

**MINUTES OF A PATIENT REPRESENTATIVE GROUP
MEETING HELD ON 26 JUNE 2024**

Present: Margaret Barton, Megan Birch, Bob Cooper, Janet Copeland, Tina Coulson
Sheila Drury, Jan Leftley, Pat Osbourne

Action

1	<p>Welcome and Apologies.</p> <p>Sheila welcomed all to the meeting and introduced a new member to the PRG, Margaret Barton.</p> <p>Apologies received from Jane Green and Lesley Marginson.</p>	
2 & 3	<p>Minutes of the last Meeting & Matters Arising</p> <p>The Minutes of the last meeting were agreed. Actions arising from them:</p> <p>Item 3/4</p> <ul style="list-style-type: none"> • Follow-up appointments Tina advised that discussions are still ongoing in an effort to find a solution and to get all doctors working in the same way. <p>Margaret queried why face to face appointments are no longer available to book online and Tina explained how the system was being misused and it is thought fairer to all patients to have the same opportunity to book on the day appointments.</p> <p>Discussion took place on the need to have a 2-system verification on the Patient Access app. Megan suggested using the NHS app instead as this is a much simpler way to access the same information.</p> <ul style="list-style-type: none"> • Text Messaging The practice is working towards all doctors using this. • Virtual PRG Megan explained that a cross section of patients, covering age, gender, whether they are carers etc, were invited to join the virtual group. She is currently looking at how other surgeries use this type of patient representation and will update at future PRG meetings. <p>She is looking to update the PHMG website and will ask the virtual group to give feedback on the existing website. See item 10 below.</p> <ul style="list-style-type: none"> • Previous members of the PRG Tina had emailed those patients who were still receiving PRG agendas and minutes, but who had not attended a meeting for many years. None had replied and so they will be removed from the circulation list. 	MB
4.	<p>PRG</p> <p>a) Appointment of Chair Sheila apologised for not remembering that the PRG Chair is appointed at the first meeting of each calendar year. It was agreed that she would continue in this role until the Terms of Reference have been reviewed.</p>	

	<p>b) Terms of Reference Sheila circulated the current Terms of Reference which were written in 2015. She felt that they now needed revisiting and Bob kindly agreed to review them and bring the proposed changes to the next meeting. Sheila will email Bob an electronic copy of the current TORs.</p> <p>c) Members The addition of Margaret to the PRG was welcomed. Megan will approach members of the virtual group to see whether any would be willing to join the PRG.</p>	<p>BC</p> <p>SD</p> <p>MB</p>
5.	<p>Infographic – Monthly stats May's stats were discussed. We now have 17,049 patients registered at the practice with 380 new registrations.</p>	
6.	<p>Missed appointments by patients 244 appointments were missed in May and Megan circulated a detailed breakdown of these, together with a management summary of appointment activity. These were very informative and gave the PRG a much more informed view. We will ask Megan to bring these to future meetings.</p> <p>Megan also outlined a proposal to trial a version of these on our Facebook page, to highlight the need to cancel appointments rather than not turn up.</p>	<p>MB</p>
7.	<p>Staff Tina advised the meeting of lots of staff changes:</p> <p>a) Megan has been appointed Business Manager, starting on 5th August. Having worked at PHMG as part of her role as Digital Transformation Lead for Crawley Primary Care Network, she is well aware of our work practices and culture. Congratulations to Megan.</p> <p>b) Administration Manager – there has been an internal promotion with Heleena taking up this role.</p> <p>c) New Secretarial Lead – again, an internal promotion for Danielle.</p> <p>d) Georgina, Reception Manager, will return from maternity leave on 1st July but will be relinquishing her management role. An advert is out for her replacement.</p> <p>e) 2 reception staff are leaving on 28th June – both have found other jobs. Tina and Megan are currently interviewing for these posts, however this is proving very challenging. 5 candidates were invited for interview, but only 1 turned up. She was offered the job but had accepted a job offer with a vet.</p> <p>f) Our Lead Nurse, Joy, is leaving today for personal reasons and will be sorely missed after 23 years with the practice. A job advert is out.</p>	
8.	<p>Compliments and Complaints Tina has to submit a complaints log to the NHS and will bring a 12 month version of this to the next PRG meeting.</p> <p>Over the past two months most of the complaints have been about access to appointments and the length of wait on the phone. More of the admin team now cover the phones. The length of each call is taking longer particularly when there are no appointments left. A clinic had to be cancelled due to staff sickness and this invariably led to some appointments being rescheduled.</p>	<p>TC</p>

	<p>Most of the compliments are praising our “incredible staff” and one lady who travels the UK has said ours is the “best practice, best staff, best care”.</p> <p>Tina gave a special mention to the practice’s Physician Associates (PAs) who are doing a fantastic job and are receiving good feedback from patients. There has been a lot of negative press generally about the role of PAs, but most cases have been due to lack of training, supervision or being asked to do more than their role was designed for. Our PAs are well supervised.</p> <p>Megan showed a slide of post appointment surveys carried out at surgeries she works at. PHMG came out top with 97% positive in May and we are consistently above 95%.</p>	
9.	<p>Surveys At the moment, only text surveys following appointments are carried out.</p>	
10.	<p>Any other Business</p> <p>a) Megan advised there are some updates needed to the website. It is not currently fully accessible via the mobile app and the technology does not support Screen Reader, which blind or partially sighted people can use to have webpages read out. Megan gave a demo of another practice’s website. She will update the PRG on progress at the next meeting.</p> <p>b) Megan will also be trialling Facebook and Instagram pages. There won’t be unrestricted comments allowed and it will not be used as another way for patients to contact the surgery, more to give out information.</p> <p>c) Bob mentioned a problem he had with the booking system. Because he had a covid jab booked, the system would not allow him to make another appointment. Megan will look into this as it was probably a fault with the system setting.</p> <p>d) Bob also raised a problem he encountered with the phone system. At one minute to 8, lines were still closed but at 8 o’clock, a long list of callers were ahead of him. It was felt this was because everyone else was doing the same. Megan showed a graph outlining the number of calls answered during each one-hour period. 92 calls were answered in the first hour.</p> <p>e) Jan asked Tina whether she was aware of the Copthorne Church Magazine which Perry used to put info about the practice. Tina will review.</p> <p>f) Jane Green had asked for the following links which give more information regarding neurodivergence and SEDS Connective to be given to the PRG and particularly to Tina to pass on to practice staff as she thinks appropriate:</p> <p>https://www.bps.org.uk/psychologist/connective-issues</p> <p>https://pressreleases.responsesource.com/news/104052/new-research-backed-paper-warns-that-diagnosis-delay-and-symptom-disbelief/</p>	<p>MB</p> <p>MB</p> <p>MB</p> <p>TC</p> <p>TC</p>
11.	<p>Date of next meeting</p> <p>Wednesday 25th September 2024 12.00 – 14.00</p>	