

Hill Surgery Action Group (HSAG) and The Hill PPG

Date: 22nd April 2024 16:45

The meeting was a combination of in person and on-line

Minutes: Nick Andrews

In Attendance

Nick Andrews, Maxine Green, Anita Waters, Paul Rodger, and Karen Purser

In attendance (and active) for the PPG, on-line via Teams: David Standen, Tom Kelly, Ann Kent, Jenn Hesmer and Andrée Stevens.

In attendance for the Practice, on-line via Teams: Dr. Milan Radia, Shane, and Julie Holloway

In attendance for CallCare, on-line via Teams: Caroline Gough

Proposal of PPG Constitution and Terms of Reference (TOR)

The new constitution and TOR proposed by the PPG steering group had previously been circulated to PPG members and practice staff by the Chair. MG introduced these using a PowerPoint slideshow presentation.

Dr. Radia pointed out that there was no 'budget' as referred to in the presentation, (although historically NHS England had proposed a budget of 2.5% for PPG admin costs. Since then the GMC has removed the compulsory budget with no alternative. This will require further discussion) but said that he was happy to continue funding Teams calls.

He also said that while a practice partner will endeavour to attend each PPG meeting, it could not always be guaranteed due to pressure of work.

The new constitution and TOR, including the new positions of PPG Officer for MG and NA, was proposed by DS and seconded by MG. This was ratified by a majority show of hands.

DS asked for nominees for the position of Vice Chair and Secretary. MG proposed TK for the position of Vice Chair (with his agreement), which was seconded by DS. This was ratified with a majority show of hands.

It was proposed that until such time as a secretary could be found, members of the committee will take turns to volunteer to take notes and issue minutes for each meeting. The recordings will be archived and available if required.

DS announced that the previously broken email for PPG applications is once again functional. All applications via the practice website will now be forwarded to him for review and discussion within the PPG committee.

CallCare report

The various slides presented by CG showed that the additional training provided by the practice appeared to be resulting in improved triage and reduced call times (on average 6 minutes) compared to previous months. The average time to answer a call had also improved, but is still, on average, 24 minutes. A consecutive call & call-back from/to the same patient are measured as one call.

Customer satisfaction surveys given randomly show a performance of around 65% - 70%. CG could not provide figures on what percentage of patients receive survey questions, but she would provide that information at some time after the meeting.

Dr. Radia stated that not all calls are treated equally; Care homes, palliative care patients, carers, those with disabilities and others are given priority. He will provide a full list of callers that have priority status at some time after the meeting.

Surveys of calls have shown that some patients call repeatedly. One patient called 64 times in a month; the surgery are aware and managing the situation.

CQC requirements

Dr. Radia announced that over the past 5 or 6 months since the merger, practice staff have been working hard to monitor the KPI's required to measure surgery efficiency by the CQC. Under Shane and the Executive Management team, this initial work has now been completed and submitted to the CQC for review. He had no way of know when a report or inspection would be forthcoming from the CQC.

QOF Quality Outcomes Framework

Dr. Radia announced that the current practice score is 90%, which is the average for 70% of UK practices.

Friends and Family survey

This is an NHS survey questionnaire sent randomly to some patients. The current results for the practice 80% find it good/very good, 13% find it poor/very poor. Dr Radia stated that the practice is working hard to improve these figures further.

It was pointed out that Dr Dann had volunteered to add videos on the use of Engage Consult to the website, but has been too busy. At Dr Radias' request, Julie Holloway will circulate the NHS training videos to all non-practice meeting participants.

New clinician videos

Dr. Radia announced that there are new explanatory videos on the role of each clinician type soon to be launched. These will be shared with the PPG committee for review and will go live on 7th May.

Complaints to the practice

During January, February and March the average number of complaints was 44. Currently for April they have received 20 complaints.

HSAG note: Complaints are submitted in writing to the Practice Manager. How are these sorted, discussed, measured and confirmed? Where are these and the responses filed?

DATE OF NEXT PPG MEETING: Friday 24th May 2024. Meeting closed at 18:25

HSAG COMMITTEE BUSINESS FOLLOWS:

Approval of minutes from previous HSAG meeting on 18.03.24.

APPROVED: Not approved – moved to next meeting

SECONDED: Not seconded – moved to next meeting

Actions: None

Upcoming meeting with officer from NHS Sussex ICB

Maxine has been invited by Sally Hunter of NHS Sussex ICB to attend a Teams meeting. She suggested that NA also attend that meeting, if possible. Date to be confirmed.

Continued problems with sample handling, prescriptions and communication at The Hill Surgery

KP has yet to receive a clear explanation of her husbands discarded sample. Prescriptions are being missed or mismanaged in more than one case. Dr. Radia is very confident of the practice staff capabilities, but we wonder how much he hears about; how much is 'covered up'. A survey of HSAG members could provide useful feedback.

Medication reviews: we need to ask HSAG members if these are provided regularly and appropriately by the practice. What is the mechanism for activating medication reviews?

Merging of members on NextDoor and the website

As administrator, NA will extract a CSR file from the NextDoor HSAG group. This can hopefully be used to provide an accurate total number of HSAG members from both groups, avoiding any duplications caused by members registered on both platforms.

HSAG meeting closed at 18:40