

WALLINGTON FAMILY PRACTICE

Notes of the Patient Participation Group Meeting Held on Thursday 26th May 2022

This meeting was held via Teams

Present:

Noor Sumun (NS) – chair
Jane Davies (JD)
Robert Mann (RM)
Christine O’Donohue (CO)
Ashish Pawargi (AP)
Veronica Renwick (VR)
Sarah Kavanagh, Practice Manager (SK)

Apologies:

Gareth Gregory – apologies received subsequent to meeting due to inaccessibility to Teams
Adrian Mann
Jas Weir – apologies received subsequent to meeting due to inaccessibility to Teams

1. Welcome and introductions. Welcome to new member of the group AP. SK reported several new members in recent months.
2. Minutes of the last meeting on 10.2.22 were approved, nil actions.
3. PRG meeting dates and minutes were circulated for information.
4. NS presented an update from the PRG meetings held in March. This included;
 - a) Replacement of Andrew Macdonald with Colin Wilson although he has already been moved to a new position at Healthwatch and someone else will be taking his place (Catrina) to work more closely with PPGs.
 - b) Patients no longer receiving copies of prescriptions. Local pharmacies have been tasked with putting up posters advising patients they can request this if needed.
 - c) Over 75s and extremely clinically vulnerable spring Covid boosters is ongoing.
 - d) PCN update and health and wellbeing plans (presentation to follow).
 - e) PRG meetings now face to face, every two months, last meeting held at Sutton High School.
 - f) Digital exclusivity – ongoing review to support that cannot use online services.
5. Website – VR reported she finds the website difficult to use. Most of the useful information is in the practice information section in the right hand panel very small. The ‘rooms’ don’t take you to what you want to know. SK said she will ask the website provider if the practice information section can be made more prominent. She also advised using the search bar as a way to successfully find particular things. SK confirmed she too finds the website a little difficult at times despite previous changes, however, some items such as rooms are not changeable although we can add to them. SK is joining a SWL digital project specifically looking at websites so this might help us to review our website provision in future.

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6. Texts from the practice – VR queried whether texts sent about additional services over bank holidays were from the practice as it's not always clear and she has concerns re: scams. SK confirmed the sender does not specify WFP as its sent using a service called iPlato although she will check if anything can be done to change this and she will also ask the staff who initiate the texts to try and ensure that the text does say it's from WFP somewhere in the body of the text or at the end characters permitting.
 7. Online access – SK confirmed you can register for online access via the website. She also said there are different apps you can set up to use online access including the NHS app and its patient choice which they use. SK recommends patient access as it's really clear and easy to use. The app only draws through the info relevant to your record and its set up by the patient so it's very safe. Use of the NHS app means that app verifies your identity and the practice doesn't get involved in that process. Use of the website/other apps requires ID verification by the practice. Significant discussion took place regarding online access and how the group can support the practice to get as many patients as possible using this successfully. IT training/use of appts generally was also mentioned and this has already been discussed in the Wallington Wellbeing group who have open days (twice yearly) but next one not until September. We could also approach local stores and consider a drop in at the practice or at the monthly market. SK will investigate further. AP has confirmed he is very happy to help with this. SK will also see if the PCN wants to look at doing this to support all patients.
 8. Proxy access for children – SK confirmed this is up to age 11 only at which point it's disabled for safety reasons and as per guidance. Between the ages of 11-16 proxy or online access is not available to protect children as they become Gillick competent and may not want parents to know particular parts of their record or consultation history. Parents can still request copy results if needed via the admin team.
 9. AP raised some feedback regarding recent blood test appointments in Mitcham/Epsom. AP will send SK the email so she can raise issues with the service.
 10. Appointment book changes. SK advised the group of proposed changes from July. This will mean that patients can no longer make an appointment in advance beyond the end of June. All medical matters (that are not specific to the nursing team) will be addressed on the day. This is to address three very important issues.
 - a) Ensuring the workload across our all clinical staff is managed appropriately. This will help us to recruit and maintain good staff which has proved very difficult in recent times and this ultimately affects the service we can provide to our patients.
 - b) Reducing the wait for all patients to be seen or spoken to within reasonable timescales. This has risen to an unacceptable level in our opinion.
 - c) Removing the need to re-book patients at short notice if staff are unwell and unable to come to work.
- From 4th July if patients need to speak to a clinician about a medical matter whether its routine, urgent, a follow up or a new problem patients will need to call or go on line on the day to make an appointment. Whilst appointments remain available patients will have a choice of GP or Physician Associate and a choice of telephone or face to face. When the initial appointments available have all gone for the morning and then the afternoon patients will need to telephone if their need is urgent and address this with the reception care navigation team (option 4 on the phone system). These staff will ask for more information as this helps them to signpost the need appropriately either within the practice or externally to another service. Not all matters are appropriately addressed by a GP and neither is there

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enough GP time available for them to deal with everything. For example, patients might be referred to a practice based pharmacist, a physician associate, a physio, a social prescribing link worker or community pharmacy.

From July phone lines for appointments will open at 8am and again at 2pm. Online appointments will be available from 7am and 1pm Mon-Fri and we will encourage patients to use online access to make appointments as much as possible to avoid delays on the phone. Extended hours and nurse appointments will be unaffected by this change.

Comms for these changes will be throughout June via the phone system, website and leaflet to patients. We will also ask our local pharmacy colleagues to help us with this.

11. Definition of a clinician, a qualified and registered individual who can address appropriate clinical matters with patients within their agreed sphere of competence. Roles within general practice are changing rapidly and we now have a whole host of people working with us and available to deal with issues appropriately such as doctors, nurses, FCP Physios, social prescribers, health and wellbeing coaches, pharmacists and physician associates. We are producing information to share with patients about these roles and we hope that this will be done consistently across the whole Primary Care Network.
12. Date of next meeting – 8.9.22 at 5pm.