

Woosehill Patient Participation Group

Minutes of the Meeting on 3rd February 2022

Present: KC, JB, MT, RS, PP, PF, NH, JN, ST, JJ, RB, CA, KL

1. Our new members were welcomed
2. Apologies from PE, JB & MT
3. The minutes were accepted
4. Video appointments are now possible but this is not our own GP's – it is all remote. Cannot be used by people who do not have an iPhone! No app is involved but it was felt that some people would be excluded. It was explained that this allowed 60 more appointments a week. These be either telephone or video. Obviously, this is not ideal but it is through an external company. It could be looked at as to whether a patient would prefer a video appointment or to speak to one of our own medical staff.
There were no other matters arising
5. The new members explained why they want to join the group & gave a potted history of their life journey.
6. The rest of the group introduced themselves so that faces could be put to names.
Size of committee was discussed as the original group had 24 members – this was unwieldy & so a limit of 12 was put on the membership (this is the patient membership). A quorum is needed for all meetings & this is 4.
ST asked what they should say if people want to join the PPG, it was stated the Doctors should not have to deal with this.
Therefore, we need to resurrect the PPG notice board with a telephone number or email address which the patients could use.
We also need to have a better cross-section of the patients (particularly with regard to age – the present membership consists of retired patients). It was then suggested that if a younger person was recruited then one of the older members should retire to enable them to join.
A problem with this idea is that younger people are either working or looking after children at this time of day (lunch-time). Government guidelines state that the meetings could be in the evening!! This means that the problem would not be there.
7. The story about the letter's origins, in a way the idea was to reassure patients, it should emphasise the fact that the number of patients going up as appointments are too.
The practice has not been closed during the pandemic and staff are not working from home unless isolating.
Face to face is not out of the question but first a telephone appointment is made to try to see if the problem can be sorted this way but then the patient may be brought in if needed.
The views of the group – we are patients (whose viewpoints would be essential) & critical friends looking at the letter. We tried to keep the essence of the letter but to use simpler language & shorten it as no-one reads more than one page of A4. We looked at Q&A format but felt that it would make the letter much longer.
The letter is our feedback to the partners BUT we need to remember it is the Partners' letter.
Several asked whether different items could be added to the letter – we need to be careful not to overload it.
One item was felt very important was to produce 'An Idiot's Guide to Making an Appointment' BUT this was felt to be for a separate missive for more impact.
The receptionists are now trained to be able to sort out the patient's needs, however most patients do not understand this.

Length of speaking to the receptionist may take some time as telephone calls vary in length - they can be very complex in nature so we need to be patient.

The list of medical staff on the back of the letter was felt to be an essential part of the letter. But it might give wrong impressions eg. Pharmacists.

We need to educate our patients, therefore staff roles could be on the website & possibly expanded on the back of the letter.

Partners to look at roles of Staff this will be addressed, the tone of letter (to try not to be defensive), & notice board which needs to be updated are some of the issues. Then how to get the letter out? (household rather than individuals, suggestion that PPG would volunteer to get deliver letters - data protection makes it impossible)

ST suggested message to patients to give link to letter, 'Can we know the number of hits?' was a question – this to be investigated. The text message does not need to be sent out each time – just a reminder to look for updates every..... The updates could be sent to PRG

A Door drop was suggested but that would be difficult to keep to patients when we are not allowed access to addresses – every house would be too much.

Perhaps we should put the letter up in the waiting area – but numbers here are greatly reduced.

Patients on PRG to be sent letter.

We could distribute the letter at mothers' groups & flu-type clinics (or any other group)

On the screen? Would it be able to be read? The screen could inform that there is a link.

It was thought that a link with regular updates was the best idea. This would reach all patients with a mobile registered. Facebook was also discussed – it would still need updating, we had one which was not compliant so was taken down.

8. Patient Reference Group, no-one remembers any contact with them except that JJ sends all the information from NAPP every month. There are probably about 500 in this group. To be able to be a member they have to sign to say that the practice may use their email address. (Data protection). It was suggested that at flu clinics we try to ask/persuade people to join. The idea of the reference group is to help get an overall view of the the patients views. Someone on the admin team is needed to oversee this group & this causes more problems. A thought is to send an email to ask if they are still interested & to reply a message 'Out' if not.

Perhaps a Newsletter from the PPG should be sent to the members of this group regularly to keep them updated. Some surgeries have PPG members who work on newsletters in the surgery or talk to patients, this will stop word of mouth stories bandied around – Rumors are rife! A survey was usually done by this group but don't know when the last one was. The minutes of PPG meetings are published on the website

9. We now have 15 receptionists + RB; Medical Staff no change, locums now no longer thought of as temporary.

10. **Burma Hills**

There were some comments from Simon (third on list of invitees) re Burma Hills. But it is now no longer working as a medical centre, & is being used as a Covid centre. All doctors & Nurses have or are leaving. Burma Hills was taken on by Wokingham Medical Centre (they run as part of a large group) & now all patients are being sent to Wokingham Medical Centre please remember this is all word of mouth. The eConsult system used there has many flaws, ST & RA examined it, firstly there are no receptionists all requests need to be on line this means that you may speak to a doctor elsewhere in the country – then all requests HAVE to answered by 18:00 hours the next day – there is no cap on the number of emails. All of this makes it not a feasible idea.

Satellite Surgery for Woosehill

Woosehill has asked to setup, staff & manage another surgery CCG said NO! because not allowed as one reason is that there are surgeries nearby who have been funded for large numbers of patients, another is that we were not built to have satellite surgeries, even

though we would fund it.

Redisussing the PPG Board

NH volunteered to set it up, ST to set up a generic email with a password (this to be given to KC). All members of the PPG are requested to send a head & shoulder photograph to MM as NH does not know all names & faces.

A comment was made about the position of the PPG board but it was felt that we should update it first.

Question from Patient (PP)

Emails not getting through re requesting medication (even when accepted). RB will investigate. Lots of discussion re Morrisons change of staff.

My GP

It was noted that MyGP is a problem in that appointments were cancelled when not true & now need a code to get test results, this changes without notification.

Appointments

A question re the appointments was given & RB offered to ring anyone having real problems with the appointment system, she was happy for her phone number to be passed on.

Observing Reception at work

RB offered for anyone interested to be able to observe the working of reception, especially at 8am – JB & MM have done this & found it very useful

Attendance & Apologies

Anyone know about TH not seen & no apologies MM to send an email. Following this a suggestion of a register of attendees to be kept (MM) was made.

Flu Vaccinations

Flu vaccinations discussed & there were not many PPG members offering help this year. First time this has happened – only 4 were available this year. These names sent to KL who sorts the lists. Second lot of vaccinations – only one member was asked to help, even though more offered. As every year staff used members of own family as assistants. This is not new as implied by one member. Normally there are 4 Saturdays & there have always been 2 members available for each ½ day, the dates are usually sent to MM for publication & then sent back to KL for sorting the rota (this rota has sometimes been done by MM). This year only 2 Saturdays were sent out to us & then a further set of dates sent by RB (not KL). The person who helped there was new to the PPG & did not realise that staff seem to prefer to have family checking patients in & entering the details of the vaccine. Interesting to note that as a volunteer for COVID that job was done was done by those volunteers at Rose Street pharmacy.

It was suggested that a questionnaire was ready for the next set of Flu Vaccines, this could be only ½ a page of A4 as the patients move through at a fairly fast rate. The last question could be sounding out of the membership of the PRG.

New Message for telephone booking

There is a new message to say that all appointments are booked but to hold if it is an emergency, this only trips in if all appointments have gone.

Compliment

A compliment to the staff, this was that most of the patients were known by first names by the staff as they walked through the door.

Funding

We need to remember that we get far less funding than the north of the country.

We should also remember that money is paid not on today's staffing but about 1 year later.

Number of Appointments

From the figures supplied by JJ, appointments per patients booked have been almost trebled and the number of patients has increased by over 2000 over the same time period (5 years). A lot of these new patients came from new housing & Wokingham Medical Centre. When this building was built the number of patients was approximately ½ of today's number.

11. Date of next meeting – May 5th at 1pm

cc: KC, PE, JB, MT, RS, PP, PF, NH, JN, ST, RA, JJ, CA, RB, KL & MM

**Woosehill Patient Participation Group
Agenda for the Meeting on 12th May 2022 at 1pm**

1. Minutes

2. Matters Arising

3. Any Other Business

4. Date of next Meeting

cc: KC, RS, MT, PP, PE, JB, PF, NH, JN, RA, ST, RB, KL, JJ, CA & MM