**Sunbury Health Centre Group Practice (SHCGP)**

**Patient Participation Group (PPG)**

**Minutes of a Core Group Meeting held on 5 July 2022**

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| **Present:**  **Sunbury Health Centre: Richard Fryer (RF), Dave Gill (DG), Sasha Thurgood (ST)**  **PPG Core Group: Paul Thompson (PT), Polly Healy (PH), David Buttler (DB), Alison Richardson (AR), Jim Snaith (JS)** |
| **Apologies:**  **PPG Core Group: Neil Huntingford (NH), Jenny Downes (JD)** |

**Welcome**

PT chaired in the absence of NH and welcomed everyone to the meeting.

**Minutes of last meeting and matters arising**

There being no matters arising, the minutes of the last minutes were approved.

**PPG – The Way Forward – Communication with Patients**

Finding additional ways of communicating as well as making better use of existing mechanisms can only help provide information and feedback to the patient population.

JS is currently drafting the monthly articles for Sunbury Matters, and confirmed he will ensure that an article is ready for the next (September) issue.

PH confirmed that over the previous 28 days there had been 194 ‘hits’ on the PPG website page.

RF noted that Surrey Heartlands posts information on the SHC Facebook page, which helps to highlight national health issues and campaigns.

A member of SHC staff has suggested an opportunity to make more effective use of Sunbury Facebook pages, which have a wider regular audience. Patient comments posted there can be complimentary, but some are not. Sometimes issues are raised that lead to improved practices within SHC, but with no effective means of feeding this back. There is also a lack of any medium to get messages out quickly.

Potential solutions were explored, and it was agreed that:

* Any pertinent issues addressed - or Sunbury Facebook page comments responded to - by the practice will be posted initially onto the practice Facebook page. Both SHC and PT will monitor Sunbury Facebook pages for issues that might require specific action.
* Once responses/changes have been posted onto the practice Facebook page, PT can draw attention to these on the Sunbury Facebook pages, and can also post a link to the PPG website where appropriate.

**SHC Update**

**Patient Requests**

As agreed at the last meeting, RF provided some statistics on the level of patient requests. Headline numbers are that over the previous 12 weeks a total of 13,787 requests were made online with a further 15,190 telephone calls answered. The total of 28,977 requests averages out at 2,415 per week. Mondays and weekday mornings remain the ‘peak’ times for requests.

PT asked if there was any evidence that more patients are making requests online than previously, but RF could not confirm if this is the case due to variables in the data.

The level of patient demand is managed initially by 14 administrators (mostly part-time), plus 3 care co-ordinators, supervisors and a manager. The practice is recruiting 3 additional staff to manage the workload.

Whilst staff holidays can be factored in, absences due to sickness cannot. Covid continues to have an impact on staff absence, with a requirement to remain off work until people test negative.

Absence amongst staff responsible for managing patient requests can quickly impact the practice’s ability to keep on top of the workload, whilst swapping face to face appointments if a GP is off sick provides greater challenges than reassigning telephone appointments.

RF commented that around 90% of patients attending the practice are adhering to the request to wear face masks.

**Broader access**

The Pharmacy service has now been launched, whereby patients with minor health issues can be referred for an appointment. Many of the local pharmacies have ‘signed up’ to deliver the service, for which they have received funding. It is too early to say how well this service is operating. The pharmacy reports the outcome of appointments back to the practice for patient records. This will be a way of monitoring that patients have been correctly triaged for this service.

The practice continues to make good use of LIVI as a quick and effective way of patients receiving a consultation, and is proving to be very popular.

Clinics continue to run at Ashford and St Peter’s Hospitals.

**Extended and Improved Access**

DG explained that GP practices will be contracted to offer ‘extended and improved’ access to patients from 1 October, with proposals being approved by the CCG. SHC is part of a Primary Care Network (PCN) - working together with three other local surgeries – and will build on a solid track record of partnership working to ‘pool’ resources and deliver what is required under the contract.

Patients will have access to 8 a.m. to 8 p.m. service Monday to Friday, plus 9 a.m. to 5 p.m. service on Saturdays. In addition to the extended hours, some of the services that stopped during the pandemic (e.g. minor surgery clinics) can hopefully restart.

The clinics being run at Ashford and St Peter’s hospitals will be pivotal in offering extended hours, with two salaried doctors from SHC already partly working in them. These clinics have access to the surgery notes to support patient consultations.

SHC is mindful of the need to ensure that some frail, vulnerable and elderly patients will need to continue to access support direct from the practice.

In line with a requirement for a mix of online and face-to-face provision, additional LIVI services will be purchased.

There is an expectation that GP practices will engage with Patient Participation Groups (PPGs) as these services develop.

**Service development**

The practice (and PCN) continues to review services and how they are managed and delivered to make best use of resources in the face of increasing demand.

The Blood Pressure at Home service is proving to be successful, with more patients being monitored more quickly and those requiring further clinical support being identified. The practice is looking at opportunities for other chronic diseases to be safely monitored out with day-to-day surgeries, thereby freeing up GP time for patients with more immediate and/or urgent needs.

**Covid ‘booster’ and ‘Flu jabs**

Any Covid ‘booster’ programme will be run as previously, with patients attending local venues.

The ‘flu jab programme, however, will hopefully be run at the practice starting in October.

**Performance Targets**

From 1 April, GP practices have been expected to provide services at the pre-pandemic level (despite ongoing Covid staff absences), and government targets for certain chronic diseases have been back in place for 3 months. SHC never stopped working on these areas although there was inevitably disruption. The first quarter results are expected shortly.

**Staffing**

As well as increasing the administrative team to help with managing patient requests (mentioned above), 2 trainee doctors will be joining the practice in August for a year (working under the guidance of Dr Gill and Dr Jopling).

**Premises and technology**

There is a requirement for further upgrading of technology to cope with increasing demand, and this will require the practice to ‘shut down’ its system to update its computers for a short period. ‘Down’ time is always kept to the minimum required.

The bid being made by SHC for CIL monies from the Council is due to be heard by the Joint Committee in July.

**Date of next meeting and dates for 2022/3**

The next meeting of the PPG Core Group will take place on **Tuesday 27 September** at 3.30p.m.

The provisional dates for PPG Core Group meetings for September 2022 – July 2023 were agreed.

Dates for Open Meetings remain provisional (due to Covid), and the date of the March 2023 Open Meeting has been notionally brought forward one week to Monday 20 March 2023.

It was suggested that NH liaise with RF on the feasibility of holding the October Open Meeting nearer the time.

All agreed and provisional dates will be sent to PPG Core Group members with these minutes.