Colchester Medical Practice Patient Participation Group (PPG)

Minutes of meeting held on Monday 10th Feb 2025 at PH site

Present: PD, JS, MB, TS, CJ, PT, DF & TF

Apologies: AL & PL, MC

Present - CMP Joe Oxley (Business Manager) Alasdair McEwan (Digital and Transformation Lead)

JO introduced the meeting. TF kindly gave positive feedback about a member of our SES reception team that had assisted him on a visit to his surgery site, the feedback has since been shared with the staff member.

Minutes of the meeting on 13 01 2025 were approved by the group.

JO discussed the unresolved issue of electing a PPG group Chairperson. As one of the interested parties (RW) was held up in traffic we delayed this item until he was present.

CMP Update – JO

- Under the PCN Pilot Scheme, we now have 20 new roles in place thanks to the additional funding.
- Around 300 reviews of patients with frailty have been carried out.
- The list size is increasing steadily-in part due to new robot enhanced remote registration process for patients. We are monitoring list size expansion on an ongoing basis.
- The new website is (as of today) operational and so far, feedback is positive. The new online platform (AccuRx) is performing well, allowing patients to easily request medications, raise admin queries and request advice / information / an appointment in relation to health issues. It is much easier to match patients to their demographic details on the clinical system and for staff to match them to the correct site. The website will need a lot of work and there are items of outdated content on there, which we are working hard to resolve.
- Winter pressures seem to be abating slightly, and Colchester General Hospital is operating under slightly less pressure.
- Saturday appointments with GPs are going well with an additional 3 sessions per week having been added. These are all pre-bookable appointments, walk ins are not permitted as CMP is not equipped to deal with emergency presentations.
- There is a new care home being built in the catchment area for Wimpole Road Surgery. This will add pressure to the service, but it is realistically funded by NHS England and this will allow us to resource the service. In answer to a query, we generally do not turn away care homes from within our catchment. Most visits to care homes are carried out by Health care professionals such as Paramedics or Advanced Nurse Practitioners so there is less impact on GP resilience. There is an increasing number of care homes for patients with Learning disability across the whole CMP estate.
- We discussed the Health and Wellbeing Hub (HWB) and reiterated the importance of promoting this service- this is being taken forward as an action point. This led to discussion around use of various mechanisms for reaching out to patients-notice boards, screens, the website and the NHS App

PPG Chairperson-JO

There were two candidates who both presented their vision of the role. There was a vote which narrowly went in favour of one candidate (RW) who suggested that it might be a good idea to have joint chairs, as a result, TF was coopted as joint chair. Congratulations and thanks to both, further discussion to follow around regular contact channels with JO and AM, time for chairs to visit sites and get organised in the roles. AM will circulate a PPG constitution.

Feedback from patients

AM produced some anonymised raw data from the NHS Friends and Family Test (FFT) which included only responses in the two worst score points 5/6 and 6/6 based on a scale of 1-6 with 1 being the maximum satisfaction score. The data needs further sorting and AM will do this ahead of next PPG meeting. One of the biggest causes of dis-satisfaction is appointments being cancelled last minute by the surgery due to sickness or other reasons. Where possible a close alternative is promptly offered, but it's not always possible to do this due to staffing. We discussed Phlebotomy as some responses indicated that a few patients have had bad experiences. It's difficult to take blood sometimes, for many reasons-not always or often to do with staff competencies and training-some patients are just difficult to draw blood from and everyone reacts differently. New Phlebotomists are given extensive training and practice before they start work.

We also discussed the costs of sending out bulk SMS to patients and the high costs involved. This is an argument in favour of using the NHS App (as messages are free on this) however in other respects the NHS App is quite difficult to use. Many patients find using the practice online platform much easier.

PPG priorities for focus in the coming year-the following were agreed:

- Health and Wellbeing Hub-promoting and explaining the service to the patient group
- The online presence of the practice (website, digital platform)
- Further review and analysis of patient feedback
- Introducing online PPG meetings
- Communication with patients- a newsletter / patient noticeboards
- Dignity / Privacy issues for patients presenting at Open Access clinics

ACTION POINTS

- Circulate PPG constitution for approval (AM)
- Review raw FFT patient feedback, identify and present trends for next meeting (AM)
- Liaise with PPG Co-Chairs around contact arrangements, meetings etc (AM, JO, RS, TF)

Next Meeting Mon 07 04 2025 Parsons Heath site 18 00 hrs