

The Family Practice Western College Patient Participation Group

Minutes of the meeting held on Zoom: 9/9/2024

Present:

Jill White (JW) (Chair)	
Nick Benson (NB)	
Ann Nicholls (AN)	
Sarah Udo-Affia (SU-A)	
Penny Dobson (PD) (Minutes)	
John Plumb (JP)	
Dr James Baker (JB) (GP)	
Kelly Britton (KB) (Operations Manager)	

1. Apologies:

Ian Goodenough	
Anna Goodenough	

2. Minutes of last Meeting (12/2/2024) and Matters Arising

These were approved.

Matters Arising. Re: Item 8. It was felt that another visit from the lead pharmacist was not needed yet.

3. Operation Manager's Report (KB)

Report Name: DNAs (Nurse) - Flu excluded FEB - AUG 2024

Patient Population: All Appointments

Patient Age DNAs

0-17 55

18-39 195

40-64 141

65 and older 142

TOTAL 533 This is an increase of 249 patients who did not attend nurse -related appointments compared to the previous 6 months.

For GPs there were 286 DNAs for the same period, which was 66 above the previous 6 months and with similar age -related differences, with the 18-39 year olds having the highest DNA rates.

There was a discussion about how to reduce the number of DNAs, which are clearly taking appointment time from other patients. Patients do get text reminders of their appointments – and repeat offenders are sent letters and this is flagged up on their notes. JW raised the question of patients who have mental health issues. Are these being followed up if they don't attend?. JB said that The Family Practice (TFP) is aware of a handful of patients who are, for example, taking anti-psychotic medication - and the Practice has a Care Coordinator, part of whose role is to follow-up patients discharged from hospital and to liaise with mental health services. This is a Primary care Network appointment; every Practice has one. TFP undertakes annual reviews of all patients with serious mental health problems.

Staffing:

KB reported that there was currently a full capacity of **GPs**, with Dr Eastick and Dr Olomolaiye recruited to fulfil maternity leave covers. For the **treatment room** there was a new advert about to be placed for a replacement Senior Nurse, following a previous unsuccessful attempt at recruitment. In the interim, Dr McGuiness was overseeing – and has taken the opportunity to review the skill- sets needed, which will help target the recruitment process. JW asked whether salary levels were an issue? KB said that other Practices were having similar recruitment problems, so this was not specific to TFP. There is also full capacity within the **Reception Team** (14 members of staff). This includes members of the **Workflow Hub**, part of whose job is to work through the letters that come into the Practice and ensure that they reach the right clinician. JW asked how long this process took – answer maximum 72 hours.

KB is recruiting volunteers to act as Marshalls for the Saturday flu and Covid vaccination sessions at Tyndalls Church:

5th, 12th, 19th and 26th October

If you are able to help please contact Kelly at the Practice: Kelly – kelly.britton2@nhs.net or Stacey.cook2@nhs.net

4. Special GP Collective Action Update (JB)

PPG members have been sent a slide presentation from the BMA (see below), which outlines the reasons and principles behind a potential “work to rule”. This is not a strike. JB explained that TFP has not changed anything yet. The key concern is that the financial contracts that each GP Practice has with NHS England have not increased relative with inflation over a number of years; neither has the government discussed this issue with the BMA GP Committee. So there has been a reduction in real term funding for GP Practices (currently the government allocate es £6 out of every £100 to Primary Care; this used to be £9; even with a proposed increase of 6% this year, this will leave Practices 4% worse off than in 2018). With an increase in demand for GP services, this affects quality of care, GP recruitment/retention and patient satisfaction. All GPs and colleagues want good Primary Care to be safeguarded for the future.

JB stressed that if action was taken on one or more of the ten areas proposed by the BMA for the work to rule, this is likely to be limited to additional tasks that the Practice undertakes eg sharing of data, blood tests and ECGs for patients in secondary care. This is not likely therefore to affect general Practice services from the perspective of the patient.

Representatives from our Practice will shortly be attending a Bristol and Gloucestershire - wide meeting, so that regional Practices speak with one voice and decide what action to take, if any. **ACTION** The Practice will let the PPG know the outcome of this meeting.

5. Website check

Matters Arising: KB reported that the name of the Reception Manager has been added to TFP website and there was now clearer signposting to the NHS App. PD said that the website looked good, accessible and up to date. She noted that the Admin Room section promoted its use to obtain sick notes and information on TFP policies, but this wasn't followed through when one clicked on the site. **ACTION KB to look at this.**

6. AOB

SU-A asked what the mechanism was for patients if they wanted to complain? KB said that patients could make a complaint via the website, by email or by phone. These are reviewed by the Practice team every quarter, with an annual review. If there was a clear system problem, this would be brought to the attention of the PPG. KB was pleased to report that there have been no complaints about the new phone system – and access has been improved with the new ring back system.

7. Proposed date of next meeting: 2024

December 9th

PD 11/9/2024