

BAILDON MEDICAL PRACTICE PATIENT PARTICIPATION GROUP

Minutes of PPG Meeting 29 November, 2023 at 2:00pm

Present: Lizzie Lister (Practice Manager), Dr S Patterson (GP), Janet Davidson, Sue Jerram, Jean Robinson (Secretary)

Apologies: Kevin Holland, Jane Johnson

Agenda

Minutes of Last Meeting

These were agreed.

Matters Arising

- **Telephone System** An update was given. The Practice changed to an internet-based system a few years ago, partly because of costs of calls being made during Covid. As part of the Modern General Practice Model, NHSE informed GP surgeries that funding would be provided to practices with analogue phone lines, to enable the transfer to cloud-based systems, which aims to improve patient experience of contacting their practices. However although they would pay for the hardware and transition, the call costs were likely to double. The cloud-based systems offer additional features such as call back and call queueing and are meant to stop the “8 o’clock rush”. Each of the ten approved suppliers offers different additional features.
- Jacquie Leake, Business Manager for Baildon Medical Practice, was able to establish through discussion with NHS Procurement that Baildon Medical Practice’s current internet system was sufficient and no change was needed other than an upgrade in due course. It was felt that some of the additional features following the upgrade may remain unused because the Practice still had the same number of Receptionists to operate any system which was in place. The Practice does not have a preferential telephone route to these other organisations though many patients are unaware of this.
- **Bingley Bubble Primary Care Network (PCN) PPG** Jean confirmed she had left the group. Another Bingley Bubble PCN member also stated on that day that she was standing down. Wilsden were to rejoin.
- **Planned distribution of questionnaires at the ‘flu clinics** This did not take place, partly because of the Care Quality Commission (CQC) inspection due in November.
- **Patient Questionnaire** Since the last PPG meeting, the planned distribution of questionnaires had evolved. At the end of appointments, patients had either been handed a questionnaire or sent an online link (set up by Bingley Medical Practice) via SMS the following day. Baildon deemed this to be more relevant than the national survey which went out to randomly selected patients who may not have attended for

some time and therefore did not have timely experience. This same questionnaire has been used for all practices within the Bingley Bubble PCN (Baildon, Bingley, Oak Glen, Springfield and Wilsden). There have currently been 303 responses to the Bingley Bubble PCN, with 125 completed by Baildon patients. It is not yet possible to attribute which comments apply to each Practice but this will be possible in the future.

Discussion took place about the benefits of continued options to complete the questionnaire on paper as well as by text link. This could be done very quickly at the end of each appointment with patients being given an option on how to offer feedback.

It was also stated that often the only people who respond to questionnaires are those with complaints. However, it was suggested that this could still be useful for the Practice as they would have an awareness of patient opinion and could respond if appropriate.

Surgery Update (to include feedback from CQC Inspection)

Inspection

Lizzie thanked PPG members for filling in CQC Inspection feedback forms and Jean for speaking directly with the Inspector, Suriya Mirza. She had been asked a range of questions about the PPG: how long it had been running; numbers and recruitment of members; practice meetings and Bubble meetings; the frequency of and attendance at meetings; Enhanced Access; facilities for complaints; the degree of innovation at the Practice.

Jean informed the meeting of general discussion with the inspector and listed the range of positive factors she had prepared for the discussion about the Practice and also possible areas of development (These were her own opinions, not those of the PPG members as a whole. Her personal notes are included as an appendix for information.)

This provided a starting point for general discussion about the inspection and the direction general practice being encouraged to take by NHS England. Practices are encouraged to have a 'digital front door', i.e. to operate digitally wherever possible. Some large groups of practices require patients to go in to book appointments online with help from Receptionists. Baildon felt that this is not satisfactory for many of our patients including the elderly and those not confident with or who do not have IT options. However, this level of 'innovation' is highly valued by NHS England which has led to the CQC inspections looking particularly for innovation. Points for innovation are always carefully considered by Baildon staff and adopted where and when they are felt to be of benefit to patients.

However, Baildon was at the forefront on one development, being heavily involved in a new system to develop provision of death certificates following the Dr. Harold Shipman case.

Lizzie provided information about the inspection which was due to begin on 9th November.

- She had a Microsoft Teams interview with Suriya Mirza, Inspector, two days before this.
- Lizzie and Dr Chambers (CQC Registered Manager) gave an opening presentation to Suriya Mirza and Tabassum Kazi which included KLOEs (Key Lines of Enquiry): whether the Practice is safe, caring, responsive, effective, well-led as well as the different

population groups. They also included what they did well, what areas they could improve in, and challenges faced

- Jacquie Leake led the inspector on a tour of the building
- A detailed, rigorous and extremely testing and demanding inspection took place, including discussions about the use of carpet rather than vinyl flooring in consultation rooms.
- A GP Inspector dialled into the Practice's clinical system remotely the following day and scrutinised several other aspects such as the clinical system, prescribing etc.

Lizzie and Dr Chambers closed out all outstanding actions highlighted during the inspection. Feedback from the inspection is imminent though a timescale of three months had been given initially. Gradings across all the KLOEs are judged to be either Outstanding, Good, Requiring Improvement or Inadequate. These are placed on a matrix and help form an overall judgement.

Other Surgery Updates

Patient Access to Records

The Practice switched this on in SystmOne with effect from 31st October. This access is not available to everyone, e.g. not to those under the age of 16, and vulnerable patients who belong to known high risk groups including those known to be at increased risk of coercion such as victims of domestic abuse or individuals who may lack capacity.

The system will show only records dated from the date of the switch-on and will not show past records.

From information given in previous meetings, it seemed a surprise that this had taken place so soon as there had been clear problems with the concept. One problem that could occur is that concerned with the timing of receipt of information by patients. For example, if tests are taken regarding a potential cancer diagnosis, the hospital may send information to the Practice which could technically be accessed online by patients before the patient has had the opportunity to be told this information in the appropriate manner, e.g. at an outpatient appointment in hospital at some point in the future. The system does not appear to take into account that if a GP hears news about tests in this way, they should not be the ones to tell the patient, hence leading to potentially badly-timed access to information.

Another problem which could arise is the language used in test results. For example, a comment such as "abnormal but expected" may well not be as worrying to a professional who understands official terminology as it might be to a patient with no such medical background.

Many additional systemic and administrative tasks are being experienced by practices following the enforcement by the Government of the adoption of this system. The Government has been alerted to the fact that serious problems may result from patient access to records.

Staffing

- Vicky Cann, a new Receptionist/Care Co-ordinator has been appointed.
- Rameez Rahman has been appointed as Maternity Locum for Dr Sophia Stephanides and will start in February 2024. His credentials are excellent and he has published national and international papers.
- A new GP Registrar, Dr Saurav Kataria has been appointed following Dr Laura Wilkinson's relocation to Birmingham. He will start on 5 December 2023 and his working days will be Tuesdays, Wednesdays and Fridays. A Registrar is a fully qualified trainee who has done hospital training but then also has to undertake 18 months in a general practice.

Any Other Business

- Boots Chemist in Baildon is closing; the branch in Shipley has already closed. Transfers of patients for collection of prescriptions is being well-managed and is very simple for patients. Two major alternative pharmacies are Browgate Pharmacy and Cliffe Avenue Pharmacy. If all patients transferred to only one of these, the pharmacy may be overwhelmed.
- Lighting outside the surgery has been fixed at great pains to Dr. Patterson. It had been switched off in the spring by an electrician and took some time to sort out now darker nights are again with us!

Date of Next Meeting

Wednesday 27th March 2024 at 1400 hours.

Some notes written by Jean Robinson in preparation for CQC telephone interview

Positives

- Know PPGs aren't compulsory anymore. BMP uses flexibility to use PPG and structure it in a bespoke manner to support the specific needs of the practice.
- For non-medical professionals, the whole healthcare system appears incredibly complex with all sorts of sections and acronyms. Our practice tries to explain some history in order to show how opportunities change, e.g. providing additional staff such as Social Prescribers, physios etc.
- Always kept up-to-date and our opinions asked.
- **Face-to-face appointments kept as much as possible during Covid**
- Very efficiently run flu clinics.
- GP Patient survey – good results.
- Enhanced Access (Minutes of 10.11.22, 1.3.23) Really meaningful conversations about this, i.e. 'tossing ideas around'.
- Ideas suggested in the meeting are taken on by the practice if appropriate.
- Patient Feedback Questionnaire on Access to General Practice (5.7.23 meeting)
- Increase in in-hours GP appointments (5.7.23)

Development Possibilities

- Hard to say as I don't use surgery very often.
- Occasionally over recent years had to hold on phone
- As with all practices, speedy communication about general things with those not online is an issue. It could be an area that the PPG could take on, perhaps surveying other PPGs.
- Bingley Bubble meetings not attended now. Lack of structure.

Jean Robinson
1 November 2023