

# Minutes

## Hill Surgery Action Group (HSAG)

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*Date: 18th March 2024  
The meeting was virtual.  
Minutes Maxine Green*

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### In Attendance

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Nick Andrews, Maxine Green, Anita Waters, Paul Rodger

Apologies: Victoria Peckham & Karen Purser

This summarises the Hill Surgery Participation Group (PPG) and Hill Surgery (HS) meetings.

The PPG's David Standen Chairperson invited HSAG as guests to the meeting, during which HSAG's agenda was discussed alongside the central meeting. After the meeting, HSAG's committee meeting took place, which will be reported separately.

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### PPG Meeting: HSAG Voting rights at PPG.

HSAG representatives could not join the PPG meeting initially and missed discussing their voting rights. Due to perceived conflicts of interest, the PPG/Hill Surgery decided that HSAG can attend meetings but cannot vote individually or as a single representative/entity. HSAG challenged the decision, stating past attempts to join the PPG were not acknowledged and remain unanswered. TK supported the idea that the constitution could include representative groups such as HSAG or HVA, providing a constitutional agreement and an appropriate confidentiality agreement for further discussion.

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### PPG meeting: Becoming members of the PPG and the Hill Surgery PPG

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- Hill Surgery has formed a new Patient Participation Group (PPG) because the PPGs of Beaconsfield Road and Harold Road were disbanded due to past committee members' resignations. TK has proposed a steering group to agree on the next steps and implement a policy. HSAG has been invited to join this group and looks forward to participating.
  - DS has been covering all the positions of PPG, from Chair to Secretary to spokesperson between Hill Surgery and patients, since no one came forward to self-nominate or take up these positions, even temporarily. This was David's second request to help form a cohesive committee.
  - Dr Parker explained that membership to the PPG must go through the email system and cannot be circumvented by a direct approach to David. She went on to explain the IT system faced technical challenges, causing email issues, which is why, for a few months, PPG membership applications had not been received/processed. This will soon be resolved. However, the criteria and approval process for PPG membership were not properly confirmed and remain unanswered. **Pending.**
  - HSAG members informed the meeting that they had tried without success to join via email, and one had hand-delivered application forms, but there has been no response. Applications must go to the DS/Chair, but sending applications was impossible. **Pending.**
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### PPG Meeting: Engage Consult and NHS App

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- The differences between Engage Consult and the NHS App were explained. The discussion was productive, and both parties agreed that these differences should be communicated to patients. Patients should be encouraged to use these resources as they are helpful and can reduce the burden on the limited GP services.
- **The NHS App** is a secure and user-friendly platform that allows patients to access various NHS services, including Engage Consult. Patients can view their prescription details, order repeat prescriptions, and choose

their preferred pharmacy. They can also view their test results and see GP/Consultant letters. The App provides a lot of general advice. Although the app offers excellent functionality, it is less interactive than Engage Consult. It is easy to register for the NHS App. Online or at the surgery.

- **Engage Consult** enables patients to communicate securely and safely **online with Hill Surgery regarding non-emergency medical conditions**, administrative questions like repeat sick certificates and fit certificates, and arranging non-urgent video or phone consultations with a medical practitioner. It also provides 24/7 access to symptom-specific self-help information and easy access to other local NHS and self-care services. **Engage Consult allows for a two-way information flow, and Hill Surgery can respond to messages or phone calls faster and more effectively than going through the call centre.**
- As with all applications, it is essential to be **clear and concise about what is required**. Engage Consult is best suited for simple requests that can be quickly triaged and responded to by a medical or clinical team member, not necessarily a GP, unless deemed necessary. All these services are far more effective if the patient is clear on what is wrong, what they would like and how they would like to receive the information. It is not for appointments. Responses are usually the same day, if not the following day.
- HS will add tutorials and 'how-to guides' to the website, and HSAG will do the same. Dr Parker said a video tutorial was added to the 'chat', and Julie Holloway has agreed to make this available. It was confirmed that Dr Dann was too busy to help create a tutorial, but all agreed it was needed. **Pending.**

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### PPG Meeting: Appointments

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- Dr Parker explained that HS is extremely busy and has limited resources, so seeing a doctor when needed can be challenging. To ensure that everyone who needs to see a doctor can, HS (along with many other GP surgeries across the UK) uses a system where patients can only book appointments on the day they want to be seen. This allows more people to be seen quickly, especially those with urgent health concerns.
- While this system can be inconvenient for patients who need to plan, it's the safest way to manage a limited number of doctors. The surgery always looks for ways to improve it to meet patients' needs. However, this is the safest way to manage a limited capacity with limited GP resources and high demand.
- Sometimes, patients book appointments far in advance and do not need them when the time comes. This can cause problems because other patients who need to see a doctor urgently might be unable to get an appointment. That's why the surgery uses a call centre or the Engage Consult tool to help decide who needs to see a doctor urgently and to look at other options, such as seeing a qualified nurse practitioner or other healthcare assistant.
- Booking appointments far in advance can also mean that patients must wait longer to see a doctor for non-urgent issues. During hectic times, this can mean that the next available appointment might be weeks away. By only offering same-day appointments for urgent matters, HS can make sure that everyone who needs to see a doctor can be seen as soon as possible.
- Going through the call centre appears to be the best route. This means that the patient spends less time on the phone. The patient is then triaged, and a plan is put in place, which may or may not mean seeing a GP but another clinical professional.
- What was not clear was whether a patient has to phone every day until they see a GP or is the best route to record a request via Call Centre or Engage Consult where the request is carried over. HSAG has received numerous complaints that if they cannot get through, they have to start all over again and ask how they record a request to see a GP or clinical practitioner. **CLARIFICATION REQUIRED - PENDING,**

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### PPG Meeting: Patient Charter

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MG has raised concerns about the HS Patient Charter, which outlines NHS England's commitment to responding to patients within specific time frames that are clearly not being met. Although the Charter is a generic statement of intent issued by NHS England, and not specifically for HS patients, the HS's ambition is to reach the level outlined in it. The Charter is more of an aspiration than a promise, and the surgery knows it is not meeting the parameters outlined. However, it remains committed to improving its service levels.

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### PPG meeting: HSAG actions on social media and members' anti-social behaviours

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Dr. Parker expressed concerns about HSAG's actions during a meeting, citing that their social media activity was unhelpful and demotivating staff at The Hill Surgery. HSAG explained that the group was formed because there was no other platform for meaningful dialogue with HS staff about the issues since the merger. The group has already responded to concerns about anti-social behaviours in a letter from JH, the Practice Manager, copying GP Partners and outlining membership rules and the group's Code of Conduct, making it clear we cannot be held responsible for the few patients who chose to be rude or obnoxious. It was pointed out that HSAG represented less than 1% of the patient list, which was counter-argued that the PPG represents far fewer and has no constructive working group, which is why patients felt the need to join our membership in the first place. At the meeting, HSAG confirmed that they are not adversaries but are seen as critical friends with the same hopes and aspirations for improved service from our healthcare providers. The group recently launched a website to centralise communications and promote services, thus reducing the need to use social media platforms as a communication channel in the future. Whilst HS would prefer everyone to deal with the current ineffective PPG, HSAG cannot be ignored, and want to work together rather than constantly being pushed away for the benefit of patients and the HS staff. Fortunately, the PPG Chair and a few members supported this position and agreed that we could work together, and a steering group should be put in place to facilitate this.

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### **PPG meeting: Pathology samples**

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Dr K explained why a patient/member was asked to provide another urine sample after receiving a 'negative' result on the first one. There was confusion about whether the first sample was ever processed correctly and some misunderstanding about the information given to the patient regarding the validity of the test and the timing of getting the sample to the Pathology Lab. Dr K explained that sometimes samples need to go through multiple tests. Even if one test returns negative, the sample may need to be cultured to investigate further. It's not uncommon for patients to be asked to provide a new sample. The speed at which test results are now available on the NHS App also compounds the issue sometimes, especially when a patient is unclear about how the test is being processed from the start. Most of the confusion can be traced to the clinician not providing enough information when requesting the sample or relaying the results to the patient accurately.

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### **PPG meeting: GPs working from their homes.**

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A question was asked about patient record access for GPs working from home. It was confirmed that GPs can access records with the appropriate levels of NHS system authorisation. All patient information is encrypted and safe, with a unique pass key and password protection. This is not available to the Call Centre staff, who have limited access, like the surgery reception team. Recent IT failures have not helped the situation, nor have unplanned changes by NHS England that can disrupt the service and smooth running of the IT by introducing new processes without adequate timing or communication. GPs can access critical information on the practice database but may not have immediate access to anything on other platforms, such as hospital systems, consultant feedback scans, etc. Sometimes, a patient can misinterpret this as not having the records, which is not entirely the case.

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### **PPG meeting: Any Other Business**

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- A PPG member (Tom Kelly) sought further clarification about confidentiality agreements for the PPG/HSAG. Pending
- HS patient list was confirmed at circa 20875, and duplications post-merge of the databases are now resolved.
- A request was made for a face-to-face PPG meeting as the technology is cumbersome for many participants, and not everyone can access the required technology.

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### **PPG meeting: Date of next meeting**

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**22 April 2024 – Planned virtual meeting. David Standen to share links and minutes from this meeting, which was recorded.**

A separate committee meeting took place post the PPG meeting by HSAG and will be recorded separately.