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| **Date** | 01/03/2023 | **Time** | 18:30 |
| **Meeting Chair** | Danielle Bagley – Deputy regional manager (DB)  | **Note Taker** | Dean Nagle- Practice Manager (DN)  |
| **Attendees** | Danielle Bagley – Deputy Regional Manager SouthwarkDean Nagle- Practice Manager Queens Road Surgery Patient representatives: 11 present  |

**KEY INFORMATION**

**Second Virtual Patient Participation Group Meeting**

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| **Agenda Item** | **Discussion** |
| **Agenda** | * Introductions and Ground Rules
* Staffing Update
* Practice Updates
* Dr IQ data/updates
* Patient feedback
* Future plans including practice and patient joint working
* AOB
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| **Introductions** | * All representatives and patients introduced themselves
* Patients shared how long they had been registered and their journey with Queens road. Majority of the patients in attendance been with Queens Road longer than 8 years

DB explained the ground rules of the meeting:* One person talks at a time
* Respect all members and their contributions
* Do not use the meeting to raise personal complaints or issues
* Allow everyone to contribute
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| **Staffing Update for Queens Road Surgery**  | DB shared information with the group to do with new team member: * Multiple new admin team due to increase in list size.
* New GP Dr Bethan Jones working at Queens road Wednesday, Thursday and Friday (6 sessions). Explained that Dr Jones was previously a GP trainee at Queens Road and decided to stay on as a salaried Dr once her training was complete.

It was explained that while we now have 5 GPs working across the week we still have a vacancy for 1 more and are currently utilizing locums to fill this gap. * Nurse Jennifer Jusu has returned to working at Queens Road. She had previously left and returned and was working from the Lister practice.
* Due to high demand we have been offering additional nurse appointments at the Lister practice a few days a week to help with access.
* As an area we have appointed a new Regional Nurse manager Abha. Her role is to support the managers with nurse recruitment, training and development. She will also be supporting with regards to infection control and clinical aspects of nursing within the area.
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| **Practice Updates** | * In October we trailed and started to offer more face to face appointments. This came about after a survey was carried out of PTs to see what the preferred method of appointments was.

Pts raised the question on how may GP appointments are available on the day when they call in. DB Confirmed that each GP does 18 appointments per session. Each of our GPs does 2 sessions on the days that they work. Pts also wished to know how many GPs we have on staff at the moment. DN confirmed that Queens Road at the moment has 5 GPs on staff. Explained to the pts that these GPs do not work every day but work across the week with there being a good spread in the work load. It was also explained again that we are actively recruiting 1 more GP but are using Locum cover to ensure no loss of access until they have been found. * Due to the increase in patients we are now also offering more access to nurse appointments at the Lister practice. Unfortunately due to lack of room space we cannot accommodate a second nurse clinic being held from queen’s road but are hoping that in the future we will have more space to allow for this.
* Due to high volume of patient feedback with regards to how long the wait is on the phones we have now implemented a system that will add patients to a virtual Queue and this will call them back when the next available phone operator is available .

Lots of feedback from the group that the system to call back doesn’t work properly. DN explained that for this to work there must be 5 people ahead on the queue otherwise your call will continue to ring through. Lots of group feedback around the appointment booking system. Lots of times patients will call and be held in a queue until after half 8 and this will lead to all of the appointments being gone when the call is answered. DN explained that this is due to a high volume of calls but wanted to assure the group that we have plenty of on the day access. Unfortunate a high volume of calls can mean that appointments are booked up fast. DN also explained that as well as on the day appointments we can offer a select few prebookable appointments. These are either a telephone call with a GP or a face to face appointment with a Trainee GP or Trainee DR. The Group asked how long in advance can these be booked and also what the difference between a trainee GP and a Trainee DR are. DB and DN explained that while we would like to offer pre book as far forward as possible we cap this at current to 2 weeks to ensure that the access is still within reasonable time for patient. Explained that a trainee GP is one that has fully qualified as a Dr but is currently choosing to complete their specialization in general practice while a Trainee Dr is one who has completed medic al school and must work as a junior doctor for 2 years after they leave medical school. It was explained to the group that both of these cohorts of clinicians work under the supervision of a GP trainer. We currently have 2 Trainee GPs and 1 trainee Dr at Queens Road  |
| **Dr IQ Data/Updates**  | A quick overview of the Dr IQ app data was provided as well as an update on its working state. * **Over 11,000 patients registered with Dr iQ at QRS**
* **Over 65,000 online consultations processed in last 3 years**
* **Consultations submissions when closed – Sick note requests / Medication request / Blood test request / Chase referral / Letter request / update health data / reception desk queries**
* **Patient feedback of App is 4.8/5 on app stores.**

Group expressed some dissatisfaction with the way that the App works at times. DB encouraged the group and as she does all patients to submit as much feedback as possible around the way that the App works and anything that may be wrong with it. It is only through this feedback that we can pass on to the technical team that changes can be made to ensure the best for our patients. Our technical team are constantly taking this feedback and making changes to make life easier for our patients. Group expressed concern for those who may not be able to use the app as well as others. DN explained that the app does not take away from those who wish not to use it but in fact allows for the phones to be quieter by having those who can use the app use it instead of call the surgery. Pathways for those who are not able to use the app were explained. Patients can call or even attend the surgery to get appointments if that is better suited for them.  |
| **Patient feedback** | We use multiple streams of information to gather patient feedback. These may be Google reviews, NHS Choices or our own Friends and Family tests that get sent to patients. A quick overview of the feedback data we have is shared with the group.

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**FFT Results. Total ratings for Jan: 50****Question 1** **How likely are you to recommend our GP practice to friends and family if they needed similar care or treatment?**  **Number of responses** **Extremely Likely 19** **Likely 18** **Neither likely or unlikely 9** **Unlikely 4** **Extremely unlikely 0** **Don’t know 0** **Total 50**

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| **Question 2** |  |  |  |  |
| **How would you rate your recent overall experience of booking an appointment at this practice?**  |
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| Rating | Number of responses  |  |  |  |
| Excellent | 25 |  |  |  |
| Good | 19 |  |  |  |
| Ok | 1 |  |  |  |
| Not good | 4 |  |  |  |
| Extremely bad | 1 |  |  |  |
| Don’t know | 0 |  |  |  |
| **Total**  | **50** |  |  |  |
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FFT and Review themes:* Long wait time on the phones
* Lovely doctors
* Was seen promptly and looked after well. Good communication.

DN and DB encourage the group again to provide as much feedback as they can so that we can work to ensure that no concerns are left unaddressed. |
| **Future plans including practice and patient joint working** | We have plans for the future to provide more community based events. The suggestion from the managers is to hold smear events and carers events but we would love to hear your suggestions. Group suggests that we could hold more groups with regards to certain medical conditions so that those who suffer from the same illness may network and maybe provide some sort of support to one another. One person suggested teaming up with local mental health community groups around hosting open events and drop ins. DN has taken their details and will liaise with them around this. The Surgery would like to host more work on Health education so that our patients can be better informed of how they can manage their own conditions and health. Manager will be hosting a manager drop in clinic once a week for patients to drop in and discuss their concerns with the manager. This time will be arranged and communicated to the patient list as a whole. While there will be a designated time all patients can request to speak to the manager whenever they wish.  |
| **AOB** | No other businessEverybody thanked for attendingMeeting closed |