**St John’s Way Medical Centre – Patient Participation Group (PPG)**

**Minutes of meeting on 25th April 2023**

**Patient Representatives**

Harriet Lane (HL), Janice Mavroskoufi (JM), Brendan Wall (BW), Frances Tomlinson (FT) (minute taker).

**Apologies:** Stephen Wood, Francis Jacobs

**Staff:** Jan Lenny (JL) - Operations Manager, Dalmar Costa - Practice Pharmacist (DC), Dr Tamsin Ellis (TE) – salaried GP.

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| **Agenda Item** | **Action** |
| **Quorum count and overview of meeting from the Chair** JL chaired the meeting in SW’s absence and invited those present to introduce themselves.  |  |
| **Minutes of the previous meeting and matters arising.**The minutes of the meeting on 16th February were agreed.  |  |
| **Updates from the practice****QOF:** JL reported on the performance of the Practice in relation to the Quality Outcome Framework (QOF). Among the targets set were those relating to the management of patients with long term conditions, requiring that at least 90% of patients were recalled and had their treatment reviewed. This had been achieved successfully overall, despite the problems involved in recalling people with diabetes. However the target of 90% for child immunisations had not been achieved. There were a number of challenges involved in meeting this target, including the growth of the anti-vaxxer movement, and the increasing number of children of migrant families. Failure to reach targets resulted in a reduction of funding to the practice.Members commented on their experience of being contacted multiple times by the practice to book appointments for blood tests, when these had already been conducted in hospital. On some occasions it was necessary for patients to be seen both in the practice and in hospital, but it was agreed that linkage between hospitals and the Practice in the administration of care for people with long term conditions could be improved.**Frequent attenders:** JL reported on a programme to reduce the number of attendances by patients who in a few cases were attending as many as 70-100 times in a year. This impacted negatively on the capacity of the practice to offer appointments, so staff were looking at how to reduce the number of attendances by particular patients. It was thought that in some cases their problems were more social than medical, which could be managed in other ways.BW asked what the average time was to wait for a GP appointment. JL said it was currently 4-5 weeks. The number of bank holidays this May was making it more difficult to fit patients in.  |  |
| **Green project**Dr Tamsin Ellis joined the meeting to introduce an initiative that she is leading to address environmental issues affecting the work of the Practice. These included measuring air pollution, which is dangerously high on Holloway Road. A related issue of concern was the high use of asthma inhalers, which contribute to greenhouse gas emissions. A less polluting alternative is available, but is more costly. However the Practice is now able to provide this alternative. TE asked for members’ comments and ideas on greener initiatives; members asked about prescribing activities such as water aerobics and gym memberships. However TE reported that reviews had shown that these were not cost-effective as people often did not turn up for the activities that they had been prescribed. It was noted that although the PPG well-being groups (art, singing and gardening) no longer run, there are many other free activities available locally which should be promoted by the Practice. The Practice is investigating ways to reduce waste; it was noted that it may be possible to recycle blister packs. |  |
| **PPG sign-up sheet**JL informed the meeting that the information leaflet and sign-up sheet that HL had written would be available both in the Practice and on the website. It is hoped that this will encourage more people to join the PPG. | JL |
| **PPG improvements to Practice**JL provided some feedback on issues that had been raised at previous PPG meetings. Members had asked whether the 10 minute appointment time could be extended; although ideally the Practice staff would like to extend this time, it was not possible without breaking the contract requiring a minimum number of patients to be seen. Members asked about self-referral; JL replied that more training was being given to reception staff in signposting patients to self-referral options, JM reported that there are courses in self-care available at the Whittington Hospital, to which it is possible to self-refer.Work on improving the Practice website to make it easier to navigate is on-going with the help of a digital lead person appointed by the Primary Care Network. JL asked members’ views on a survey of users’ opinion on the website; however experience shows that response to surveys is usually very low; members thought that a focus group might be a better way to obtain feedback. | JL |
| **Q and A with Dalmar Costa, Practice Pharmacist**JM recounted her experience of items being taken off her prescription list without explanation; getting them put back required contacting a doctor and was quite an onerous process. DC explained the distinction between one-off prescriptions, repeat prescriptions and variable repeat prescriptions. It was the variable repeats that were more problematic. BW asked if it is possible to have a repeat prescription for antibiotics, DC replied that these may be available for those with long-term infections, but there are no strict rules. Packs for emergency use are available. DC agreed that there was a need to streamline the system in relation to contacting patients and follow-up appointments, with better co-ordination between doctors and pharmacists, particular where people are on multiple medications. He agreed to follow-up the specific issues raised by individual members. | DC |
| **Suggestions for agenda items for next meeting**It was suggested that the different systems used currently for communication between the Practice and patients (NHS app, Evergreen, econsult, texts, email, telephone…) might be a useful topic to discuss.JL agreed to see if a Practice GP was available to attend the next meeting.In relation to members’ expressed wish to return to in-person meetings, JL reported this is not currently possible as the meeting room is being used as an office, following flood damage at the surgery. But when the damage is repaired it may be possible to arrange meetings at the Practice again. | JL |
| **Date of next meeting**A provisional date of 20th June was set. |  |