

# Minutes

---

## PATIENT PARTICIPATION GROUP

Wednesday 5<sup>th</sup> April 2023 – 6.30pm

Western Elms Surgery    Chair    AP    Minutes    LL

1.	<p><b>Attendees:</b></p> <p>PPG: Alan P, Susan P, Debs, Philip, Peter, Marilyn, Hazel A, Ann, Beti, Colin, Janet</p> <p>Surgery: Lisa, Lucie, Angie, Helga, and Dr Hopkins</p> <p>Apologies: Chris G, Sue J, June Smith, Alice</p> <p>The meeting was held in person at Western Elms Surgery. The meeting was also accessible via zoom for those who could not attend in person.</p>		
2.	<p><b>Matters arising</b></p> <p>Alan started the meeting by welcoming everyone, hoping everyone has been keeping well.</p> <p>Telephone system and prioritisation of calls Lisa informed the group that the new telephone system is due to kick off soon and we have our place on the list. All surgeries across Berkshire West are having new telephone systems. Once the system has been implemented, we will look at prioritising am/pm calls, however things have stabilised in recent weeks.</p> <p>Alan commented that the texting response service is good and allows for patient feedback whether it's good or bad.</p> <p>Debs felt that new telephone system of enabling patients to request a call back rather than waiting in the queue meant that patients wouldn't be sure where they are in the queue and how long they would need to wait for a call back. Patients need reassurance and, in the meantime, we have procured a new system which she feels is not fit for purpose.</p> <p>Lisa commented that the new system will mirror that of Tilehurst Surgery. It will be the fourth telephone system in 10 years. In other surgeries, once all the appointments are allocated, patients are required to contact 111 to seek health advice.</p> <p>PPG Poster – update/website Lucie has tried to contact the school again by telephone regarding the PPG poster. Alan informed the group that the graphic designer is not available but will pursue other avenues.</p>		

	<p>Registrations of temporary residents          Lisa advised the group that if a patient has someone staying with them and they become ill, they are entitled to register as a temporary resident. In addition anyone registering with us now are not require to provide proof of address or ID not required and we are trusting that that they live in the designated area.</p> <p>The minutes were voted as accurate and accepted.</p>		
3.	<p>Guest Speaker – Helga Pearce, Physicians Associate</p> <p>Helga presented to the group regarding her role as a Physicians Associate at the surgery. She has been in her role for two years, works Monday to Friday seeing predominantly F2F patients and is part of the MDT team.</p> <p>The medical model is the same as a doctor but she specifically looks at acute/chronic conditions and blood pressure issues. Alongside this, Helga reviews all the patients at Parkside care home and has a huge passion for geriatrics and paediatrics.</p> <p>Another PA, Rachael is joining the team next week.</p> <p>Something we are looking at doing are setting up group consultations whereby we have a little gathering of patients who suffer from the same condition to enable discussions between patients and how they manage them.</p> <p>Dr Hopkins commented that PAs see all types of patients that a GP would see. This includes taking a medical history and making a diagnosis. They work alongside the GPs and registrars whilst training on the job and building up their knowledge and skills.</p> <p>Janet asked whether the receptionists understand who a patient needs to see. Lisa responded that there are appointments available with a variety of skilled clinicians including GPs, paramedics, and PAs. Paramedics don't see babies; their case load involves less complicated cases. Helga would see more complex patients. There is a degree of filtering appointments according to the relevant clinician's skills. The receptionists liaise with the GP navigator and a decision is made as to who would be the most appropriate clinician. Most of the prebookable appointments are predominantly with GPs.</p> <p>Lisa advised everyone that the group consultations could include topics such as elderly care, babies, menopause, and dermatology. They would take place in the training room. A clinician would run the group, share information, and everyone learn things from other patients about how they manage their conditions.</p> <p>Recently, we introduced a menopause clinic on a Tuesday. To date we have seen 92 patients in 9 weeks and only 3 people have done a repeat visit. The appointments are with Sally Beeko, the pharmacy manager and are longer consultations. The satisfaction rate is fantastic so please spread the word about the clinic. Some patients feel isolated when they have these conditions so it's good to talk.</p>		

	<p>Marilyn commented that we could do a fibromyalgia group consultation. Lisa responded that we will be prioritising specific conditions and some slot into this model more easily. It's going to be work in progress and they are a clinical appointment rather than more social and share.</p>		
4.	<p><b>Financial</b></p> <p>Monies received from the following to be banked:</p> <ul style="list-style-type: none"> <li>• Easter raffle - £45.00</li> <li>• Christmas raffle - £56.00</li> <li>• Book money - £121.85</li> <li>• Total - £222.85</li> </ul>		
5.	<p><b>Surgery News</b></p> <p>FFT – statistics from January-March 2023 Lucie provided the group with data for the last 3 months, including a comparison over the last 6 month.</p> <p>Beti commented that it was very interesting reading. Debs thought the data over the last 3 months was really good and having the ability to do it has made all the difference.</p> <p>Lisa responded that we have one of the highest response rates of return and we have a product that works and patients want to respond to.</p> <p>Recruitment Lisa informed the group that Dr Camilla Arthur will be increasing her sessions in the coming months. We have a male salaried GP starting on 1<sup>st</sup> July doing 8 sessions, Rachael, our new PA will be starting next Tuesday 11<sup>th</sup> April. We also have Anne, who is our new mental health worker doing a joint role, half with BHFT.</p> <p>In the pharmacy team, we have Haseena and Nasira who are pre pharmacy technicians who will be working with us for 2 years. This is a new initiative between GPs and pharmacies whereby they complete their apprenticeship doing a hybrid role between the two. We are working with Oxford Road pharmacy where they will be working in the pharmacy, dispensing etc.</p> <p>Currently social prescribing is our biggest problem but we are busy recruiting more HCAs, receptionists and hopefully more GPs.</p> <p>Alan commented the new receptionists are doing a great job!</p>		
6.	<p><b>Patient Voice</b></p> <p>The most recent meeting took place on Tuesday 21<sup>st</sup> March.</p> <p>The minutes have been circulated for members to read. The feedback was around whether the meetings serve a purpose and are they are constructive.</p>		

	<p>Lisa informed the group that Channel W, a free to view channel is currently airing a programme "First Time Medics," a fly on the wall documentary filmed in the Emergency Department at RBH.</p> <p>Philip asked whether the surgery will be offering a Covid seasonal booster. Lisa advised that the practice has offered to do the housebound and the elderly and requested a fixed amount of vaccines, however it was declined.</p> <p>Lisa commented how desperate some PPGs are for members and some have completely disappeared.</p>		
7.	<p><b>AOB</b></p> <p>There was no AOB.</p> <p>AP closed the meeting by thanking everyone for attending.</p>		
8.	<p>Date of next meetings:  <b>Wednesday 7<sup>th</sup> June @ CL @ 1.00pm</b>  <b>Wednesday 2<sup>nd</sup> August @ WES @6.30pm</b></p>		