



Trent View Medical Practice

 managed by Riverside Surgery

Patient Participation Group (PPG) Meeting

Tuesday 21st May 2024 at 4.00pm Keadby Surgery

Minutes

Attendees:

David Wall – PPG Chair	(DW)
Michelle Slimm – Business Manager	(MS)
Melanie Stokes	(MeS)
Sean Fletcher	(SF)
Sue Colakovic	(SC)
Helen Groves	(HG)
Maureen Ruff	(MR)
Michael Hart – Business Analyst/East PCN manager	(MH)
Sara Mann – Business Support Officer (Note Taking)	(SxM)

1. Welcome:

DW welcomed everyone to the meeting this afternoon with a particular welcome to Michael Hart, attending his first TVMP PPG meeting. Michael is Riverside and Trent View's Data Business Analyst and also East PCN Manager.

2. Apologies for Absence:

Ranjit Aujula, Christine Slack, Tricia Murphy, Pat Hyatt

3. Being the first meeting after 01/04/2024 – Appointment of Chair:

SF nominated DW as Chair of the PPG for the period until first meeting after 01/04/2025. DW advised that he was willing to accept the proposal. All members thanked DW for his exemplary work and keeping everyone informed.

DW thanked the PPG for their trust in re-appointing him as Chair for a third year and pointed out that the constitution (section 6.a) advises that the PPG Chair is "*appointed annually... for a term not exceeding 3 years*".

As we look ahead to the next 12 months, DW took the opportunity to remind those present of the PPG's Aims and Objectives and of Trent View Medical Practice's Vision and Core Values. See Appendix 1 to these minutes.

MeS felt that the practice should engage in Research.

4. Minutes of Previous Meeting:

The minutes of the previous meeting held on 19th March 2024 were agreed as an accurate record.

5. Matters Arising From Those Minutes Not on the Agenda:

As part of the Q&A following Dr Modan's presentation, Dr Modan agreed to share the current TVMP buildings estate refurbishment/maintenance plans with the PPG. DW

advised he had not received any details and asked if that could be actioned please?

Action MS.

There was an action in the minutes for SxM to remind Dr Modan to speak with George regarding Community Physiotherapy at Keadby Village Hall and to contact Tricia Murphy.

SxM advised that George McIntosh had been away from the practice on special leave and therefore arrangements have not been made to schedule the meeting to discuss the Community Physiotherapy at Keadby Village Hall. **Action SxM**

6. 'Total Triage' Update:

MS advise that the System had extended the contract for a further six months. National Guidance on the chosen product is KLINIK to the end of September, but there is a possibility there could be a further extension. It is individual practice choice. Online consultations – Engage Consult, KLINIK and AccuRx. MS stated that Jane Goulding has not received any further updates.

7. New TVMP Website: – Update

DW updated that the new website was about 95 - 98 percent there. The link was attached to the agenda and DW would appreciate it if the members would review the Demo Site to see if it answers questions for patients. DW gave some examples of items on the front page and asked if further items required adding to assist easy access. Friends and Family is on the front page, please can comments be made on that too. DW has active monitoring of the site and can update with what we believe to be in the right order.

The Complaints Policy will be submitted online - NHS Requirements. Patients will receive an e-mail with guidance on how long to receive a response. There is no mechanism on the Website for an automatic response.

There is a huge amount of effort gone into the Website and the difference is unbelievable. MR and SuC have both looked at the old and the new sites and MeS stated that the information on there is good.

8. East PCN - Primary Care Recovery Programme - See Checklist with agenda

(A copy of the Item 9 part of the plan was circulated via DW email Tue 16/04/2024 17:01)

MH discussed the East PCN - Primary Care Recovery Programme to the members.

1. Complaint with the ICB – to report where we sit on the Table.
Is there a requirement to here on the Action Plan? Overall actions are the Recovery Plan; Digital Journey Plan. **Action: MH to have a look at all 18 areas.**
2. Bloods, Smears, Hypertension Reviews are all bookable online. Bulk invites are sent out to Asthma patients for routine issues. **Action MS to check with Jane Goulding.**
3. Currently not enable at the moment from a safety netting perspective. There is a risk of messages being missed if there are too many options Patients are using.
Action: Invite Dr Pillai to the next meeting.
4. There are oddities on National Appointments not assigned. Works into appointment mapping.

Discussion took place regarding the Social Prescribers. The Social Prescribers use the Elemental referral process as SystmOne does not interact with local authority systems. All Social Prescribers have access to SystmOne, they provide the practice with the information. The question was asked are you getting value for money? MS advised we can decide who we don't want and the PCN chose Citizen Advice. Other PCNs do not use Citizen Advice. The Social Prescribers were employed by the PCN following

feedback five years ago as this opened into other actions and support services. Social Prescribers have an FFT – Referral Read Code. We can vet Accredited Practice/FFT – improved systems. All appointments get a confirmation text message.

Safe Surgeries Toolkit – The practice has signed up for this, but not started as yet.

The practice would like to work with the PPG on developing a survey – Future Agenda Item. **Action: Practice/DW**

Is a requirement for PCN Level Survey, start with a Primary Care Patient Level ?Microsoft Forms to push at ICB. Plan in place for two years now, ready and waiting – it is hard to reach patients, as not everyone has access to computers. A targeted survey will bring in different threads. Lots of FFT returns is good that comments are coming back to the practice.

9. Enhanced Access Appointments – Arrangements and Schedule:

Network Standard Hours appointments are available to all the practices in the East PCN. The other three practices are on board: West Town Surgery, South Killingholme Surgery and Barnetby Medical Practice providing appointments. There is a four-week rota and remote booking is available. Thirty-one hours of appointments are available Monday to Friday 6.30pm to 8.00pm and Saturdays between 9.00am and 5.00pm. Appointments are available with the GPs, First Contact Physiotherapist, Clinical Pharmacist, Practice Nurse, Healthcare Assistant, Advanced Nurse Practitioner and Mental Health Nurse. The appointments are based on patient need and there is quite a skill mix. MH explained that online appointments are being utilised more and there are various appointment times and types depending on the speciality. MH to show appointment types and figures. DW read from the contract regarding advertising appointments – Publish in Advance. MH to ask other PCNs how they interpret publishing in advance. MH attends the PCN Managers meeting and is interested to see what other PCNs are doing. HG asked are appointments available or in the background, as we need clarity. If we are an outlier, we need to do something. MH explained that appointments are based on the practice population per 1000 patients. MH stated that the funding stream is different for Network Standard Hours and Care Navigators are also part of the contract.

Action: MH – Review Figures, Feedback Managers Meeting, How many sessions cancelled?

DW thanked MH for attending the meeting today.

10. The communication system “Patients Know Best”

How does this relate, as there is a lot of duplication around. If we are not careful, overacting/ duplicating to everything secondary care. Patient Knows Best has been chosen. Text NHS App – two channels of communication. Primary care has not activated as a practice. Only Discharge or Hospital Letters come across. SGH and DPoW are joining up with Hull Trust. Software systems at NLaG do not have it.

11. The negative comments on social media following the emergency closure of the practice on Friday 19th April 2024.

MR stated that she does not use Facebook and asked what is the nature of the Facebook Page?

Why did we open the practice to a one-way street?

Communication – Social Media is wonderful for getting information out. There must be a commitment to putting out regular posts. There is a need to put out good news to

highlight good points regarding the practice. The Facebook page requires refreshing and to be managed better.

Discussion took place regarding the possibility of employing a full-time apprentice for a news feed role. MS advised there is currently a recruitment freeze and the practice is currently looking at reducing staff.

12. Performance Reports:

- a. Appointments – The figures were discussed for clinical triage TVMP 317, Riverside 1566 – JG and MH are currently looking at these figures.
- b. Telephone Response Times – the outreach performance equates to 10 calls answered per hour.
Dispensary Statistics – 1.6 calls an hour. 30% of calls go unanswered. All requests for prescriptions go through to Brigg so Dispensary calls should be few and far between. Is the Dispensary unmanned – MS advised that calls are taken in the back room.
- c. Friends and Family Test – The results/graphs were circulated prior to the meeting. The number of responses is increasing every month from January to March 2024 and the 'very good' plus 'good' responses for March is 85%..

13. Feedback From Members Who Attend External Relevant to the Work of the PPG:

HNY ICB Patient Engagement Network (PEN) meeting: DW advised that he has attended the meeting virtually which was delivered by Erica Ellerington on how the ICB manages the contract with GPs. DW will share a link to a recording of the meeting with PPG members.

Carers support initiative in partnership with North Lincs Council. Following an initial meeting between North Lincs and Jane Goulding – DW has been invited to the next meeting, has shared his contact details and is awaiting further details.

14. Any Other Business:

None.

15. Date/Time of Next Meeting:

Tuesday 16th July 2024, at 4.00pm - Crowle Community Hub, The Market Hall, Market Place, Crowle, SCUNTHORPE, DN17 4LA

DW brought the meeting to a close and thanked everyone for attending today.

Appendix 1



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Aim of the PPG

To ensure patients and carers are involved in decisions about the range, shape and quality of services provided by their practice

Objectives of the PPG

- a. Promote the proactive and innovative involvement of patients and carers
- b. Be a critical friend of the practice
- c. Be representative to reflect the demographics of the registered population
- d. Advise the practice on the patient perspective and provide insight into the responsiveness and quality of services
- e. Encourage communities' health
- f. Carry out research into the views of those who use the practice
- g. Support the practice to organise health promotion events
- h. Together with the Practice support on-going communication with the patient population

Trent View Medical Practice

Vision

To provide the highest standard of patient centred care.

Core Values

- Putting patients first
- High professional standards
- Team working
- Training and development
- Collaborative working