



Trent View Medical Practice

Patient Participation Group Meeting

Tuesday 2nd May 2023 at 4.00pm
Keadby Surgery

Minutes

Attendees:

David Wall – PPG Chair	(DW)
Christine Slack	(CS)
Michelle Slimm – Business Manager	(MS)
Sue Colakovic	(SC)
Trish Murphy	(TM)
Sean Fletcher	(SF)
Julie Oti – Business Support Office (Note Taking)	(JO)

1. Apologies for absence and welcome

Sue McAuley, Barrie Pollard, Melanie Stokes

The Chair had received notice from Claire Holmes that she was stepping down from the PPG with immediate effect. On behalf of the PPG and the practice, the Chair had written to Claire thanking her for her past involvement and support.

Having joined the PPG in March 2023, but being unable to attend the March meeting, TM was formally welcomed and introduced.

2. Appointment of PPG Chair

In accordance with the PPG Constitution, this being the 1st meeting after the 1st April, a PPG Chair for the coming year to be chosen.

There being no other volunteers or nominations DW was content for his name to go forward and was duly appointed. DW thanked the group and MS for their support over last 12 months and was looking forward to working together in the future. MS thanked DW and said it was a privilege to sit on the PPG table and commented that other practices do not have a PPG.

3. Notes of Last Meeting (07/03/2023)

Agreed as a true and correct record.

4. Matters Arising/Actions from meeting 07/03/2023

4. Organogram – MS shared a revised organogram and her thoughts, saying it is feeling inclusive now. The merging of Trent View and Riverside to a single contract would not happen in this financial year. MS emphasised that the practice operates a flat structure.

There were some feelings that the organogram was confusing and not easy to follow. DW felt that a flat structure was not a barrier to an organogram that shows clear lines of responsibility and suggested that adding photos to a complex organogram didn't really help clarity of numbers employed (e.g. per team) and working relationships. MS said we can add further details to it. SC could follow chart more than others and said that photos would work better in local practices e.g. Who is on duty that day. TM informed the group that she does not know who Doctors are at the other sites. DW asked if there was a timeline to a Finished Document. MS said that Business Partners (GP's) should be included on structure Clinical Lead and Team Leaders report to her.

SC asked about CQC. MS said they have had weekly meetings which then went to fortnightly. She has not seen CQC for a month now. We employ 174 people (173 currently in post, 1 vacancy).

Action: MS - Amendments Ready For Next Meeting

SC asked about Registered Managers across sites. MS that the business (Riverside and TVMP) have five Registered Managers – The Five Business Partners.
SF asked about doctors.

Confidentiality Forms:

DW gave 7 signed forms to JO.

Action: DW to follow up people who need to sign form and hand in.

6. Complaints Process and Procedure:

SC asked what MS thinks about the documents shared. MS said that we are becoming a more business corporation. We do have a meeting once a month to discuss Complaints and Significant Events which include learning opportunities e.g. what have we learned and how can we improve.

SC shared her concern and said that if a complaint went to the Ombudsman it is upheld. She said that it would be better to have a clearer process to protect both patients and staff.

TM asked if there is a robust system in place already. MS said there is, but there are no timelines and could do with making more robust. They have dealt with Riverside Surgery, Undergone Takeover and we can now make improvements to the Complaints Procedure.

MS suggested a meeting with SC outside of PPG.

Action: MS To Contact SC

7. Dispensary Process and Procedure:

DW used the notes from the March meeting to refresh the group with the concerns previously discussed.

MS informed that CQC raised serious regarding dispensary as there was no SOP's, no date checking, no fridge checking etc. The practice needed to take urgent/immediate action otherwise the CQC would close the Dispensary.

The Pharmacy is managed by the Hybrid Model. Damian Ltd is the company which, collect prescriptions, dispense and deliver medication at Riverside. MS said this same model was quickly implemented at Trent View. Trent View now have SOPs for everything and have implemented what CQC required.

MS discussed previous problems: patients always got what they wanted by untrained staff. It has been an uphill struggle and staff have left.

CS asked about prescriptions – how long the pharmacy have had the prescription and how long it takes to process. She informed the group that she always calls ahead (to Weldricks Pharmacy in Crowle) to check if her prescription is ready to collect.

MS said that we need to move to EPS (Electronic Prescription System) and are looking at the end of May.

DW asked about timeline of prescription. MS answered saying 1 business day for prescription to be ready for collection by pharmacy (e.g. Weldricks) and 3 business days for collection from surgery dispensaries.

Action: MS to Look into it

DW said that it would be helpful to know what practice policies are with details and also asked about delivery service.

MS indicated that the delivery is being reviewed. Carolyn Souter is managing this and is working with historical processes. Advised that we will be tightening up on it. SF asked if we get paid for deliveries. MS advised that it is a cost to the practice.

TM complimented the process during Covid.

MS talked about situation last Friday when van was out of action and Business Support Staff delivered medications. Also delivering patients medication you are able to pick up on vulnerable patients and able to get follow up care where necessary.

SC said that there needs to be a build up on policies, procedures and SOPs.

DW asked if there needs to be a Qualified Pharmacist onsite. MS answered – there needs to be a Prescriber onsite. Risk assessment done and is happy that medication is not given to patients unless a Prescriber is onsite. Some staff are doing training.

DW summarises – How, When, Why details re prescriptions.

Action: MS to provide further details.

8. KPI's

DNA Figures:

Action: MS to make simpler for future meetings

b. GPAD: MS was not able to clarify which was the correct number of appointments i.e. the number the practice submits to NHS England (GPAD) or the number given direct to PPG directly by the practice. MS informed group of typing error re staff members.

Action: DW will send spreadsheet through again

c. Data classification mismatch

DW discussed DNAs and significant mismatched figures re spreadsheets (data) asking for classification. MS advised that mismatch of classification should all but disappear as the two businesses (Riverside & TVMP) standardise procedure, policy and practice. MS said it might help that there is one team managing rota's which went live last week. Previously, there were five people doing different aspects of rotas. She is hoping this will clean things up.

Action: MS to look at Data

d. (i) GP Appointments and (ii) Number of GP's

DW, and SF made comments regarding an apparent unfair sharing of Face to Face appointments and appointments with a GP between the two practices. TVMP seems, pro-rata, to receive significantly less resources.

MS explained and said that she needs to look at Access EPCN. She said it might be worth spending some time with the team to help them understand.

DH, SF & SC commented.

e. Detail re GPAS SITREP

In terms of the practice level of GPAS SITREP detail. MS recommitted to providing.

Action: MS

MS talked about the future of NHS, she shared her view that GP Practices will not exist in a few years time. Business corporation could take over as in Hull, Bridlington and Derbyshire.

SC asked whether procedures can be transferred from Riverside across all sites

MS said this is a shared frustration re NHS & CQC. MS said they have been working with an outside Consultation firm and they have provided an organisation plan draft.

9. Text Message Policy

SF asked if there is not a text to let people know the status of their prescription e.g. received, dispensed and ready to collect. He shared his own experience of using the NHS App.

Similarly with an appointment - Is it practice policy to text confirmation and/or reminder when an appointment is fixed?

Action: MS To Report Back

10. Website Progress:

DW was not able to provide any update as agreed wording, process, and procedure on all matters was still outstanding.

Action: MS

11. & 12. Update on Urgent Care System and VOIP System

MS asked how she shares with patients about why the phone system was not updated last Friday as planned, this was due to dealing with medication deliveries.

DW suggested that a starting point for any communication could be a quality website.

MS advised that a new phone message was soon to be 'switched-on'.

5. Feedback from PPG Members Re What Community Thinks of TVMP

MS shared that there have been hidden challenges and called it sabotage – asking a member of staff to do something, but they do not do it.

SF asked if we have to publish accounts. MS said No.

SF commented further.

MS said that we are still learning lessons etc.

Asked DW if we are discussing finances at the next meeting. DW said that we are.

DW asked MS if she is prepared to share the internal newsletter with the PPG. MS confirmed she was and would make arrangements.

Action: MS

6. Feedback From Members Who Attend External Meetings Relevant To The Work Of The PPG.

DW advised that the PPG Chairs Forum had not met since June 2022. He had escalated the matter to the Humber and North Yorkshire Integrated Care Board.

7. AOB:

TM asked what is the procedure re Covid Vaccines

MS advised that there will be clinics on the 15th and 22nd May and patients will be invited to attend prior to these.

8. Date/Time of Next Meeting

Tuesday 4th July 2023 at 4pm at Crowle Surgery – The meeting will be single item agenda on GP Funding and Contracts.