

**Patient Participation Group**

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| **Minutes of Meeting: 18 July 2024** |
| **Present**  | Colin Berthelsen (chair)Dr Liz Hermaszewska Jan Choopani Mary EganCaroline Field John GrossmanSharon Pink (Minutes)Simon Roberts  |  | **Apologies** | Gerry KurzonMary PerkinsStefan Sieradzki Susan Smee |

*Introductory note: In response to requests from PPG members, please see at the end of these Minutes a brief summary explaining how local healthcare is organised within the NHS.*

**Waiting Room new electronic display board**

We were pleased to welcome Simon Roberts who attended to describe and demonstrate the new information display system he has installed in the Waiting Room, with a new large screen on the wall facing the door. The system uses the same technology as before and is integrated with the patient call system.

The system displays a rolling set of slides with information about the practice, health advice and information about the PPG. The slides run through at a rate of just under a minute per slide and this is adjustable as needed. Simon is able to edit the presentation at any time, and this can be done remotely, so the information can be kept really up-to-date. For anything we would like included in the display, subject to agreement with Dr Liz, we can send details to Simon or we can create slides directly and send to him.

Simon has also now moved the previous noticeboard from that wall to give us a much larger information board for our PPG, which will be very helpful.

Many thanks to Simon for all these initiatives which will really improve information display for patients.

**Updates from Dr Liz on Mountwood matters since last meeting**

**Staffing**

* Reception Team: an experienced new receptionist Ritika has joined from Ealing, and Hannah will be going on maternity leave.
* Nursing Team: A Practice nurse will be returning from maternity leave in September.

**Services**

The Central & North West London Trust (CNWL) announced at very short notice that they would be ceasing the housebound phlebotomy service, where they carry out blood tests for our patients at home. This caused significant concern for Mountwood as it would be a major undertaking to bring in trained mobile resources quickly to ensure this service continues for our housebound patients, particularly where blood tests are required urgently in relation to treatment underway or planned. While the Practice spent considerable time working on establishing how this resourcing gap could be filled, the CNWL reconsidered and has now notified that it will carry on providing the service for a while as the notice period was too short.

**Medication Reviews**

The Pharmacy Team is carrying out medication reviews which helps with the doctors’ workload. With regards to repeat prescriptions, the Doctors currently need to authorise each drug individually on any prescription. There have been some reports of repeat prescriptions being denied and this may be because one or more items on the prescription needs a review or a blood test to check applicability and appropriateness of dosage etc.

As some drugs are dispensed to cover different timeframes eg 2 months or 3 months supply, Dr Liz encourages patients to discuss with the surgery how to synchronise their medications to suit their needs and minimise administration and time-to-approve etc.

**Improving patients’ access to appointments**

**With an average telephone wait time of around 3 minutes, Mountwood has the best record of any practice in Hillingdon.**

PATCHS is available for non-urgent issues only.  PATCHS is not mandatory for Mountwood patients, who can phone or come into the surgery to ask to book an appointment if they find it difficult to use.  Some patients find PATCHS easy and convenient to use while others for many different reasons do not.

The PCN is exploring the possibility of using other systems similar to PATCHS.

The surgery offers telephone and video call consultations depending on patient preference, the need for the doctor to be able to see the problem being reported, and the ability of the patient to get to the practice or operate a device for remote consultation. During or following a consultation, patients can also send in photos and are sent a link to enable this. Obviously this requires a level of familiarity with smartphones and Internet use and where the patient is able to take a photo and transmit it, or has someone there to help them. So clearly this will not apply in all cases.

The new Pharmacy First option being rolled out across the NHS is reducing calls to the surgery by about 10% so far.

**Improving information on the website**

On the practice website, the page “Test Results” says results for X-rays and scans usually come within 2 weeks. In practical terms this can be anything from 2-4 weeks for full reports to be delivered, although all tests are reviewed for any immediate/urgent concerns before being sent for the full report to be written up. The PPG has therefore requested that the website wording is changed to reflect this. Operations Manager Lisa Davies was happy with this and Dr Liz agreed.

**Family & Friends feedback data**

The patient feedback received recently has been good. Dr Liz explained more about how this feedback is collected, stored and analysed. The questions are mainly standard assessment questions, so the Practice does not have the option to change those. This is to ensure consistent evaluation across all surgeries. Mountwood can however add a few supplementary questions if there are specific areas of activity the Practice wants to ask patients about. Currently there are two supplementary questions, asking if patients are aware of the PPG and wish to have more information and join us.

All feedback provided in the standard questions is anonymised and the doctors do not know who it is from.

In addition, each month a required number of feedback questionnaires are sent out by text following patient appointments, to elicit patient views on the service.

Most recent results are summarised below:

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| **Date****Rating** |  | **Apr 2024** |  | **May 2024** |  | **June** **2024** |
| **Very Good** | 21 | 95.6% | 22 | 96.4% | 40 | 98% |
| **Good** | 1 | 5 | 10 |
| **Average** | 1 | 4.3% | 1 | 3.6% | 1 | 2% |
| **Poor**  | 0 | 0% | 0 | 0% | 0 | 0% |
| **Very Poor** | 0 | 0 | 0 |

**Practice inspections**

The Care Quality Commission (CQC) no longer carries out the schedule of practice visits that they used to. Every month they download information that Mountwood is required to maintain such as Friends & Family feedback, complaints, statistics on rates for smear tests and immunisations, medicines data etc and decide if the practice is operating safely against those required benchmarks. They will then select a surgery for a more detailed review and inspection.

**Presentations to patients**

PPG confirms two members attending both menopause workshops and COPD workshop with Stefan/Colin available to help set-up if necessary. Workshops run 1-3pm.

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| **Workshop** | **Date** | **PPG attendees**  |
| Menopause | 31 July  | Ginny | Sharon |
| Menopause | 14 August | Sue  | Caroline |
| COPD | 9 October | Sue  | Sharon |

Dr Liz thanked all PPG members coming forward to support these workshops.

**PCN activities**

Colin and Sharon reported to the meeting on an information session held by the local PCN where a couple of initiatives were discussed:

1. **Extending PATCHS availability**

The PCN has been carrying out a trial with Harefield Practice to extend PATCHS availability throughout the working day. For this trial, the PCN has provided some additional resource to Harefield to help them triage the additional requests coming in through PATCHS. The trial is being monitored week by week to see how it is working and assess the level of resources (existing and additional) required for the following week.

Until the trial is over, we won’t know what the PCN may recommend for other practices including ours, but clearly there is a concern that any practice wishing to open PATCHS all day would need additional staff to make system work. As the staff coming in from the central PCN will not know the patients at the individual practice, it sounds like this trial is similar to the idea mooted elsewhere of providing centralised remote triage services across the region.

Dr Liz reported there is no news yet on this trial via the ICB. We will watch this space…

1. **Enhancing interaction between PPGs**

The PCN would be happy to arrange an initial meeting for PPGs of surgeries within the PCN to meet each other, discuss areas of mutual interest and raise any queries with the PCN team. In principle we are happy to attend and will welcome any of our members who would also like to come along. We will circulate details once we know more.

**Any Other Business**

* Mary passed on a request from Northwood Residents Association for a news item about the practice for their association magazine. Dr Liz took the details and said she will be happy to contribute a write-up.
* Gerry raised a concern about the volume of commercial marketing from companies promoting products or medication purporting to deliver miracle cures for different conditions. While obviously in a free market companies are able to advertise their products in different media assuming that any medical claims are verified and any medicines regulated, Dr Liz said it does concern her if people are spending money on products or supplements that could be doing nothing to help them. Patients can always contact the practice for advice on commercial products that may be helpful to their specific condition(s).
* In respect of information sent out to patients about any aspect of medical care, any texts sent by the Practice always say they are from Mountwood Surgery so patients can have confidence of the source of the information.

 **Next meeting**

The next meeting will be on **Thursday 15 August** at **2.30pm.**

**Definitions and Explanatory Notes**

There are 42 Integrated Care Boards (ICB) in England, with around 1,250 Primary Care Networks (PCN) reporting to them.

**Integrated Care Board (ICB) -** planning and funding health and care services in the area they cover i.e. primary health care, doctors, dentists, chemists and secondary care being hospitals, rehabilitation etc.

For Mountwood our ICB is London North West, known as NWLICB. It includes 8 London boroughs: Brent, Ealing, Hammersmith & Fulham, Harrow, Hillingdon, Hounslow, Kensington & Chelsea, Westminster), responsible for over 2.1 million patients.

NWLICB has 45 PCNs reporting to it.

**Primary Care Network (PCN)** – The aim of a PCN is to build on existing primary care services and enable greater provision of proactive, personalised, coordinated and more integrated health and social care for people close to home.

Our PCN is North Connect and covers the following surgeries in addition to Mountwood:

* Acre Surgery and Carepoint Practice (both based at Northwood Health Centre);
* Acrefield Surgery in South Ruislip;
* Devonshire Lodge in Eastcote;
* Eastbury Practice in Northwood;
* The Harefield Practice
* Mountwood Surgery, which is the largest practice with over 11,000 patients.

The PCN is based in the same building as Eastbury Practice and works with the seven surgeries to organise the sharing of services and provide support to Practices – including support to Patient Participation Groups (PPGs).

Our PCN has recruited a growing workforce of pharmacists, mental health workers, health and wellbeing coaches, social prescribers, physiotherapists and other clinical roles that will deliver services for patients across the neighbourhood and help them if they need to access other health or social services if needed.

**Care Quality Commission (CQC)** – the independent regulator of health and social care services and organisations in England.