

# Minutes

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## PATIENT PARTICIPATION GROUP

Wednesday 24<sup>th</sup> March 2021 – 12.00pm

Western Elms Surgery    Chair    AP    Minutes    LL

1.	<p>Attendees:</p> <p>CL PPG: Chris, Debs, Jayne, June, Peter, Philip WES PPG: Alan, Alice, Beti, Hazel A, Colin M, Hazel M, Marilyn, Murray, Shaheen, Susan A, Susan P</p> <p>Surgery: Lisa, Lucie, Jane, Angie and Dr Oji</p> <p>Apologies WES: Rebecca Apologies CL: Colin, Lesley, Lynn, Maggie, Mike, Norman,</p> <p>Due to Lockdown 3.0 we held the meeting virtually using zoom.</p>		
2.	<p>Minutes of last meeting and matters arising</p> <p>Alan welcomed everyone to the meeting and said that the group should congratulate both surgeries on what has been achieved over the last year, what a fantastic achievement. However, sadly, we have lost a few people over that time which has definitely brought home to everyone how easily transmitted this virus is and continues to be.</p> <p>This is the third joint PPG meeting with Circuit Lane and Western Elms surgeries.</p> <p>Everyone introduced themselves and we will ensure that Alan's email and the PPG email address is circulated to ensure that everyone can contact the chair or the secretary.</p> <p>Lucie has completed a draft PPG poster and following Alan's comments will amend and circulate to the group for distribution.</p> <p>The feedback on footfall was predominantly positive. Several members use it for repeat prescriptions. Lisa advised that more phlebotomy, smear tests and other appointments will be available to book online to reduce the number of phone calls and it is hoped that more appointments will be available as things become more normal.</p> <p>The minutes of the last meeting were voted as accurate and accepted.</p>		
3.	<p>Financial</p> <p>The WES and CL account balances are the same as last month and the treasurer reports were voted as accurate and accepted.</p>		

4. Surgery News – Lisa

COVID update -

We were one of the first surgeries to administer the vaccine to cohorts 1-9 with Tilehurst Surgery. We have at this point administered 11,500 vaccines; however we are now finding it more difficult to fill up the clinics as a lot of our patients have chosen an appointment elsewhere. We have now come to the end of cohort 9 and have declined to do cohorts 10-12 for the very reason that the majority of this age group are able to get to their local mass vaccination centre. We are committed to doing 2<sup>nd</sup> vaccines and possibly a 3<sup>rd</sup> for those patients who have already had their first vaccine at Circuit Lane.

Alan asked is it the younger people who have chosen not to come to Circuit Lane for their vaccine. Lisa explained that there are currently 13 patients from the over 80's group who we have not been able to get hold of or have declined the vaccine. As you come down the cohorts, approximately 50% of the group we are struggling to contact and any that work, we have provided clinics until 8pm to facilitate them. EMIS is updated once a patient has had their first vaccine, however we don't know if a patient has booked an appointment until they've had the vaccine. 2<sup>nd</sup> vaccines are taking place approximately 11 weeks after the patient has received their first dose.

Alan also asked if there had been any side effects to the vaccine. Lisa commented that we were not aware of any patients with serious side effects to the vaccine and those that did had the usual minor achy arm, headaches, flu-like symptoms. Some patients have requested not to have the Oxford vaccine; however we have advised that the benefits far outweigh the negatives.

Lisa asked the group if anyone would be able to volunteer to help in the car park on Saturday 27<sup>th</sup> March at the vaccination clinic. Marilyn will confirm with Lucie if she is able to help out. With regards to the car park, Debs raised the complaint received regarding the severe incident that happened recently in the car park and will notify residents that additional parking is available at The Grange when we are holding vaccination clinics.

During some of the above discussions, Alice received a telephone call so Lisa advised Alice that Marilyn would provide her with any relevant feedback.

Telephones -

Our new Cloud based telephone system was installed in the second of week of March. We are aware of some teething problems, including reception staff having to wait for the calls to come through the Cloud before being able to answer the call. However, the system does allow us to have more lines at both sites and it will eventually enable us to provide a greater service to our patients. The numbering system hopefully provides clarity to the patient so they know where they are in the queue and patients are waiting approximately the same length of time as they were previously when they didn't know where they were in the queuing system. Lisa asked the

	<p>members what their experiences had been so far with the new system and this was their response:</p> <p>Chris - fabulous, a telephone system we are all after. Funeral music could do with being removed.</p> <p>Susan A – Hasn't used the new system yet, but prefers a queuing system.</p> <p>Debs – Music was ok, good service, preferred it to previous service.</p> <p>Shaheen – Hasn't used the new system yet.</p> <p>Phillip – Suggested some Led Zepplin music!!</p> <p>June – Very good service, it took 13 minutes to go from no 20 in the queue to be answered. Worked really well!!</p> <p>Marilyn – Music was calming, however missed getting offered a triage appointment same as before</p> <p>Beti, Hazel, Murray, Colin &amp; Hazel M, Peter – Haven't used the new system yet.</p> <p>Patient demand is at the highest it as ever been. We have two full time locums working with us and are continually trialling new things.</p> <p>Alice commented that she had issues getting through on the telephone and it took 48 minutes for her call to be answered. Waiting times are excessive so what is the solution. Lisa responded that we do monitor call waiting times and will be able to share a summary once we have sufficient data on the new telephone system. We have more receptionists and double the amount of lines. Angie also commented that a lot of the phone calls being received are regarding the 2<sup>nd</sup> Covid vaccine.</p> <p>Footfall can be used for non-urgent medical issues, along with prescriptions etc. We need to work out a way forward and how face to face treatment will work and what the Covid recovery plan is. Ultimately, we have the patients' best interest at the forefront of what we do.</p>		
5.	<p>PPG Issues –</p> <p>Alan asked how surgery appointments are going to work moving forward. Dr Oji explained that the Partners and Lisa were attending an away day on Saturday 27<sup>th</sup> March to discuss this amongst other things. Expectation is key and that any changes will take time to make. It will be a gradual process and it is likely that some plans will have teething problems.</p> <p>Alice commented that the terminology used by the reception staff needs to be clarified by what is meant by a medical emergency. Dr Oji responded that the correct wording is difficult. If a patient is agony, then the patient should be dealt with that day. If the patient has an issue that could wait 3-5 days then ultimately, it's being able to personally benchmark the situation and provide them with the appropriate appointment, whether that's with a GP or a member of the MDT team.</p>		
6.	<p>Patient Voice</p> <p>Lisa attended the last meeting on 9<sup>th</sup> February.</p>		

7.	<p>AOB</p> <p>Appointment of Officers</p> <p>The last AGM was in October 2019. Due to the pandemic, we have been unable to hold an AGM, however all those who currently hold officer positions have agreed to continue in their posts.</p> <p>Murray wanted to express his thanks and is very grateful for all the hard work the surgery has been doing and continues to do!</p> <p>On behalf of the group, Colin M passed on their condolences to AG.</p>		
9.	<p>Date of next meetings:</p> <p><b>Wednesday 28<sup>th</sup> April 2021, 6.30pm</b></p> <p><b>Wednesday 26<sup>th</sup> May 2021, 12.00pm</b></p>		