

Patient Participation Group

Minutes of the Full Meeting on 21st | January 2020 at Marymead Surgery 7.00 pm

Leader: Amanda Preedy, **Minutes:** Rosie Chisnell

- 1. Present:** Amanda Preedy, Rosie Chisnell, Graham Fothergill, Joy Hall, David Wilkinson, Angela Dormer, Ann Whittenham, Lynne Drake, Brenda Davies, Kay Loveless, Robert Sprigge, Sally Elliott, Chrissy Cobbold, Sharon Smith, Barbara Dungan, Dave Bartlett, Gill Bartlett

Apologies: Ken Spooner, John Townend, Penny Berry, Jan Burt, Tony Stowe, Ros Sherry

- 2. Declarations of Interest:** None.

- 3. Minutes and Matters Arising from Meeting held on 17th December**

Minutes: Agreed

Matters Arising: None

- 4. Presentation by Juliette Tuke**

Juliette informed the group that eConsult is an on line triage system, which has been introduced in lieu of calling the GP, Nurse Practitioner, Nurse or other Practice professionals within the Practice. Juliette explained that it had been built by NHS Clinicians and had been trialled initially in Tower Hamlets in 2016, and by 2019, had been extended to and had now gone 'live' in 900 GP Practices.

Patients were asked to use their mobile phones to trial the system while Juliette ran through the steps patients would need to take to access the service.

Juliette explained that there was a disclaimer in place for acute medical conditions, which would direct patients either to 111 or to attendance at an Accident and Emergency Department.

Juliette fielded questions from patients about the use of the service and how it would work in practice.

Patients asked the following questions and made the following comments:

Graham asked what would happen if eConsult became mandatory and patients were not able to access the system or complete the on line form? In this case, it was acknowledged that the Practice staff would be able to do this for patients.

Brenda questioned what the return time would be for patients to receive an answer from the Practice and Graham asked who would monitor the system? Patients were informed that Natasha Hudson, a receptionist at Marymead, had the responsibility to pick up patient referrals and to delegate these to appropriate clinical personnel, including the duty Doctor. These referrals would be responded to by a GP or other professional by the end of the next working day.

Patients were informed that there is an electronic part of the form which addresses patients' needs for urgent assistance at the Practice.

Patients were also reassured that the completed form is entered onto their records on System One, and that they would be able to request a copy of the consultation document by email.

Juliette informed the patients that there is a working version on the Practice website and a demonstration site that can be accessed in order for patients to use and familiarize themselves with the system.

Graham asked how eConsult would be publicised to patients and Robert asked for clarification of the website address for patients? It was suggested that information on eConsult could be posted on the Practice website and that the reception and/or secretarial staff would be able to pass on to patients flyers containing the website address. It was also confirmed that the correct website address would be publicised in the Newsletter.

Rosie asked if patients, who were uncomfortable or unable to use the system, could opt out? It was confirmed that patients would still be able to phone the Practice in these circumstances.

Juliette acknowledged that the system was only available in English and that translation into foreign languages was considered to be too complicated.

Brenda pointed out that a face to face Doctor / patient consultation can provide significant advantages in detecting adverse signs and symptoms which would otherwise not be picked up on the electronic system. Rosie agreed with Brenda, and felt that much can be gained from Doctor / patient interaction; observation of the patient's clinical symptoms and perception of the wider clinical picture, and expressed concerns about the new consultation process.

Juliette explained that the rationale for this system was to cope with the decreasing number of GPs in the NHS. She also suggested that younger generations may particularly be more receptive to an electronic system.

Ann asked if there had been any user acceptance testing and what basics were used when exploring use of the system? Juliette said that the usage demographics suggested that it was finding acceptance among the older generation.

5. Practice Update

Mandy explained that in Ken's absence, he had forwarded information regarding Practice issues for the Meeting. These were:

New Knebworth Surgery: Ken reported that, as a result of further delays, that the move into the new Surgery was expected to take place on 16th March. The last day in the old premises would therefore be Friday 13th March.

Patients asked how the date and location of the new premises would be published? Posters in both surgeries and a notice on the Practice website were suggestions made by patients. Graham added that flyers would also be available about parking at the new Surgery.

Management of DNAs: In response to an email from John Townend, expressing concern about patients who fail to attend appointments, Ken reported that the Practice does chase up DNAs (Did Not Attend) regularly, but it is a difficult area to manage. Ken explained that patients who DNA cannot be removed from the patient list but that the surgery does discuss this with frequent offenders.

Phlebotomy Service: Ken reported that this service is provided by the Lister Hospital, and not the Practice, but it does facilitate the service by provision of a room. If patients are unhappy with the service, then Ken has suggested that patients should complain to the Lister Hospital.

On Site Counsellor: This is a new service which will be provided on a Thursday for one day a week, starting in February. Robert asked about the service the Counsellor would be able to give, and if this was being provided by Mental Health? Rosie asked for clarification whether the professional was a trained Counsellor or a Specialist Psychiatric Nurse? Graham suggested that this was discussed at the next Officer's Meeting.

6. Update on PPG Representation with the Primary Care Network (PCN)

Graham reported that Practices still had no representation on the PCN.

The four surgeries in our PCN (Knebworth and Marymead, Shephall, Bedwell and King George) had met and discussed our involvement, and have agreed that it is important to be able to represent our patients in the PCN, concerning the provision of services.

At present, it would appear that PPGs in other PCNs have also not been able to make any further progress in this respect.

7. Any Other Business

Pharmacy Meeting: Graham reported that the Pharmacy Meeting was held last week. The relevant issues for patients were;

There has been a new EU Directive regarding changes to the packaging of medication. The new plastic seals and 'glued down' carton ends are safety features, aimed to be child resistant, but these are making the packaging considerably more difficult to open, especially for older patients.

Surgeries are no longer receiving faxes from Pharmacies.

Ranitidine is now available and is in stock.

The next full PPG Meeting will be held on Tuesday, 18th February at 7pm at Marymead.