**Patient Participation Meeting**

**7th August 2023**

Present: Wayne Penegar (WP) Chair, Lynsey Buckles (LB)-Mins, AM, GN, PA, TC

Apologies: WPr, SP

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| Discussion | Action |
| Matters Arising |  |
| **Telephone appt timeframes**-GP feedback discussed. Whilst GP’s recognise that time frames would benefit some patients, due to the way they run their clinics, currently they feel they would struggle to give a 2 hour window. This will be revisited at subsequent governance meetings thoughLB updated on **carers bereavement** and suggestions for LP & EGW to consider around adding in more specific information for bereaved carers when sending out the bereavement cards.**Lease**-updated on the situation as it stands (finally agreed on lease with 5 year break clauses, then landlord very kindly offered more space, ICB were unable to support the request for additional space or any additional spend (including on IT equipment and caballing etc), added costs which have to be subsumed by the GP Partners if they take this lease, one off costs, plus ongoing costs of additional space. However this would mean a 15 year lease and longevity for the practice. Still negotiating and working through whether this is viable both from the landlords perspective and the GP Partners perspective. |  |
| Today’s Discussion |  |
| **Complaints & Compliments**Compliments on Google reviewsLast 7 comments have been 5 star reviews. NHS Choices reviewsLB no longer gets email notifications when someone posts a review so these are often missed.Two of the most recent ones were discussed. 1) Patient being called early in the afternoon when he had been advised the appt would be after 5pm-which did come in separately as a formal complaint.2)Lovely review about wound dressings and how pt was looked after Compliments on email & from FFT discussed.Nurses particularly get a lot of good comments and reviews.Complaints2 discussedPt wanted to book appts at desk 1st thing in morning-explained why staffing and systems don’t make this appropriate anymore (triage)Pt was frustrated that he was advised a Telcon would be after 5pm and he was called early-upheld. This was useful to reflect in the governance meeting on impact on patients. |  |
| **Data from FFT** LB discussed the outcomes from the Family and Friends Test, that the practice is contractually obliged to send out to patients. The questions are not questions set by the practice but by NHS England.460 completed since April

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| 68% Very likely to recommend21% likely to recommend5% either unlikely or very unlikely to recommend | 64% female35% Males12% considered themselves to have a disability | Highest returners of the survey35% >65’s41%- combined 45-64 age groups | 59% White British16% White other5% Asian or British Indian |

Under the recommendation question, patients are offered the opportunity to leave a comment. 327/460 left comments

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| 20% mentioned ‘Friendly/Nice’19% mentioned having a good experience or a good service15% mentioned ‘efficient’14% mentioned ‘helpful’12% comments on how the appointment system worked well11% mentioned ‘professional’10% commented on their appointments being on time9% mentioned ‘excellent’ service | 9% mentioned ‘Kind’7% said mentioned how informative the consultations were5% mentioned issues with appointments (getting one/cancellation)3% mentioned appointments running late3% mentioned issues with phlebotomy |

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| **Staffing updates**2 new receptionists have started. Neither have ever worked in a GP surgery before, but both have picked it up very quickly. 1 is called Gail and the other is called Kayeesha. We are interview tomorrow for more receptionists as Alejandra has resigned and so has Shannon. Although both will be bank staff.Care Coordinators-both positions are still vacant, interviews tomorrowGP’s-all GP’s are now back from their absences, 2 are still on phased returns but they should be fully up and running again by mid-September.New male GP Dr Ali Siddiqi started yesterday. He will be doing all day Mondays and a Thursday afternoon.Paramedics-1 vacant positon and no applicants, Lucy is also departing at the beginning of September to go travelling.  |
| **New/improved services**SaturdaysThe practice will be trialling opening on Saturday mornings from 26th August-30th September. We will have at least 1 GP working and hopefully also a phlebotomist.PhlebotomyWe have been offering a small level of phlebotomy in recent months, but from September we now have regular phlebotomy clinics Wed, Thurs & Fri AM. We are keen to support staff to develop and grow and two of our admin staff have undertaken the phlebotomy course so Shannon and Jo will be picking up some of the phlebotomy work for the patients. HRTWe now have a GP and Nurse with special interest in HRT, the pathways and protocols are being strengthen and we are hoping to be able to offer HRT and menopause clinics in the future. Feedback has been excellent so far. COIL clinicsLong Acting Reversible Contraception (LARC) clinics are commencing soon within the PCN. Dr Russell is trained in this and will be offering this service for both LRMP & FGS staff at Lambton Road surgery. Children’s HubWe are planning another childrens hub funded by the PCN again this year, From Sept-March. Clinics held at Lambton Road, who will be dedicated to seeing children on the same day with new issues such as fever or rashes etc. |  |
| **Flu Day**This is currently planned for the 16th September. The Flu vaccinations should hopefully be delivered by the 15th. We plan to do self-book appointments this year and see how this works. We will also be trialling having a phlebotomist at the clinic to do any outstanding bloods patients may need as well as a HCA who will be doing blood pressures and foot checks etc.Would anyone be free to come along and help? AM, WPr & TC (for a bit)Discussed **advertising for PPG members** at the flu day, perhaps an A5 bit of paper that can be handed out with the flu leaflet? | TC to write a little blurb about what she has gained from joining the groupLB and WP to work on the 1 pager |
| **Significant events**LB thought it would be interesting to share two significant events which have happened recently that have affected quite a few of the patient population. Both do not have learning for FGS, but are things that have been picked up by FGS and we have then put alerts in which will hopefully flag issues on a wider scale so they can be addressed.*Cancer Two Week Wait appointment delays*LB is currently undertaking the Cancer safety netting work in the absence of a care coordinator. She noticed that Dermatology referrals were taking significantly longer than 2 weeks to get appointments. Make a Difference Alert was made to highlight the concern. Response received which advised they had received an unprecedented volume of referrals in June, which has left them not being able to meet the target. So far we have not identified any patient who have come to harm as a result of this delay.*Test Results not coming into EMIS*Pathology changed their system in June, we followed instructions, however these instructions turned out to be incorrect and therefore there was a 3 week period where some test results did not get sent to EMIS and therefore were not seen by a clinician. This has affected other practices in Merton. A Make a Difference Alert was raised for this as well, but we are waiting their response. No patients were identified as coming to significant harm as a result of this. |  |
| **Assistance animals**The practice has seen an increase of dogs being bought into the practice whom are pets rather than assistance dogs, we have therefore introduced an assistance animal’s policy.This asks that patients only bring dogs into the practice who are fully trained assistance dogs and they must not be left unattended anywhere is the practice. |  |
| **PPG feedback**TC commented that there are lots of new things going on, clearly been busy- well done.GN fedback about cataract surgery issues and the apparent disorganisation between Moorfields and STGH.AM-X-ray-Went to Nelson, they could not do x-ray as AM did not have the form, AM came to FGS who advised that we email the form. Nelson advised AM that they only accept email forms for MRI. Am was then advised that the form completed was a ESTH form and she would need to wait for them to contact her with and appt as they did not have a drop in. However AM was advised elsewhere that they do have a drop. LB apologised about the difficulties AM faced.GN- feedback that in recent health issues he has been suffering with the team have been really wonderful and reception have been particularly excellent.  | LB to clarify if St Helier have walk in x-ray clinics, also if going to the nelson does it need to be a TQuest form. |
| Date of Next meeting: Tuesday 24th October 2023 at 6.30pm.  |  |