients the comfort of knowing that when they do contact, some action will be taken that day depending on their clinical need.

# PPG future project

The Chair suggested that, as a future project, the members might wish to design and with the help of the practice, produce a leaflet giving information of organisations, issues, facts and avenues to follow when facing End of Life, particularly useful for family members at a very difficult time. This could be either left in surgeries or for GPs or nurses to hand out at an appropriate time. Kent & Medway CCG is writing a new strategy on End of Life and hopefully there will be better and appropriate care, not just in the NHS but from wherever it is needed. No one was against this idea, and the practice felt it would be useful. This can be followed up at a later stage.

As predicted, zoom cut off after 40 minutes and the meeting ended.