

Woodville Patient Participation Group (PPG)

Next Meeting – 14th January 2020 at 18:30, discussing:

Why can't I get an appointment?

To include:

- an update on staffing at the surgery,
- why Advanced Nurse Practitioners are a great idea,
- how to use your appointment properly.

No need to book, just turn up.

Minutes of meeting held on 3rd December 2019 at 6:30pm

Present : Karen Gothard – Assistant Practice Manager
Harry Jolley
Nick Locke
Micky Locke
Sabyta Mackay
Colin Moody
Cindy Newton
Alison Wright – Practice Manager

Previous Minutes

442 Colin resurrected the “what do the doctors want from the PPG” question and Alison agreed to restart the discussions. **Alison**

22 January – Following the negative survey feedback about appointment availability and difficulty making telephone contact, the GPs have suggested that the PPG could help. The aspiration is to reduce waiting time from four weeks to two and then potentially further. One possibility could be to drip-feed the release of appointments for booking. It was agreed that Nick would help the practice to craft a survey to gain an understanding of booking patterns – how many times did the patient try to book before getting in, for example. We will then look to undertake some survey sessions in the waiting room.

5 March – The survey was not done due to other pressures on the practice. However, appointments are now being drip-fed into the system rather than released en-bloc. Waiting for the ANP is down from 21 days to 9, and for GPs from 4 weeks to 3. So, there is a way to go, but progress is being made. Other areas could be encouraging use of on-line access and the health centre hub.

30 April – The meeting agreed to repeat the survey in six months (see new Reminders section). A doctor will be asked to attend the next meeting – with some pre-considered, realistic ideas of how the PPG can help.

11th June – Due to workload caused by staff shortages, no doctor was available to attend.

10th September – Carried forward.

3rd December – Agreed that we will not get a doctor to attend the entire meeting, but perhaps a ten-minute slot at 18:30 with pre-submitted questions could work.

473 Alison noted that the Park Run organisation is looking to create associations with GP practices. We will invite them to our next meeting.

11th June – Roger and Nicola from Conkers Parkrun gave an interesting talk on parkrun and it was felt that the surgery should join as a parkrun practice (the ninth local practice to do so). It

was felt essential that all clinical staff are encouraged to “sell” the benefits of Parkrun. 9:00 every Saturday morning for anyone that’s interested. Could we get the GPs to do it and invite patients to join them?

10th September – We will need to give a specific date to the GPs to have any chance of them attending.

3rd December – Decided that we are unlikely to make this happen and the resultant publicity/benefit would be minimal. Subsequent discussion is covered later in the minutes.

- 474** Dr Chandra has decided to leave the practice. An advertisement will be out shortly, potentially looking for two part-time GPs. If that approach is taken then it is likely that the total availability of appointments will increase from its current position.

11th June – No change.

10th September – Two advertisements and two agencies have been used. A second Advanced Nurse Practitioner is being sought.

3rd December – A second Advanced Nurse Practitioner has started work. It was noted that ANPs are not bookable on-line as there are some things they cannot do. Four new administrators have started work at the surgery. The current doctors are all permanent and all partners. The staffing levels are two working 4 days (full time), one working 3 days and one working 2½ days. In addition, one ANP works 5 days and the other 4.

- 476** Alison mentioned the new Primary Care Network which covers our six local surgeries and around 55,000 patients. All surgeries are expected to join from 1st July and will receive funding for things like pharmacists, social prescribing, paramedics and physician associates (can prescribe, but can’t sign prescriptions). The idea is to even out inequalities in care provision across the network and potentially save some costs by sharing resources. Dr Marshall from Newhall is the Clinical Director.

10th September – Each surgery may offer specialisms. There will be a jointly employed pharmacist. Dr Marshall has suggested a PPG grouping as a possibility.

3rd December – Alison had no further update. It was noted that Overseal surgery is closing and that some patients will probably move to Woodville. The idea of the PCN is to help ensure that the same “offer” is available to all 55,000 patients in the area, regardless of which surgery they attend. We will consider the potential PPG grouping if/when it is formally proposed.

- 483** Colin offered to undertake some more analysis of the “did not arrive” data, which we can then review to see whether we can help to reduce the number.

Colin

3rd December – This is ongoing and dependent on Karen’s availability.

Matters Arising

- 484** The need or otherwise to actively recruit patients was discussed. It was noted that the surgery was designed for 12,000 patients. The lack of appointment availability is often highlighted in the NHS Choices feedback. We will delay consideration of any active recruitment until the potential transfer of patients from Overseal has been finalised.

485 It was noted that PPG membership has dropped recently. We will try to drum up some interest by deciding in advance a main topic for each meeting and publicising it on Facebook and the web site, in addition to the minutes. “Why can I not get an appointment?” will be the attention-grabbing headline for the next meeting. **All**

486 A patient survey is due. We will plan to do it after the next meeting, by which time the second ANP will have been embedded. It is hoped that the current upwards trend in appointment availability will continue, and that will be reflected in the results.

Any Other Business

487 One member had heard of referrals being “blocked by a secretary”. Karen will take this up outside of the meeting. **Karen**

488 One member had seen an 80+ year old patient using a walking frame told by reception that she would either have to telephone the next day, or pay a return visit in order to book an appointment. More details will be provided and the incident investigated. **Karen**

489 One member is on the Headway panel. It was noted that there is a route to claim on insurance and thereby remove the need to NHS money to be spent. New leaflets and information will be supplied.

490 It was clarified that appointments relating to chronic illnesses can be booked up to four weeks in advance.

Reminders

October 2019 Repeat the patient survey, focussing on appointments to allow assessment of any improvement.