

## Patient Participation Group (PPG) Meeting

Minutes of Meeting held on Tuesday 28 March 2023

6.15 pm – Charles Street Waiting Room

### 1. Apologies, Welcome and Introductions

- Chevin Medical Practice – Vicky Brady, Patient Services Manager, and Jenny Firn, Patient Services Supervisor.
- Patient Participation Group – 18 invited; 4 attended.
- All were welcomed to the meeting and introductions made.

### 2. Practice Update

- i) Due to Patient Services rota changes, telephone waiting times have dramatically reduced.
- ii) Staffing, new appointments:
  - Clinical Nurse Practitioner: Romy McGuigan
  - Practice Nurse: Amanda Robinson
  - Practice Nurse: Jenni Lund
- iii) The Physician Associate role was explained. “Physician Associates are medically trained, generalist healthcare professionals, who work alongside doctors and provide medical care as in integral part of the multidisciplinary team.” *NHS Health Education England*
- iv) Travel advice: the PPG was advised that due to excessive demands for normal health appointments with our nursing team, we can no longer provide travel advice. We now only offer the free travel vaccinations included by the NHS (see website).
- v) Missed or DNA (did not attend) appointments: last year (2022) almost 2,000 appointments were recorded as DNA (i.e. the patient did not turn up for their appointment and did not contact the Practice in advance to cancel or change their appointment). This equates to over 160 wasted appointments each month.

### 3. AOB

- i) Access (especially for the Practice's older cohort): a query was raised due to the increasing use of technology and the possible difficulties this may give some of the Practice's older cohort. It was confirmed that each of the three surgeries can be accessed in person or via telephone. An example was provided of the Covid vaccination clinics – waiting lists are produced with patients telephoned on more than one occasion to arrange appointments. In terms of prescription requests (which are not accepted over the phone), that quite often pharmacies will assist with ordering of repeat prescriptions.
- ii) Triaging and training: a question was raised over this. It was explained that all the Patient Services team (reception) undergo rigorous and personalised training. Regular training meetings take place and information is frequently shared by our GPs. The team request information from patients in order to direct them through the most appropriate channel in the most efficient way – i.e. the team can access appointments with physiotherapists, mental health practitioners, pharmacists, which may often be more appropriate than a GP appointment. All information is treated in the strictest confidence.
- iii) Telephone and face-to-face appointments: a choice is available and the rota is constantly reviewed and amended to meet demand where required. From April 2023, there will be increased availability of face-to-face appointments. It is important to note that not everyone wants a face-to-face appointment, for example someone working full-time may find it easier to access a telephone appointment.
- iv) Patient records and information from Leeds and Harrogate hospitals: it was confirmed that despite different boundaries and NHS trusts, information is shared electronically.
- v) Care of staff in terms of lone working / useful information: it was confirmed that the Practice has a Lone Worker Policy (e.g. for staff undertaking home visits) with all necessary arrangements in place. There is a facility for sharing information.
- vi) Blood test results: a query was raised over this. The process was explained, i.e. results are reviewed by a clinician and, where appropriate, instructions are given to contact patients within prioritised timescales (for example, speak to nurse within 6 weeks). It was also noted that some abnormal blood test results may be 'normal' for that particular individual.
- vii) Contact with the Patient Participation Group: PPG member Sandy Goulding is happy for any patient to contact her if required. Ideas on a wide cohort representation at the PPG are welcome.
- viii) Training: Sandy referred to a presentation given by Dr Stewart Manning at a Support Group last year advising that Dr Manning would be happy to give that presentation to the PPG to raise awareness about cancer screening. A suggestion was raised over GPs giving 'information sessions' (e.g. palliative care, use of defibrillator, first signs of stroke) and this will be explored.

- ix) Clinical rotas: a question was raised over the availability of advance bookable appointments. It was confirmed that there are always rotas 4 weeks ahead, but that it is not always possible to plan further ahead than this (though there are sometimes rotas up to 6 weeks ahead) as due to large patient numbers it would then be difficult to rearrange appointments should a clinician suddenly become unavailable (e.g. due to illness or leave).
  
- x) Practice boundary: it was confirmed that it is not possible for patients who live, or move, outside the Practice boundary to remain registered.

#### **4. Date of next meeting(s)**

- Agreed to plan for next meeting towards the end of September – date to be confirmed.
- Agreed to plan for 2024 meetings towards the end of February, the end of May and the end of October – dates to be confirmed.