

# PPG (Patient Participation Group) 9<sup>th</sup> April 2024 Minutes

## Introductions- Dr Neogi

- Dr Neogi: Introduces structure of HCL. HCL is something all GP Practices are part of, Difference between Westminster as a council and Westminster as HCL. Bit of background of funding from ICS → PCN → HCL. History of the PCNs and their involvement and reasons for the change- felt that it was too strategic and not localised.

**Question** re: funding structure of hospitals - how they are funded?

**Response:** (Dr Neogi): Hospitals are run a bit differently- you can use hospitals within an area, some overlap with borders etc but hospitals can dictate priorities with people from certain areas as well.

- Dr Neogi: Introduction of discussion today: We want to discuss the websites, hear what people think of it and whether it works for what it is meant for and for people to feedback generally

**Aaron introduction**- wants to do some recap from the last meeting.

- Use of the response buttons- Responses from who was here at the last meeting- 2 yes but noted in the room that there was more in attendance last time that are also here today
- Use of the response buttons- Have you seen the feedback from the last chat? None recorded

**Question:** How many practices were represented at the last meeting and a request for minutes for who attended per practice?

**Response:** (Aaron) Information not available but can look at future minutes to see if can be included

## Previous PPG

- Discussions of how they can access their own practices PPG- advising to contact practice manager to request information of how to join practice PPG.
- Discussion around previous meeting topic of telephony- brief overview of the reason why it is being implemented from Sheila- in the morning there are a number of people coming through phone lines with limited number of staff able to answer the phone- it's a challenge for the practice trying to get through answering the calls in a timely manner. The telephony option offers benefits of being able to pick up some of these when they exceed the waiting time or capacity
- Enable to divert the patients in a shorter amount of time. There may be a transactional appointment that can then be dealt with by a hub.

**Question:** What has been introduced since the last time? A patient has fed back that they can only accept appointments via PATCHS at their Practice

**Response:** (Dr Neogi)- As a patient has every right to speak to the practice, patients can access the service via multiple routes and this can be raised with the practice directly

**Question:** What was discussed at the last meeting as patients are being told to use PATCHS instead?

**Question:** Example given by patient of being sent the incorrect cancer screening from Hospitals (ie: for prostate instead of breast) how skilled will the people who are going to be answering the calls that will be passed on to Hubs. Doesn't think they should pass on to someone on work experience or 'junior' on the phone conversations.

**Response:** Calls would be answered by people who have the same or more training than those who usually answer the phone in practices

**Feedback:** People like to speak to someone on the phone.

**Feedback:** In favour of telephony but how would they be able to share their feedback or how is feedback currently being gathered- i.e.: somewhere on the website where people can feedback? How as a patient can they feedback how it's working? Is feedback being actively sought from those who are using it?

**Response:** Practices are getting results back from patient surveys on telephony. For real-time feedback we welcome it via HCL. Can share an email address where they can feedback to.

**Feedback:** Would be helpful to have feedback able to be gathered across the whole of the borough and for it to also be shared as such.

**Feedback:** Patch's doesn't understand you. When looking at where the feedback from here goes it looks like it is the University of Manchester. What happens to this feedback and is this able to be accessed by practices/ patients/ HCL

**Question:** Why are there not 31 practices represented here in the room? Thinks HCL should make sure there is a first reserve from each of the practices in order to attend the sessions if the primary representative is unable to attend.

**Response:** (Dr Neogi) Ideally there is a wider representation from practices as feels unlike there should be one here but don't feel like we can enforce this from representatives as attendance is optional

**Question:** Where would people be based from the centralised call centres?

**Response:** New are looking at how the extended Practice team based at the HCL office can provide telephone support to Practice sites. It was also clarified that the NHS is not allowed to use out of the country services without special permission.

### **Introduction to Websites**

- (Hannah): Practices websites had out of date information, often too much information in one place or poor navigation. From a federation level there was an opportunity to pool resource to develop websites that have an independent feel. We have developed a theme and overall look/ feel alongside NHS guidance to develop the layout and content.
- HCL would like to check what has been done so far that what we think are patient friendly websites and how navigable they are.

**Feedback:** The feedback on the website one of the sites is that it has sent them a response to direct them to PATCHS (where you cannot book an appointment as it is closed) and having that as the only route feels a risk.

**Feedback:** Good to have the pharmacists listed as they are people often spoken to

**Feedback:** In general thinks it's a good idea to have the websites and have them uniformed. On staffing section- give people the option of recognising staffing by including faces on the websites (helpful to flag if they have their gender there too). Would like to see the inclusion of specialisms i.e. diabetes/ paediatrics etc. One thing is its very difficult to find in general is the PPG information and particularly the feedback and minutes of the PPG on the practice website. Doesn't tell you what the PPG is and would also like to have the minutes of the PPG accessible as well.

**Feedback:** Comparing the two practice- Lisson Grove and Belgrave; both offer PATCHS as a tool, but some Practices have less options. Who is responsible for doing this?

**Feedback:** Suggestion to register at different Practices where patients are happier with their access. Response to feedback was that it's not about them specifically but more concerning is those who are unable to use online services or who have English as a second language for whom they feel the systems and processes may prove to be difficult or impossible. Further concerns over using PATCHS to access appointments and not being able to offer an appointment directly.

**Feedback:** Acronyms are not universally always known, lots of people don't know what acronyms are from the different services. Maybe a tool that explains what they are? (Note: maybe when you hover of the acronym on the website?)

**Feedback:** Suggestions of what could be added to the website- section where people can access feedback to reply to the practice. Positive and negative via the website. Would like to write in a section who is getting feedback and who is doing well.

**Feedback:** It may be wanted to have a forum for people to feedback to general with the federation. To think about a forum etc.

**Feedback:** If they want to make an appointment they get interrupted by dialogue boxes coming up

**Feedback:** Positive messaging is also something they would like to see on the websites- possibly from success stories or things going well. Positive messages i.e. drink water and messages of happiness. People get drained by problems and negativity so need more positive messaging.

- Ask attendees to navigate to travelling information on the website

**Feedback:** Not straightforward to find this on a Practice website - wasn't clear where to go as was under 'all services' and then 'learn more'. Would like to compare the 4 sites and would expect to see Lisson Grove is the poorest. Wants to scrutinise them for this, feels like it would be disadvantageous for patients registered there to find the information needed.

- Responses gathered for difficulty on locating test results (1 said easy, 1 said difficult)
- Responses gathered for difficulty to find out what Drs work at the practices (unsure of results)

**Feedback:** If you reply on patients who voluntarily and without prompt leave feedback it is felt that often they are not necessarily representative of the wider registered population so this will not be a one-size-fits-all solution and considerations need to be made accordingly for resources and efforts made to gather feedback from a wider group

**Response:** (Dr Neogi) Gave an overview of the Community Health and Wellbeing Workers (CHWW, known as 'Chewys) and the work they do to approach residents directly to garner feedback and difficulties with accessing services and signposting etc. Further reassurance given that those not

contacting practices with feedback directly have not been forgotten and that change does take time. Echoes of positive agreement in the room.

**Question:** Patient data- how does this work with their data going through the website and concerns about people hacking their information.

**Response:** (Behrooz): No information from PATCHS is stored or passed through the website. PATCHS is an approved system from NHS England and they have their own measures of security they need to adhere to. Some practices do use forms to register and as soon as they have registered they delete the data. The administration part of the website does have the ability to see some info but this is restricted to only Practice Managers and those that need the access for the operation of the website and will have 2-factor authentication.

**Question:** Will these be linked to the NHS App?

**Response:** (Hannah) Will depend on the practices themselves to decide on how it is configured with other links to apps and services

**Question:** Why can't everyone do the same as a condition of having a practice online? So uniformed services are able to respond and have practices accountable to these conditions.

**Response:** (Dr Neogi): As practices are individual organisations it is for them to decide within the requirements- e.G. they are required to have a website with certain information written according to guidelines but how it is presented and displayed and within this is up to the individual practices

#### **What does HCL do? A discussion on way we explain to people what we are as a GP Federation.**

Aaron: how to explain what we (HCL) are to our patients? E.G. the extended primary care team. Does that make sense? Is it too much jargon? Improving local medical practice?

Dr Neogi: Individual practices cannot find enough staff to deliver all the staff that they would like to deliver to everyone and so join together to form HCL to take the role of listening to the practices to what they would like e.G. late hours/ weekend appts. They (HCL) then deliver those services on behalf of the practices collectively. How would it be most communicable?

**Feedback:** 'Practices working together'

**Feedback:** Example of practice nurse- people read as practicing rather than fully qualified nurses so saying 'practice nurse' may mean people don't want to see them as don't think they are qualified. 'GB collaboration Nurse' - doesn't make any sense and is more confusing than helpful. 'Working on behalf of your practice' is more understandable- 'here to take care of you', 'taking care of you, taking care of the Drs'

#### **General Notes on PPG itself**

Sign in sheet to check who has been there which includes the practice where people are registered and email addresses for info to be shared.

Feedback of the seating not feeling as open (cinema style seating) as the last time (round the table). This configuration felt a little claustrophobic.

## Actions

1. Share the email address for where they can share their feedback on telephony and in general to HCL
2. Meeting chairs- can they have the meeting notes circulated to them? Unsure about who the PPG chair is in some practices and doesn't feel like they are easily found. Specifically to find out how to engage with Connaught Square. To share information on PPG's- is it on websites and how to participate? Can emails be sent to people to advise on how to engage from this group.
3. To discuss the challenge with Lisson Grove where patients are being told to be diverted via PATCHS and the way this is being communicated to practices
4. See if we can have feedback from University of Manchester in order to find out if this feedback is shared with NWL
5. Work on development for how to diversify/ representation from wider practices
6. Ways to feedback to the federation- also information on what the feedback should be sent to practices e.g. complaints and feedback info (such as you see in hospitals)