

TADLEY PARTICIPATION GROUP (PPG)

Minutes of a Committee meeting held on Wednesday 21st November in the Conference Room at Holmwood Health Centre

Present : Dr Hogan, Gill Herbert, Heidi Williams, Sandra Northway, Alan Chambers, Claire Chambers, Jean Chapman, Sheila Gunnell, Hazel Metcalfe, Gill Tomlins, Tony Wicks, Kate Wright and Graham Wright.

1. **Apologies:** Mary Cawley, Alex Heales, Nicky Heales and Val Turnbull
2. **Minutes of 5th September** These were accepted as accurate.
3. **Matters arising**

Additional representatives for the NAHH CCG PPG are needed. **Action GT**

Happiness Lab This group is now running the third set of sessions in the Salvation Army hall but a different venue is required for the next set. CC reported that the sessions have been found useful by the varied clientele who have attended. She wishes to investigate whether a room at one of the surgeries could be used during an afternoon.

Action HW to investigate whether a room at one of the surgeries could be used during an afternoon.

Positivity sessions have been held, led by CC, for the administration staff at both surgeries as staff are currently experiencing problems caused by a minority of patients. The aim is to help staff handle these situations, remaining calm and positive.

A discussion was held as to the format for the PPG meeting to be held on February 2nd which will provide a second opportunity during the year for patients to discuss issues of concern with PPG Committee members. There will also be an opportunity for patients to sign up for on-line access and use a dummy version of e-consult.

Action HM to email all committee members to establish their availability on this date and **GH and HW** to organize the resources and venue.

The recent letter to patients explaining the current situation within the practice has been received positively. TW suggested the December Newsletter might contain a progress report.

Action HW

Community Lunch

GW attended this to promote the PPG and found the letter had been well received (see above) by those present who had read the email that morning. One query arose over access to EMIS by those over 13 but under 16 as currently neither the teenager nor their parents can have access. **Action GH and HW** to consider and report back.

The queue in Reception is still able to hear information being discussed by staff on or behind the Reception Desk. The quotes received for alterations to the building were too expensive so other options are being sought. The barrier has organized the queue but the length of the queue often means those unable to log in for their appointment on the screens often end up being late for this. The second screen at Holmwood (on the right as you enter) may be moved next to the original one as people don't see it in its current position. There is also felt to be too much signage around the original screen. A number system for the queue was suggested

so people could sit and wait to be called to Reception with the numbers appearing on the rolling screen. **Action GH** to survey the purpose of those queuing

4. Matters raised by patients

An email had been received by the Secretary requesting further consideration of the policy regarding access to letters and other documents from the hospital being available through Patient Access. This Practice policy is non-negotiable as the risk of a lapse in confidentiality is not acceptable.

5. Sub-Committee reports

The Terms of Reference group - GW reported on this Group who held meetings and email conversations producing a draft revision of the TOR which all Committee members had considered prior to this meeting. It was felt to be an improvement on the previous version and was therefore accepted with the proviso that further updates may be required from time to time.

Booklet Group KW is managing this Group which will be holding their first meeting in January with a view to the draft version going to the Practice for consideration in the second quarter 2019.

Telephone systems TW had previously circulated two documents to all Committee members after some thorough fact-finding. He had also held a meeting with HW resulting in some bugs being fixed already. The Practice accepts that having more staff available to answer the telephones would give patients at home a more positive response and reduce the number arriving at the surgeries. HW felt that the e-consult programme might help. Dr Hogan said that some practices ask those seeking a non-urgent appointment to phone after a set time and GH suggested that releasing appointments later in the morning would help people to use this successfully.

A discussion was held about various types of appointments. In the triage system there are now two duty doctors and two nurse practitioners working on the list each day. The receptionists now request additional information about the patient's problem in order that the NPs can identify those patients they can deal with, therefore speeding up the queue.

Appointments Group CC reported back that this group has ceased meeting having held discussions with HW. Their findings were all issues of which the Practice was already aware and several new initiatives are already improving the appointment situation. As stated above NP are taking some of the duty calls every day which is particularly useful on a Monday when additional doctors are no longer needed to support the two on duty. This means more appointments are available to book on Mondays. Three long term locums have been employed so the book ahead system has improved slightly. The group found that the urgent only appointments over the Christmas period last year worked far better than systems at other practices, so it will be repeated this year.

Parking Group HM reported on this group and their findings were discussed. All patients interviewed were concerned that the size of modern cars versus the small spaces caused altercations and anxiety. They were unanimous in requesting larger, but fewer, spaces. The Practice had already decided to move the disabled spaces so patients do not have to cross the way in to the car park and a suggestion was made that Parent and baby spaces might be welcomed.

Factors that would make the car park less difficult were found to include:

- Increased use of online ordering of repeat prescriptions or electronic prescribing (half of all vehicles entering Holmwood Surgery were attending the pharmacy or dispensary only)
- Leaving the non-space at the corner of the building free to make passing easier
- Using the spaces at the far end of the car park all the time
- Keeping the lay-by for emergency vehicles or drop-off only

It was decided to produce a summary of the work done by each of the sub-groups. This will be included in the December Newsletter. **Action GW.**

6. Committee Matters

It was felt that these had been fully covered in previous items.

7. Information from the Practice

For the recent NHS Self- help week posters had been displayed. HW said that all documents now arrive as PDF files and must be printed off for distribution and display. AC had printed off some leaflets which look useful for the Booklet Group but the cost of printing would be too costly for the Practice to print copies for waiting rooms. They are available on the Practice website under Family Help. AC said it would be useful if patients checked out the information available before phoning for an appointment. Some local practices will be requiring all patients to complete e-Consult before requesting an appointment and offering telephone support for those who cannot complete it on line themselves.

Tadley is part of the Rural West Group with Overton, Oakley and Kingsclere practices. Together they share a Frailty Nurse who is already working with vulnerable patients either on their release from hospital or to prevent them from being hospitalized. She provides an Individual Care Plan for each patient.

The next planned provision will be a shared Social Worker and there is an opportunity to involve the Red Cross in short term support for those leaving hospital with support needs.

A bid for a Shared Physiotherapist has been agreed for a pilot project offering patients the opportunity to self-refer for straightforward conditions. The organization of this is still being discussed.

The Tadley Practice has already employed a pharmacist and in future she will have twenty hours a week working on annual prescription reviews. She will also be involved in medical management including post-hospital variations.

8. A o B

The CQC Inspection has still not yet taken place. The PPC will provide committee members at short notice to meet with the inspectors.

The Citizens Advice Tadley Advice Service Manager and the Care in the Community Adviser have offered to give a short talk on the work of the Tadley Office and answer questions. It will give both the medical Partnership and Citizens Advice Tadley the opportunity to work collaboratively and will, we hope reduce the burden of the Practice.

Action KW

GT queried the fact that you can no longer order two sets of medication, e g when you are going on holiday. GH and SN felt that this is a misunderstanding by a new member of dispensary staff and will investigate. **Action SN.**

The meeting closed at 8.45 p.m.

Date of the next meeting: Wednesday 20th February

H. Metcalfe
24/11/18