

PPG Meeting

Date: 18 May 2023

Venue: Kingsmead Medical Centre Meeting Room

Present: Valerie Mais, Eamy Eldho, Ellie Thomas Norma Broadhurst, Lindsey Stott,

Mandy Skelding-Jones, Lee Brown.

Apologies Les James, Mo Morron, Eva Grice, Beth Hanson.

1. Introduction

Lee volunteered to chair the meeting.

2. Minutes and Action Log

The minutes were approved. On the Action Log:

- 2/23 The Practice was not participating in the Covid 19 vaccination campaign, so student support would not be called upon.
- 3/23 Lyndsey will edit the PPG Notice Boards and put up the new recruitment poster.
- 5/23 The move to bi-monthly PPG meetings will be reviewed after 6 months.

3. Practice Update

- i. New GP Contracts require practices to improve patient access to medical support. A response to this requirement has been developed by two of the partners in the Practice working on how to effectively and efficiently deliver the necessary interactions. The new process started on 16 May and all routine appointments are triaged. This involves:
 - a) PSCs asking for the reason for the appointment, their availability and whether they want to see a named clinician using a template with questions which will enable them to identify the issues and reasons for the call, its saliency and then signpost to appropriate sources of support or pass the information to a triage GP.
 - b) The triage GP is situated with the PSCs and will receive text information from the first contact and assess the patient's needs using their medical records and provide instructions on what the next steps should be.
 - c) PSCs will then contact the patient and text or phone to arrange the next steps.

Norma asked how and when the trial will be reviewed. Lyndsey said that initial impressions were that pressure for appointments, and that around 20% of callers do not need to see a medical professional but can be dealt by non medical staff by issuing guidance or signposting. More formal evaluation will take place. Norma suggested that evaluation of the new approach could lead to further reviews of processes and their improvement based on patient and staff experiences.

Ellie asked what impact the new processes had on telephone waiting times. Lyndsey said that calls were taking longer since the process had to be explained and more information gathered.

Ellie also asked how the new process was being communicated to patients to manage their expectations. Lyndsey said information had been put on Facebook. PPG members suggested other means of communication that could be used.

Mandy and Lyndsey said the aim is to re-educate patients on the nature of the help and interventions available to deal appropriately and timorously with their issues and to increase awareness that there are a range of medical professionals in a general practice that they could be referred to for support.

PPG welcomed the trial and saw it as a valuable attempt to respond to the national mandate in the face of unprecedented pressures on services. They looked forward to updates on progress.

- ii. Mandy informed PPG that a note had been received from DHSC on a 'Delivery Plan for Recovering Access to Primary Care'. It was a dense document outlining a range of initiatives and measures designed to relieve pressure on general practices and the '8 o'clock rush'. These included:
 - Cutting bureaucracy
 - Improving primary/ secondary care interface
 - improving information on the NHS app
 - Encouraging self help
 - Expanding community pharmacies prescribing role for selected conditions
 - Better telephone systems with improved functionality
 - Larger multi-disciplinary teams
 - Recruiting more GPs and retaining existing ones

Mandy will provide PPG with a summary of the measures.

ACTION: MANDY

iii. Zero Tolerance Policy: Mandy outlined the factors that had lead to the previous policy being reviewed and amended to increase the safe guarding of staff by the Practice. She described the process they follow to verify an incident and the steps taken to inform patients of the unacceptability of their behaviour and the consequences that could flow from it. Action is only taken when they have a reasonable belief that there was an incident. In response to a question, Mandy said that incidents that led to a patient being removed from the Practice List were rare.

On communicating the policy so that patients are aware of the behaviour expected from them, Lyndsey reminded PPG that the 'Patient Contract' that people signed on joining the list contained information on this. She will copy the 'Patient Contract' to PPG.

ACTION: LYNDSEY

PPG asked that the policy is implemented sensitively and takes account of the range of verbal competencies of patients.

4. Patient Feedback

- i. There was praise for the way a PSC had handled potential confusion over the timing of a follow-up appointment.
- ii. A patient who had had a long term ailment had been invited for a follow-up Covid 19 Booster vaccination. On arrival she was told that the eligibility rules had changed and as she was no longer receiving active treatment she did not qualify. Advice was given on how to check if she was still eligible.
- iii. The process for recording and amending DNR on patient records was explained.
- iv. The Practices approach on providing information on test results was discussed.

5. Purpose of PPG

Val had reviewed PPGs terms of reference and code of conduct and highlighted the need to review them and consider what is still appropriate. There was discussion on the principle, spirit and intent of paragraph 2 of the code – the requirement not to discuss personal illness – if or when and how it might be derogated; and, whether this might undermine and delegitimize the integrity of PPG.

It was agreed that both documents should be updated.

ACTION: LEE

6. Any Other Business

i. There was a request for more information on social prescribing. A Social Prescriber will be invited to PPG.

ACTION: LYNDSEY.

ii. Norma informed PPG that she will be working with PCN staff to develop recommendations to make Northwich a Dementia Awareness Town.

7. Closure and Next Meeting

The next meeting will be 20 July 2023.

Possible Agenda Items: The Role of Social Prescribing

Update on Integrated care systems