



Patient Participation Group

Note of the meeting held on 5th June 2023 at Woolpack House

1. Attendance and apologies

Present: PPG members: Murray Rose (Chair), Tony Cleaver, Sally Downs, Kathy Gibson, Dianne Gomery, Eric Graham, Kate Henderson-Nichol, Tim Howell, Anna Hunter, June Hutt, Ellen Murphy (Minutes), Phil Rigby, Gail Smith.

Practice: Wendy Stevens

Apologies: Frank Healy, Robin Peach, Charlette Sheil-Small

2. Minutes of the last meeting

The minutes of the meeting held on 24th April were agreed.

3. Matters arising not covered elsewhere on the agenda

- The *Mission Statement* agreed at the last meeting had now been combined with the *Terms of Reference* drawn up by the practice, and this document would be shared on the PPG page of the website. **Action: Wendy.**
- *Diabetes:* The York and District Diabetes Association had confirmed that they offer support for pre-diabetes as well. Leaflets are to be made available in the practice, advertising the Association, as discussed last time. Dr Eaton has agreed to speak at the Association's meeting in July. Kathy would be attending the Association's meeting that evening
- Following the last meeting, Robyn had issued an update about the PPG and its work so far. The action that Ellen and Anna had planned, in terms of issuing a statement, had therefore been put on hold for now. Further consideration would be given in due course to publicising the PPG's work.

4. Veterans

The Practice had prioritised veterans as a group, but had only identified 50 to date, which is likely to be less than the actual number. Murray and Kate had had a successful meeting with representatives from the British Legion, SSAFA and some veterans, and the group had agreed that it would continue to meet.

A draft action plan had been drawn up in the light of that meeting, to take this work forward. This was agreed subject to amending the wording in two respects (**Action: Murray**):

- veteran status doesn't give priority for appointments, but does provide access to specialist services, so that health needs can be identified earlier, thus reducing pressures later on

- the NHS Promise in respect of veterans also extends to families (**Action: Sally** to share the relevant information with Murray)

The inclusion of the families of veterans will also need to be reflected on the registration form, and in how Reception staff manage initial contacts. **Action: Wendy** to check and follow up.

There is to be a further meeting with the veterans group on 21st June.

5. The new website

There was extensive discussion of the new website, which was launched last month, and the following **feedback** was offered:

- the Klinik system for **booking online appointments** is almost permanently shown as being 'temporarily disabled'. Information is needed to explain why this is: that only a very limited number of appointments are available via this route per day
- there are currently two different links on the Appointments page for seeking an online appointment: "Consult with us online" and "Consult with your doctor online". Both lead to the same place: the Klinik system. One of these links is therefore redundant and needs to be removed, to reduce confusion
- there are some indications that appointments under the Klinik system are being taken up by pharmacists. **Action: Wendy** to investigate
- the link to the **NHS App** goes to a separate page, with no back button to return to the practice website. This could cause access difficulties
- there is currently no link or signposting on the web pages to the **Patients Know Best** system. This is potentially a very useful system for being informed about hospital appointments and test results
- there are currently some gaps in **staff images**
- the importance of **accessibility** was noted, bearing in mind that some patients either have no internet access at all, or have difficulty with negotiating online technology. Different modes of communication are therefore important
- experience elsewhere underlines the value of **updating patients on how and why the website is being changed.**

Next steps

Wendy noted that the website still needs a lot of work, and that some of the functions are not yet performing as expected. Resources are currently very constrained for taking this work forward, and further progress will depend on the appointment of a Digital Data Manager, with interviews due at the end of June; only one application had however been received to date for this post. Some concerns were expressed within the PPG about the risks of combining too much within this role, as the skills required for data management and for web design are very different.

The wider context was also challenging, as an NHS requirement is being brought in nationally from 30th June for all enquiries to GP surgeries to be dealt with within no more than 48 hours. The web site would be a key part of dealing with this. It was however likely to be October before the necessary improvements to the web site can be completed.

PPG members sympathised with the pressures outlined by Wendy, but also underlined their concern to see progress on the website, in the interests both of patients' experience and the potential to reduce pressure on staff once signposting and online functions are working as intended. PPG members noted the importance of online appointments as a key area within the website, and asked that this be regarded as a priority. It was suggested that it would be worth exploring options for free internship to assist with website development from the university or Medical School. PPG members also noted the importance of web site activity being championed and supported by the Practice's Partners, and asked whether there were other GP practices locally from whom effective web design could be copied.

It was agreed that:

- a small group will be convened to provide feedback and support in respect of website development (**Action: Di, Anna, Sally, Ellen and Wendy**, joined if possible by Leandro Soares (first meeting subsequently arranged for 19th June)
- Di and Anna will join the interview panel for the Digital Data Manager (**Action: Wendy**)

6. How the Practice responds to feedback from patients

A number of examples were discussed which pointed to the need for more explanation about why certain types of communication are handled in the way that they are, for instance:

- If a GP requests a prescription review, as part of a consultation with a patient, the only way to get one is to ring at 8.00 am, which may then not prove successful. It isn't clear to patients why an appointment cannot be arranged internally
- Similarly, when in contact with the Prescriptions team, it isn't clear why a patient who needs an appointment can't be transferred internally to the appointments line. **Action: Wendy** to investigate
- When ordering a repeat prescription, there is a field for entering notes, along with a caveat that notes may not be read. This can lead to a lack of confidence about whether or not the note has been read
- There were examples within the group of not being able to get an appointment for some weeks, for a potentially concerning issue. This led to considerable frustration, especially where a patient had reasons to think, following public health advice, that an urgent appointment was necessary
- Patients needed to be educated further in how best to access services, including signposting to help with understanding where to go for particular needs. Having a set of FAQs on the web page would help with this.

Meeting dates

Meeting dates for the rest of the year are as follows, all at 5.30 – 7.00pm at Woolpack House:

Monday 4th September; Monday 6th November.