

Park Farm Medical Centre and Vernon Street Surgery

PATIENT PARTICIPATION GROUP (PPG)

Minutes of Meeting Wednesday 10th January 2024

The meeting opened at 7.05, on both 'face to face' at Park Farm Medical Practice, and on Teams.

Teams Link problems became apparent at the start of the meeting. Despite Simon's best efforts— some 30+ minutes- he could not totally 'fix' it. Finally at 7.40pm the link was "restored". The new speaker system was tested during the day, and everything worked well. However, there was a big Windows update during the day, it was thought that was possibly the cause.

Simon and the team will be looking into contingency plans should such a problem arise in the future. Perhaps asking members to join on Teams 5 minutes prior to the start time.

Sue O'Key Practice Administrator emailed members the following morning apologising to those unable to join the meeting.

Attendees: Dr N McKay, Roger Haylett, Val Haylett, Sue Ekins, Simon Jones, Vanda Vickers

Joining on Teams at 7.40pm - Margo Keats, Bill Keats, Richard Smith.

It was commented that the new speaker system worked well on Teams.

Val Haylett (Chair) welcomed everyone to the meeting.

Apologies – none received.

The minutes of the previous meeting in October were agreed apart from a misspelling.

Apologies to Nigel Aspden for misspelling his surname in the October minutes.

Actions from the last meeting:

Simon

- The new Vernon St Sign is now up
- A new speaker system for Teams meetings is now in place. Ironically it was set up, tested and was coming through loud and clear prior to the meeting.
- The telephone queue system has been addressed and now patients know where/number they are in the queue.
- The whole telephone system is soon to be replaced, aiming to be internet synched and making possible a call back system for patients in a queue. Further clarification/testing is required.

Dr N McKay

The Practice are constantly looking to improve the efficiency of communication to patients. For example: when a patient is booked for tests, following the test results, what would be the next steps - whether a face to face or telephone follow up is necessary and other considerations regarding ongoing patient care. The practice is looking at ways to inform the patient of what are the next steps. It is acknowledged that the current systems are not fool proof. The Practice is looking at procedures and how to make clear to patients what would be the next steps, if any.

The Practice has a 12,800-patient population. A clear and cost-effective system is key but difficult - text messages are chargeable, as they are communicated through the PCN network system, plus postage costs are high. The online Ask a Nurse a Question or ask a Doctor a Question via the website is an efficient and effective means for patients to make non urgent medical queries.

Dr McKay, personally, feels face to face appointments are preferable to telephone calls and a lot can be learnt from how a patient presents, this is why the doctors and nurses go to the waiting room to call the patient into the consulting room. A face-to-face appointment is not always necessary, and a telephone consultation takes the same amount of time. This should be the patient choice, sometimes it is more convenient for the patient to have a telephone call. Some ongoing medical condition reviews can satisfactorily take place over the telephone or online.

Accommodation was discussed.

Val asked if there are any plans to expand accommodation. There is currently no space available to expand at Park Farm or Vernon St. The Practice is just about coping re space, they are constantly looking for new and imaginative use of space and working practices. Extending working space is very challenging. Vernon St needs serious maintenance work including damp problems which cannot be addressed until Spring.

Any new Practice accommodation now must be of hospital standard, at a cost of £10/12 million per practice. New Build costs to General Practices are prohibitively excessive and carry the risk of carrying the debt. This is one reason why the plan for a new hub at Mackworth was abandoned.

Most GP surgeries are owned by Partners – they own the building and so are liable for all costs, mortgage, upkeep etc. The NHS pay rent to Partnership which covers the mortgage.

If a Practice is non-viable Partners are personally responsible.

Dr McKay explained that across the City of Derby practices require an extra 50% of space and there is a Derbyshire -wide initiative looking into accommodation problems.

Simon Jones, Practice Manager.

No significant changes to the Practice since the last meeting.

Update of the telephone system will happen in the next 2/3 months. A call back system for patients waiting to get through on the phone is being investigated.

There have been some changes to staff – 2 new receptionists, 2 registrars & 2 new trainee GPs.

Some locum cover over the holiday period was provided by previous practice doctors.

Health Care Assistant/ Receptionist Nicola is about to complete her nurse training and will join the practice as such. Congratulations Nic!

As Dr McKay had stated the space available is an issue. Room capacity – 2 days per week every single room is being used, the other 3 days there may be 1 or 2 rooms free but pretty much every day all rooms are occupied. The practice could employ more GPs & clinical staff, but due to the room issue this is difficult.

November '22 to Nov '23 saw a 20% increase in GP appointments.

A music licence is to be obtained, so there will be music in the background in the waiting rooms. This should provide a calming distraction and enhance Reception confidentiality.

A.O.B:

Partial Teams link was established by this time and Val asked for any questions :

- A member asked about Reviews e.g asthma & diabetes – do they need to be face to face as the current review letter did not specify. Dr McKay responded that patients have options e.g. face to face or a telephone call, if the condition is stable maybe sufficient - this is down to an individual's preference. The correspondence re reviews is to be looked at to ensure it is clear that the choice is the patient's, whether face to face or telephone. **Simon to review.**
- Letters / information from the Practice needs to be clearer about what procedures are following tests / reviews etc. Often patients are unsure what the next steps following tests are. This should be clarified when a test / review is recommended e.g. do they need to see / talk to a clinician again? Do they need to ring / email about results or just assume all is OK and no further action necessary unless they are contacted ? **Simon to review**

- Question - If a patient specifically asks for a telephone consultation and GP feels face to face more appropriate, will they be offered one? Face to face and telephone conferences take the same amount of time. However, it is important that patient has a say in what sort of appointment they want.
- A member stated they like the prospect that you can see the same GP regarding ongoing care. Dr McKay informed the meeting that the GPs can book a follow up appointment slot in the future for their own clinic. If at the end of the consultation it becomes clear that a follow up is needed, you can ask the GP to facilitate the appointment there and then.
- The Practice is looking to improve information flow.
- A member raised the ongoing problem with appointment capacity and demand. The Practice is constantly looking at ways to improve – Dr McKay commented that it drives the GP nuts!
- A member raised input from CQC. There have not been visits for a while, but they do have a 'light touch' with monthly monitoring plus they do have access to the practice systems. They look at data e.g. prescribing - specifically looking at patient safety.

Val would like to hear what Members would they like for/from future sessions? Or are there any queries to be raised. Please contact her directly, val.haylett@nhs.net or leave a message with the practice reception.

Dr McKay suggested it may be an idea to have an annual strategy meeting for PPG members to prioritise discussion subjects e.g. appointments, communications, what is important for improvements and any ideas for future talks.

Dr McKay is happy to return as often as requested. Other Clinicians are to be approached to talk about their role e.g. practice pharmacist.

Amanda Thorp, the lead Receptionist, has been asked to come and talk about the Receptionist's role, at the next meeting. It was suggested by Dr McKay that prior to this, Val should spend time in reception to get feel of the experiences of being on Reception.

Val thanked Vanda for taking the minutes.

Actions

- Simon and the practice to review letters and communications to make it clear what the options are.
- Simon to suggest a way to work around a future potential teams link failure.
- Val to spend an early morning in the reception at Park Farm.

Meeting closed 20.10.

Next meeting

Wednesday 17th April 2024 at 7pm.

In person in the meeting room at Park Farm Medical Centre and on Teams.