NEWBRIDGE SURGERY PATIENT PARTICIPATION GROUP MEETING MINUTES OF THE MEETING HELD ON Wednesday 11 January 2023

PRESENT

Patient Representatives: J Hancox (Chair), R Ashwell (Vice Chair), C Patel (CP), C Dymond (CD), J Westlake (JW), J Evans (JE) K Ong (K0)

Practice Representatives: Dr G Pickavance (GP), V Roddie (VR), A Inns (AI)

		ACTION
1	Welcome & Introductions – each person introduced themselves and everyone around the table introduced themselves. New members were welcomed by the Chair.	
2	Apologies for Absence – S Corbett, B Pickering, J Evans, L Etherington, D Scroop, W Clements, P Boswell, J Horton, L James,	
3	Minutes of the last meeting – Agreed as a true record	
4	Matters Arising –	
	GP/JH asked the group to think about what health campaigns they wish to help promote and media to help promote these such as sexual health, and consider using facebook or newsletters to promote this. Possibly need volunteers to circulate the newsletter across the area with using pharmacy and library. CD volunteered.	ALL
	Newsletter JH asked for volunteers to come forward to assist with compiling and distributing a Newsletter. JH wants to know how information is communicated to patients who do not have access to IT as they might miss out on important information. Potentially volunteers to put up hard copies of newsletter in libraries or shops etc.	ALL
	Spin off group to discuss this with the group before the next meeting.	ALL
5	Items from the Chair <u>Drop in sessions for NHS App</u> To be arranged for the patient group first as a pilot before going live with further sessions. ICB asked to assist with NHS app drop in sessions. Awaiting confirmation. IT Manager for PCN invited to attend meeting but could not attend – but can help with drop in sessions.	VR
	Blood test results JH enquired what the process was for patients to get their blood test results. Patients are asked to call back and if their results are not back then the reception team will investigate further. It is on the patient to follow up their results. VR suggested that the patient access can also show the patients their results and see comments put on by doctor.	FYI

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	Other JH enquired as how many appointments were face to face? Practice appointments are mostly face to face as consultants can examine patients but if patients want a remote or telephone consultation then these are changed. JH enquired about the Clinical Pharmacist and this role is aligned to the surgery and not the Jhoots as that is a separate business.	
6	JH enquired about what happens if patients cannot get an appointment? Al replied it depends if urgent or routine, if it urgent then a doctor would be consulted by reception team and normally these are accommodated for children or vulnerable patients etc. ANP and Physician Associate appointments available Monday and Friday (busiest days). There are also appointments across the PCN and if not then to contact 111. If there are no routine appointments then patients are asked to call back if they don't want to have a PCN appointment as appointments are embargoed for the next day. Staff involved with a pilot project for public health to increase screening of	
0	patients (bowel, cervical, breast) and increased appointments for smears.	
	Cancer Care Co-ordinator – appointed a new member of staff for the PCN to assist with fast track referrals, new diagnosis, and act as a point of contact. Awaiting start date details.	
	New First Contact Physiotherapist started Mr S Pandey working across the PCN 2.5 days per week to assist with new problems not longstanding problems. At the moment this postholder cannot do steroid injections until later in the year. If patients have a new condition (not an ongoing condition) and over the age of 18 they can self-refer.	
	New Reception Staff – Alison introduced herself and her experience in general practice as she has taken on the role of Team Leader for Reception. Les new reception staff member has also vast years of experience working in General Practice.	
	New roles of General Practice Assistant have been recruited to assist with more routine administration and clinical tasks on behalf of the GP freeing up more doctors time.	
	<u>Systems</u>	
	New telephone system project - including call recording and better phone system with use of headphones – this is being introduced towards end of the financial year.	
	New patient check in system – Engage previously Jayex system. This system is used by patients but eager to here if patients are not having a positive response to this. This system informs the patient which waiting room to be directed to.	
	New patient calling in system – Envisage (Numed) still need to tweak this system as tannoy is loud and would like it to play music.	

	One HealthCare Record – Integrated Care Board (ICB) to introduce soon	
	This is a shared care record for the Black Country and West Birmingham and is about to go live.	
	Enclosed information on this is as follows:	
	Over the coming days and weeks, those who are authorised to view patient records, will see a new link appear in their local patient records system. When you click this link within any individual record, you will be able to access the shared care record for that person, provided they haven't asked for their data to be removed.	
	What does this mean for me? The shared care record will bring crucial patient health and care information held by different providers, together in one place. It will provide a holistic view of a person's care and treatment across all settings, supporting you to make faster decisions about their care and reducing the need to request paper records or order repeat tests.	
	In the very early days, professionals will be able to see the patient's GP record including essential information such as existing conditions, medications and allergies. Over the coming weeks, more data will be added on an ongoing basis, including records held by acute and mental health providers across the Black Country, West Birmingham, and selected neighbouring areas. The level of information each user can access will be tailored to their job role.	
	ONLINE TRIAGE SYSTEM New system via Accryx to be introduced in the PCN and Practice for non- urgent appointments and to assist with dealing with medication; sick notes; care information.	
7	Friends and Family Test	
	Paper copies have been re-introduced and placed in more prominent position near to the patient check in if possible. Consideration to put one in upstairs waiting area and also consider in another language.	
	Comments are included on this method but on the MJOG system there is no comments option.	
	VR showed the group how the information is received via MJOG system and also the anonymised data	
	VR showed group an extract of how information is collated electronically. Group would like a further breakdown of comments of results.	VR
	Group wanted the comments to be included on MJOG and VR to review this and report back.	
	December 2022 – 185 mjog responses and 3 papercopies received for December.	
~	Representing 11% electronically of the overall response rate	
8.	Any Other Business	
	JH wants to know the demographics of the practice population – to be	

	discussed at next meeting.	
	Also discussed about putting the friends and family in different languages to increase the response rate and obtain feedback.	
	CD enquired as to why more patients don't want to use the lift and it may be because they don't know that they should keep their hand on the button until they reach their platform. VR has asked patients to use the lift and to be shown how to use it but some patients choose not.	
9.	Date and Time of Next Meeting	
	Monday 6 March at 4:15 pm Wednesday 10 th May at 4:15 pm Tuesday 11 th July at 4:15 pm	
	Annual General Meeting to be arranged in w/c 11 th September 2023	