

## **AUGHTON SURGERY**

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**Partners:** Dr Darran Harris, Dr Emma Hughes & Mrs Sandra Guppy

### **Patient Participation Group Meeting Minutes**

*Thursday 24<sup>th</sup> November 2022, 5pm*

*Present: Jack Chesters (Practice Manager), 3x PPG Members (Names hidden for confidentiality reasons).*

#### **Agenda**

See attached document

#### **Minutes**

##### **Introductions**

- Practice Manager and all PPG members briefly introduced themselves.
- JC talked about how the meeting will run, and what items were on the agenda. Discussed that the meeting was a relaxed environment and PPG members could raise any questions about agenda items along the way.

##### **Current Challenges**

- JC talked about the challenges that are currently facing general practice as a whole and the surgery more locally
- **Staffing** – Spoke about the problems that we have had with various staff leaving/retiring, and then struggling to recruit
- Particular challenges with recruiting clinical staff (HCA, PN and GP) although we have recently recruited a new HCA and GP, and we are holding interviews with 2 experienced Practice Nurses next week.
- We spoke about how staffing shortages are a national problem (both clinical and administrative), and impact this has on service we can offer.
- MW asked whether all our GP's are full time. JC explained how the GP's work on sessions rather than hours. Also explained how even if GP's only work a smaller number of days in the week, they still have the same significant workload (appointments, visits, referrals, prescriptions, lab results, letters etc.)

- **Demand** – Discussed that at the same time as experiencing a staff shortage, we have also been seeing a huge increase in demand. This has been difficult, as the two problems are coinciding as we have less staff to deal with the rising demand.
- Showed PPG members graphs that displayed relevant statistics. First graph showed how number of hospital doctors has increased, population has increased but numbers of GP's have decreased.
- Second graph showed local data within the surgery. Displayed that the number of patient actions has significantly increased in 2022 compared to previous years.
- **Patient Expectations** – We also discussed about increasing patient expectations. We are seeing a lot more patients who are calling throughout the day and expecting to be seen whenever is convenient for them. PPG members understood that once we have reached a certain capacity, we cannot go over that.
- We talked about how patients indicated that they would prefer F2F appointments, so the surgery listened to that and returned to majority F2F consultations. However, this has now resulted in more patients complaining when they are being kept in the waiting room.
- JC explained that patients are coming with multiple, complex issues, but only booking one 10- or 15-minute appointment which is why clinicians are often running behind.
- PPG members thought that some patients may be doing this to try and save additional appointments for other patients, and they may not realise that they are causing clinicians to fall behind by doing this.
- JC also explained that patients are becoming increasingly demanding about private work and are often unhappy at the potential wait time for private work to be completed. JC explained that we must prioritise NHS work, and private work will be completed as and when we can get to it. Although, we do always tell patients that this may be up to 4 weeks.
- KB thought that it may be useful to have this information on our website or somewhere visible, so patients' expectations are managed before they come to the practice with their private work expecting it to be done in a shorter timeframe. JC will look at this.
- **Workload** – This linked in with previous discussion about demand, but JC reiterated that a clinicians' working day does not just consist of seeing patients and there are a significant number of other tasks that must be completed.
- JC also advised that it is becoming difficult for us to take any further increase in our workload without additional funding that we very rarely get.
- **Estates** – We also discussed that we have a problem with room space in the surgery. As a lot of the extra work that we are given to do involves seeing patients, we need to have rooms to see them in.
- JC informed PPG that we are looking at potential options for extension of the building, and we had an architect come to the practice earlier in the week. JC will update PPG at next meeting on where estates plans are up to.

## **Practice Updates**

- **New Telephone System** – JC explained our new telephone system to PPG members. We discussed that it is cloud based and much more user friendly for practice staff. Also explained that incoming and outgoing calls are recorded, which we have found to be very beneficial. JC also informed PPG members about the queue call back function whereby if there are a lot of people in the queue, callers can press an option for the system to call them back when they are at the front; this saves them having to spend lots of time queueing on the phone when lines are busy. PPG members thought this was very useful.
- **Online Consultation System** – JC spoke about the new online consultation system that we have recently started using. Allows patients to submit e-consultations between 12pm and 6pm, Monday to Friday.
- JC explained how the system works, and what it is beneficial for. Also advised PPG members that patients who have used it so far have found it useful for minor problems.
- **Enhanced Access** – JC explained the updated enhanced access service.
- Advised that the service now offers more appointments of a weekday evening, and Saturdays bookable through reception.
- We spoke about how the service no longer offers appointments on a Sunday because they were finding that there was a much higher rate of DNA (Did not attend) of a Sunday.

## **Discussions**

- JC asked what sort of topics PPG members would like to discuss in future meetings – PPG members thought that it would be good to discuss improvements and ideas, as well as updates on previously discussed items
- JC asked how often PPG members would like to have meetings – 2 monthly was agreed
- PPG members happy to continue with F2F meetings, and 5pm start time was convenient for all attendees.

## **Any Other Business**

- PPG suggested it would be a good idea to have pictures of the admin and clinical staff in reception with names underneath so patients know who everyone is. JC advised that this had already been discussed in recent partners meeting, and we are planning to do this in the near future.
- PPG brought up the fact that confidentiality in reception area is very limited. Patients who are sat in the waiting room can often hear what is being discussed at reception. JC advised that we are aware of that issue, but very difficult to resolve due to layout of the building.
- KB suggested looking at whether volunteers may be able to help with workload pressures. JC advised that unsure whether volunteers would be able to work in practice, however, could look into it.

### **Action Points**

- Staff pictures to be taken and displayed in waiting room
- Section on website to be created about private work and expected waiting times for completion
- JC to look at whether volunteers could help in practice in any way
- Next meeting in 2 months – Invites to be sent out nearer the time