

Higham Ferrers Surgery
Patient Participation Group Meeting
8th August 2024
Minutes

Attendees: MG, DG, DW, ER, SR, MD

Apologies: KL

Agenda Items

Introduction: MG welcomed everyone to the PPG and thanked them for attending today.

CBT: MG advised that a PPG member who couldn't come to the meeting has asked that I update them on the new telephony system. I did ask the PPG member if they could elaborate as to what information they would like but MG never heard anything back.

MG went on to advise that the surgeries new telephony system does seem to be working better, we have less queuing times on the phones and patients seem to like the callback feature. A few PPG members have said that they don't seem to notice much difference as they still seem to be queuing a long time, MG asked if they have used the callback feature so they don't need to wait in the queue, the reply was no. ER asked if we had any data yet or statistics to show. MG advised that this is something the PCN are going to be looking into, so we can work on certain areas, but as of yet we do not have that information.

Appointments: MG advised he has noticed more appointments are available. We now have 2 GP's, a salaried GP, a nurse, a nurse practitioner, an HCA and a clinical pharmacist. It seems we are also getting more hub appointments available for extended services and OOH services. Even though we don't have figures and statistics yet we have noticed less people queuing outside in the mornings, less people calling through first thing at 8am.

Online Services: MG went on to advise that NHS England and the PCN are still encouraging patients to download and use the NHS App. Patients will then be able to see on their device at home their care records, their medication, ordering repeat prescriptions and this will free up a lot more calls that come through to the practice. MG also advised that he is still the NHS ambassador for the practice so if patients need online help with Anima or the NHS App they can book in to see him and he can assist them.

MG asked the group if they are all signed up to Anima and using it. Some members said they are not, but MD stated she is and thinks that the opening times should be longer and not just between 8am and 9am.

MG advised as far as he is aware they don't have it open longer as the practice gets inundated with requests and they don't have the staffing capabilities to deal with the demand. The practice already has a GP taken off consultations in that hour to deal with anima requests and are not able to allocate a GP all day every day to deal with just Anima alone, unlike some of the larger practices in the PCN.

MD stated that she would have thought if Anima was open longer and in OOH times (i.e. 7am) it would give patients a better time to send their requests through. As if they can't call or attend the practice then they aren't going to be able to fill out the Anima forms. MG advised that he understands but it is the practices decision to make, if they don't have the staff to deal with the demand then that is their decision, but he will still take it to management and the GP's to be discussed.

ER also thinks that Anima should give an 'N/A' option as some of the questions lead on to other questions and they are sometimes irrelevant to the request, or there are too many options and should focus on the top element. It would also make it a little quicker and simpler for the patient. MG will also take this feedback to Anima.

ENPA: MG passed the lead to DG who informed us of the ENPA and their last meeting.

DG advised that the ENPA are not in favor of Anima and the feedback they are receiving is quite negative. They believe Anima to be confusing, long-winded and just another way to communicate with the practice when patients can already call, email and visit practices. MG advised that is the point of Anima, it is a non-urgent communication tool to assist with the demand of patient requests that do come through the phones, emails and in person.

DG updated that the ENPA have attended some schools within the East Northants area to inform and build knowledge of the services available to the children in the ENPCN.

ER said that maybe the ENPA or NHS England should look into an app for children to use. Cater to the modern needs of today, if children are always on their phones then do something that appeals to them and that they may use. DG advised that he will feed this back to the ENPA.

DG updated us that the ENPA are looking to get local partnership with councils but at the moment it doesn't seem to be going very far.

DG also mentioned the £1 per PPG member donation, the ENPA are still requesting. MG advised that he had spoken to the PCN manager and has been advised that this is a donation and not a membership fee and that if PPG members don't wish to put in that is their prerogative, however it is to go to funding that the ENPA can use to promote the ENPA and what they do.

ER said that as we only currently have 5 members in our PPG he is more than happy to pay the £5 donation and handed a £5 note to DG to take to the ENPA meeting.

Autumn Newsletter: MG asked present members if they have any ideas for this Autumn Newsletter about any events, medical information they would like to see more of or charity information etc and to please let him know in the next few weeks.

ER said that we should put in the newsletter the focus on what the practice has achieved and what 3-4 objectives the practice hope to achieve in the future.

AOB: ER asked if the new 'GP work to rules' will have any impact on the practice and it's patients? MG advised that he is unaware of this having an effect on the practice but will take this to the GP partners and management and update the PPG when he has an answer.

SR advised that she went to pick up her medication the other week and noticed on the packet that her medication review should have been in February but is still getting her medication even though she hasn't had a review. SR asked what is the policy on having a medication review?

MG advised that as far as he is aware patients should have medication reviews every year, but this is something he can look into.

SR advised that her concern was more that if she slipped through the net then how many other patients are not having their medication reviews also.

Date of next meeting: Thursday 5th December 2024