

Minutes of the KEY Patient Participation Group Meeting

Wednesday 10th January 2024 at 7.00pm at Yarnton

Attendees

JH – Vice chair/patient (Y)

CR – Treasurer/patient (K)

AC – Secretary/patient (K)

AP – Patient (K)

MC – Patient (K)

MJ – Patient (K)

AK – Patient (Y)

TS – Patient (K)

KM – Practice Manager

Dr Simon Tucker – GP Partner

(K) – Kidlington Surgery (Y) – Yarnton Surgery

1. Welcome and Apologies

JH welcomed everyone to the meeting

Apologies received from AnP, AG, GL, PM.

2. Minutes from previous meeting

a. **Accuracy of minutes** - AK had emailed to say that it was he who had raised the eConsult query under *Practice Update* and not AP. Otherwise minutes were agreed.

b. Matters arising

i) Health Kiosk funding request

KM advised that both kiosks are installed and thanked the group for the generous contribution towards the cost. They are already in use and patients are advised at time of booking appointments if they need to use the kiosk prior to seeing the relevant doctor or nurse. Test results are automatically uploaded to the patient's record ready for the consultation. The group had the opportunity to see the kiosk at Yarnton.

TS requested that the Practice communicate the existence of the kiosks to patients and that signage is provided. (AC – added comment after April meeting as omitted on original issue)

ii) Pharmacy concerns – see new standing item 7. *Pharmacies update*

3. Chairperson's update

Nothing to advise.

4. Secretary's update

a. Communications via Gmail account

i) A patient contacted PPG via Gmail with concerns that their ability to order repeat medication as a proxy for a neighbour via the website would be withdrawn from November. KM advised that proxy access via the website had to be withdrawn but it can

still be actioned via the *NHS App*. However the patients must apply for proxy access via Reception as it needs to be set up individually. AC to advise patient via Gmail.

b. Patient questions directly received for Practice Management

i) Ongoing issues with telephone system.

TS and several other patients have emailed reporting continuing issues with the telephone system. It seems that callers can reach No.1 in the queue and then remain there for 30 minutes or more and never receive an answer. Others have been cut-off after a long wait at No.1. TS are also aware of another surgery using the same telephone system, experiencing the same problems.

KM explained that investigations have been made in conjunction with the service provider in an attempt to discover why this happens; it is not an operator issue and staff certainly do not deliberately cut-off or ignore callers. The issue appears to be in the system software but the service provider cannot track the problem without accurate information (due to the sheer number of calls being received).

Patients are requested to log the timings of their calls and to report problem occurrences e.g. via the *Contact the Practice* page on the website, FAO: The Practice Manager (PPG members could email KM direct). The following information will help to trace the fault in the call-logging data:

- The telephone number you are calling from
- The date and time call starts and start position in the queue
- The time when 'position one' in the queue is reached, and
- The time the call is cut-off (or the caller gives up due to no answer)

ii) TS had reported that one set of ECG machine leads were broken resulting in HCAs having to share a machine. KM advised that these have to be sent away for repair but that they are now functioning again.

iii) As a follow-on from last meeting, TS raised the issue of inconsistencies with information available on the NHS App vs Patient Access such as test records and hospital letters. The systems are different and KMP cannot change the default software offering. KM explained that the NHS App should show all recent surgery/Practice records and test results but not hospital records and test results; unless they have been specifically sent to the GP. Patients can opt to have historic data (including correspondence) added by contacting the surgery. Further information about the NHS App and support pages can be found via the NHS website at <https://www.nhs.uk/nhs-app/>

iv) PM emailed with a concern that no doctor was available when he rang at 5.00pm. Dr Tucker advised that there is always a doctor available until closing at 6:30pm. However if the same-day appointment list is full, unless the problem is serious, a patient will be requested to call back the next morning.

5. Treasurer's update

CR confirmed that the 50% contribution to the new Health Kiosks has been transferred.

PPG account balance is still just over £51,000. We have used approximately half the original bequest in 9 years. For Finance Policy – See Item 8.

6. Practice update

Dr Tucker reported that Reception is fully staffed and any delays in answering telephone calls is simply due to the volume of calls received and that some calls can take considerable time to deal with. There is always two Reception staff, sometimes three, on duty in the morning. Also:

- Dr Daniele Savile-Tucker is now working 2 ½ days per week and has taken on Dr Graham's patient list. Notifications will be sent out to advise this.
- Dr Manpreet Brah is now working 2 days per week as a locum but it is hoped she will join full-time as a GP.
- Dr Priyanka Shukla is working Wednesdays, Thursdays and Fridays until end of March and is also undertaking the admin work of Dr Downes who left.
- It remains the case that most locums do not usually undertake the significant admin work associated with consultations and this is left to GPs. Thus the Practice still requires more full-time GPs.
- The Practice Pharmacists, Sheue (4 days per week) and Monica (3 days per week) are an asset in helping to take the load off the GPs. They should be the first point of contact to answer queries about medication and also undertake medication reviews and arrange medication for patients leaving hospital. The Practice has also retained one *Virtual Pharmacist*, Mukesh, (telephone contact only) who specialises in diabetes; very helpful for the 600+ patients with this condition.

There were no funding requests.

7. Pharmacies update

Following on from last meeting AC liaised with the Kidlington Pharmacist.

In relation to the queuing in the rain issue, the original intention when planning consent was applied for was that patients would queue under the existing external cover (funded by the PPG during Covid). Unfortunately patients were not taking that option but the Pharmacist has now placed new "Queue here" signage outside the entrance to encourage patients to stay dry.

The issue of seating is more difficult to resolve as wheelchair access was prioritised, including a turning circle, within the Pharmacy space. Although considered, seating along the wall would restrict wheelchair access. They try to ensure that patients do not have to wait longer than 5-7 minutes and if longer, they are asked to wait in the surgery reception area and will be served there.

Further discussion in the meeting concluded that providing seating, even fold-up chairs, is not safe or practical and that for initial waits, it would be best if patients bring their rollator or similar (if they have one) in case needed.

One of the issues adding to queues when Covid vaccinations are in process is people queuing outside the Pharmacy instead of Exeter Hall. On one day there were 50 instances before they gave up counting!

Also patients are not leaving enough time from ordering to collection. Dealing with these cases compounds the wait for others.

The suggestion, adopted as of this meeting, is that we add a standing *Pharmacies update* item on the agenda. The Kidlington Pharmacist has been added to the *Virtual members* email group and he will liaise with Westlake Pharmacy (Yarnton) and the Parade Pharmacy (Garden City) and email AC with any comments or issues prior to each meeting. He will also receive the approved minutes for reference/feedback.

The Kidlington Pharmacist also stated that they “appreciate the support that we have had from the leadership and team at Key Medical GP practice, and we are really pleased that the new layout, though not perfect, is a vast improvement on what we had before. I also highly value the PPG's direct engagement with us and the opportunities it provides for us to serve the community better.”

8. PPG Finance Policy

The suggestion from GL that the PPG develop a Finance Policy occurred following the differing opinions on the size of contribution to give towards the Health Kiosks at the July meeting.

Some basic considerations were raised and this is clearly a topic with opposing views. As such, given the lower attendance, especially with the Chairman absent recovering from recent illness, we opted to defer further discussion to the next meeting to maximise the opportunity for input.

9. Cycle racks signage wording

To help publicise the work of the PPG it was agreed that stainless steel signs should be purchased and fixed next to the cycle racks (on the adjacent wall at Yarnton and on the concrete base at Kidlington). JH to draft wording and obtain signage quote for approval at next meeting.

10. AOB

It was felt that the kiosk installation may provide an opportunity to write another PPG article for Kidlington News and Yarnton Village News with an emphasis on using these to promote how we can help patients as a result of a bequest. AC to liaise with GL who has written previous articles.

11. Dates of next meetings

17th April 2024

17th July 2024

9th October 2024 (including AGM)

All 7.00pm at Yarnton Surgery (unless otherwise advised).