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

**Patient Participation Group (PPG)**

**Minutes of a Core Group Meeting held on 7 March 2023**

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| **Present:** **Sunbury Health Centre: Richard Fryer (RF), Dave Gill (DG), Sasha Thurgood (ST), Cassie Robinson (CR) - Guest** **PPG Core Group: Neil Huntingford (NH), Paul Thompson (PT), Polly Healy (PH), Alison Richardson (AR), Jim Snaith (JS), David Buttler (DB)** |
| **Not present:** **PPG Core Group: Tom Fidler (TF)**  |

**Welcome**

NH welcomed everyone to the meeting. Apologies were received from Jenny Downes, who has decided to step down from the PPG Core Group. NH stated that should Jenny be able to attend meetings in the future, she is welcome to rejoin the Group.

NH reflected on the contribution made by a founding member of the PPG Core Group, Dorothy Linter, who sadly passed away earlier this year. She was a valuable member of the Group and a lovely lady, and will be missed.

NH welcomed CR to the meeting. CR will play a vital role in the forthcoming patient survey, and her input into discussions from this point on is important. She also plays a key role in the analysis of patient feedback via Family & Friends etc.

**PPG – The Way Forward**

**Communication with patients – Sunbury Matters & PPG website**

JS has produced the latest article for Sunbury Matters, with the numerous service developments at SHC taking a full page in the March edition. JS stated that as he is now working almost full-time, he will need to agree the content of future articles earlier than has been the case.

It was noted that Sunbury Matters is not delivered to the entire patient population of SHC. CR agreed to post a link each month on the SHC Facebook page to extend the ‘reach’ of the articles.

PH said that the past month was the first in which not a single patient had contacted her via the PPG website for help in navigating the SHC website. There had been 105 visits to the PPG website during the past month.

**Patient feedback - Survey**

Following feedback from PPG Core Group members, the latest draft version of the patient survey was circulated and discussed. The remaining incomplete sections were agreed on.

Also circulated was a draft timetable for activities needed throughout the preparation for, execution, analysis and feedback of the survey. Two options for the timing of the survey were discussed, and May/June (for a 4-week period) agreed as being most suitable for the survey to run. Once that had been agreed, further dates were fixed for preparation, analysis and reporting. Responsibilities were allocated against a number of the activities, and the timetable will continue to be updated by AR.

RF confirmed that Survey Monkey has a monthly subscription, and he will arrange for subscription for a few months, with a single administrator license.

SHC has a positive track record of acting on patient feedback where it is practicable to do so, and it was agreed that this needs to be highlighted in communication about the patient survey to encourage patients to take part. Past examples include the reconfiguration of the reception area to be more welcoming, the time taken for letters (e.g. referrals) to be produced reduced from weeks to days, and the adoption of an electronic prescription system and the recruitment of prescription clerks which in turn has led to the Practice having its own Pharmacy team.

**Art Work for patient waiting room**

The PPG Core Group have been aware of the need to refresh the art work in the patient waiting room, and SHC has also had some patient feedback stating that the waiting room could be more welcoming. NH has been in contact with an artist, and will arrange to meet with her to discuss ideas.

**SHC Update**

* The Practice is developing a ‘Health Pod’, having purchased an electronic system that patients can use to run certain tests e.g. blood pressure, record measurements such as height and weight, and signpost them to potentially useful interventions or health programmes. Results are uploaded onto patient notes. The ‘Health Pod’ has the potential to free up appointment time and reduce administration. SHC is determining how best to use this resource, possibly by linking it to specific patient appointments/reviews.
* There continues to be a focus on achieving Chronic Disease targets, which need to be reported by the end of March. SHC has made significant progress in reviewing patients with e.g. high blood pressure, diabetes, COPD, dementia, learning difficulties and mental health issues.
* Work continues to ensure a more holistic and supportive pathway for patients with mental health problems.
* A ‘flu campaign continues, as the Practice still has some vaccines available.
* Blood Pressure reviews have been extended to pre-diabetic patients.

**Staffing**

Staffing levels at SHC are stable. Dr Adams will be returning from maternity leave soon, and work 8 clinical sessions per week over 4 days.

From April there will be monies available to recruit additional healthcare professionals e.g. Paramedics, Care Co-ordinators, Nurse Practitioners. Discussions are taking place to determine the greatest need. The lack of space within the Practice is problematic, but SHC is keen to recruit to help meet patient needs and will continue to use rooms on a ‘hot desk’ basis.

RF reminded the meeting that two strike days for Junior Doctors are imminent, and appointments could be disrupted as SHC currently has 3 of them.

**Property & Systems**

RF has signed what he believes to be the final letter required to access the CIL monies ringfenced for the Practice.

Surrey Heartlands are re-contracting for the provision of certain Practice electronic systems, with a decision on a supplier expected within weeks. This may, or may not, have implications for things like the SHC website (including the booking system) and texting service. NH and RF have had conversations with Nina Crump at Surrey Heartlands about it, and Nina has requested a visit to the Practice to discuss it further. NH confirmed his willingness to join the discussion.

A communications company contracted by the NHS has been supplementing the SHC Facebook page with information about national campaigns. In the past this has been at no cost to the Practice, but in future will be charged for. It is difficult to know the degree to which patients access this information. RF is of the view that it may not be cost effective to continue with it, and the content of the Practice page will be managed internally.

**Comments, Complaints and Suggestions**

From the Family & Friends feedback mechanism in February, out of a total of 3,041 face to face appointments where feedback was requested, 405 responses (13%) were received. 94% would recommend SHC, 3% were unsure and 3% would not recommend SHC. 244 responses had comments attached.

No strong themes are emerging from this feedback so far, although some comments related to appointments running late, requests for the waiting room to be more welcoming and the seeming lack of availability of blood tests. Conversely, there were positive comments relating especially to the nursing team and patients noting that they had received a consultation very quickly.

There were four complaints lodged during February. One of these has resulted in the Practice testing a new procedure to offer a quicker and more seamless service to patients. On occasion following a consultation, a Practitioner may direct a patient back to reception to arrange further consultations/tests. As patient notes are not necessarily updated immediately, reception staff may not be able to process these requests effectively. The Practice is therefore asking Practitioners to provide patients with a handwritten note to take to reception.

SHC is aware that the Family & Friends Test does not cover all appointments, and not every patient has a mobile ‘phone. To enable more patients to provide feedback, the Practice is looking to introduce a quick and easy paper feedback form.

**Questions & Answers**

PH has been approached by the Chair of the Patients’ Forum Ambulance Services (London) Limited, asking if a Paramedic based at SHC would be prepared to present to the forum on their work. RF agreed to consider it.

AR has become aware of letters from NHS England, advising some people that they might have a health condition that could make them eligible for Covid intervention drugs should they contract the infection. Whilst there has not been any noticeable influx in patients requesting more information, a GP appointment can be made if a patient wishes to discuss the issue.

**Date of next meeting**

The next meeting of the PPG Core Group will take place on **Tuesday 2 May 2023** at 3.30p.m.

**Actions**

* AR to agree final survey content with NH and PH and circulate to the PPG Core Group along with the amended timetable.
* RF to subscribe to Survey Monkey and CR to familiarise herself with it.
* NH to meet with an artist to discuss new art work for the patient waiting room.
* RF to respond to PH on the invitation from PFLAS for a Paramedic to present to a meeting.