### PATIENT PARTICIPATION GROUP





**Chair**: Spencer Oates (Deputy Practice Manager)

Minutes: SO

Members Present: SR, DR, JM, CL, KS, JS, TS, MF, BF, MK, PM, JA, BT, MT, JW

Apologies: Dr Tim Williams (GP), CD

SO opened the meeting by thanking everyone for attending and confirmed group agreement with the content of the minutes from the last meeting.

TW sent his apologies for not being able to attend, but would be present at the next meeting, as did CD.

## 1. New Telephone System

The practice has introduced a new advanced telephone queuing system with an auto-attendant. This would give patients the options of choosing where there telephone call would be directed to. The options are 1) Cancel appointment, 2) Repeat prescriptions, 3) Test results, 4) Appointments and Home visits. Some of these options will ask patients to call back during certain times to allow our reception team to concentrate on answering requests for triage and appointments during our busy times, therefore reducing the length of time it takes for a call to be answered.

The system will also place calls in a queue that informs the caller of their numbered position.

2 members of the PPG expressed how they had used our auto-attendant recently and found this very helpful. The general consensus was that this was a positive move in terms of practice improvement, and could be used for health information and details about upcoming flu clinics.

# 2. <u>Beighton Health Centre move update</u>

The group were discussed how the surgery had now completely transferred all services to Sothall Medical Centre, and the keys for Beighton Health Centre had been signed back to NHS Property Services. The move had gone hassle free and the surgery was now settling into one-site working.

A member informed the group that they had received a prescription that contained details of appointment availability at Beighton Health Centre. This was an oversight on the behalf of the practice by means of an automatic print setting on the prescription, and the group were ensured that this would be rectified as soon as possible. This has now been rectified.

## 3. Staff Update

Dr Sarah Yacomeni, currently working as a Locum GP for the practice would be joining Sothall Medical Centre as a GP Partner starting in September. This would mostly be to cover the sessions of Dr Julia Bowers, who has recently retired.

Dr Clare Baglee was joining the surgery as a Salaried GP, also starting in September. This would be for 6 sessions a week.

Hannah Waring, who currently works as a Receptionist and Phlebotomist is due to undertake a Healthcare Assistant Apprenticeship which would enable her to work alongside the nursing team and provide services in line with our current HCA staff. This means the surgery can continue to work towards the reallocation of services amongst clinical staff in line with the GP Forward View and ultimately free up GP time to concentrate on the more complex clinical matters.

Morgan Oates has been employed as a Receptionist to cover the hours that Hannah Waring would be spending undergoing her HCA training.

# 4. Care Navigation

Many members were already aware of the process of Care Navigation as this had already been mentioned at a previous PPG meeting. The group were informed that this process was still being rolled out across the city and that it would commence soon. We do not have an exact date for this yet, but our reception staff are undergoing training in care navigation at the moment. One member of our reception team would be undergoing further extensive training to become Practice Champion for Care Navigation. This person would be the go-to person for any queries regarding care navigation within the practice.

A message would be played on our auto-attendant asking patients to provide the reception staff with details of their reason for calling. It was highlighted that a couple of members of the group would not be happy to provide details of their reason for calling to our reception team. The reason for us asking our patients to do this would be to make sure they are signposted to the right service/person, in the right place, at the right time.

Under care navigation the reception team will be able to signpost patients to services that provide the help/support they need with a much shorter turnaround than going via one of our clinicians initially. NHS Sheffield CCG were already trialling care navigation with Physiotherapy for back pain, whereby patients that meet the criteria can be seen by a physiotherapist much sooner than they would be if seeing a GP first. The initiative envisions that patients would be able to see a physiotherapist within 24 hours, which could take much longer if seeing a GP first.

The group in general thought this was a good idea and would save both patients and the practice time.

## 5. The role of the surgery when cancelling holidays.

This agenda item was added by a member of the group. The question was how do patients cancel holidays and what role does the surgery play in this process.

The patient would need to contact their holiday insurance provider when they are aware that they need to cancel their holiday for medical reasons. The insurance provider will take details of this and then send a claim form for the patient to complete. This form would then either be sent back to the insurance provider who would contact the surgery for further details, or the patient would bring the form to the practice for completion by a GP and send back afterwards.

A claim would not be substantiated unless medical history was disclosed by the patient at the time of booking the holiday.

This process would attract a fee payable to the practice as this work is classed as a non-NHS service and therefore not covered by the GMS contract.

#### 6. Practice Newsletter

A group member asked whether the practice newsletter was still needed as the practice was doing such a good job with distributing information already with the introduction of the patient information screen in the waiting area, active social media and being open and transparent with the information being given. The group asked that the transitions of the Patient Information Screen presentation be slowed down even further as some people were still struggling to fully read this information. This was agreed and has now taken place.

This was put out for discussion amongst the group and it the general consensus was that the newsletter was required as a further method of communication for those people that may not use the alternative methods, but it would benefit from a rework, in terms of style and content, possibly moving to a single double sided sheet with updated information such as that given to the PPG.

Spencer organised some time to meet with KS to look at the options for this. KS was thanked for continuing to provide this service and the practice was very grateful for his time in doing so.

There being no further discussions the meeting closed at 19:35.

Next meeting 4<sup>th</sup> October 2017 18.30 at Sothall Medical Centre.