# KELVEDON & FEERING HEALTH CENTRE

## Patient Participation Group Meeting

**Thursday 17th October 2024 @ 1pm-2pm**

**Present:**

(MV) – KFHC Practice Manager/Co-Chair
(DP)- Coggeshall Surgery Practice Manager
**1.** (BM)-Chair
**2.** (GB)
**3.** (SE)
**4.** (PS)
**5.** (ATA)
**6.** (CT)
**7.** (ATR)
**8.** (KT)
**9.** (NB-B)
**10.** (LB-B)
**11.** (SC)
**12.** (KP)
**13.** (VH)
**14.** (EM)

PM: MV – Minute taker

**In attendance:** Mid & South Essex Primary Care-
Mr SP- Delivery Manager Connected Pathways
NHS Mid Essex Alliance- JK – Primary Care Account Manager

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| ITEM | AGENDA | SUMMARY -MINUTES |
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| | **Agenda inserted** | K&FHC PPG Agenda 17.10.24.pdf |
| **1** | **Welcome & introductions** | **BM& MV:** Welcomed everyone to the meeting and thanked everyone for attending.<br>**Apologies** from SW, BA.<br>**New Introductions**- All new introductions made re: new ppg Members.<br>**Coggeshall Surgery**-Practice Manager here attending our PPG- our buddy surgery.<br><br>Jennifer Knight the Primary Care account manager- NHS Mid Essex Alliance- gave a brief introduction on herself, who she works for, what her role involves as a primary care account manager and how it interconnects with all surgeries in Essex- they commission our services that we give to our patients within their community.<br>NHS Mid and South Essex Integrated Care Board (ICB) is responsible for deciding how the NHS budget for mid and south Essex is spent.<br>It is also responsible for developing a plan to improve people's health, deliver higher quality care and better value for money.<br><br>Please refer to:<br>About NHS Mid and South Essex Integrated Care Board - Mid and South Essex Integrated Care System (ics.nhs.uk) for more information about how your local ICB works. |
| **2.** | **PPG Terms of reference,** | Terms and reference, rules, and confidentiality agreement, as linked below. |

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| | **ground rules and confidentiality** | PPG leaflet (napp.org.uk).pdf K&F HC PPG TOR 2022.docx K&F HC Confidentiality agre K&F HC PPG Ground Rules Nov2( |
| **3.** | **Minutes of the previous meeting** | Went through mins of the PPG meet 15/05- All agreed. |
| **4.** | **Modern General Practice** | BM introduced Simon Prestney who had kindly offered to do a presentation on the new way forward for patients that NHSE wanted all surgeries to implement-SP was here to explain the digital agenda and help patient awareness of this.<br><br>Why and how this came about, it was about looking at:<br>• The access to patients coming into surgeries.<br>• The population is going up.<br>• Money & funding<br>• Phones systems & queues.<br><br>All the above looked at the digital pathway to support more patients to better access of NHS services and looking at the issues that are preventing patient access across the board. Phones and patient queues were one of them, the 8am rush to call in the morning to get an appointment, not everyone needs a GP appointment, but all patients think they do- care navigation to direct to the appropriate type of appointment and clinician, with a GP looking at the online consultation forms coming through.<br>An example given by SP was of his personal experience with his GP' online consultation form filled in and what happened. Mole & appointment- how this was processed and ended with an offer of an appointment to ensure that all was okay and erase anything more sinister, but this was completed via the online portal and the ease of using this.<br><br>**The digital pathway**<br>This is trying to make patient's go digital or fill this online consultation form in so that when it is looked at by a clinician- the decision made by the clinician is based on the appropriate clinical need and not just all queries booked in with a GP. Correct navigation to the correct clinician and services needed.<br><br>A diagram was given to the PPG.<br>The use of the digital online consultation form can be used for administrative support & queries, you do not have to call the surgery for such queries that can be dealt with in the background without needing an appointment and that is one of the things we want patients to stop doing, making an appointment at their say so, for something that can be dealt with without an appointment. We want to stop wasting appointments for any administrative things.<br><br>We use AccurX which is called "contact us online" if you need help with a non-urgent medical or administrative request.<br><br>**What support as a surgery do we provide?**<br>For those patients that cannot/or have no access to the internet, do not have a computer, smartphone, or are not digitally aware, we will have staff members that will help patients fill in the form either face to face or on the phone administratively – this online form is the shorter version of the original form which was too long winded- we now use the short template. We are looking at getting iPads or tablets as the accessibility functions on them are fantastic and then you can download various apps such as Live Transcribe, Seeing AI or even alter the accessibility setting for them to |

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| | | talk to the patient as a screen reader (or all patients and those with sight & hearing impairments).<br><br>We need to work with other surgeries, Health watch, PPG – to help get this out and in process, cascade the correct information down, in terms of what our plan is, how it works, how we can help our patients embrace being digitally online and filling in the online consultation form. The online process will take a good 2/4 weeks to get going and once this is in place and patients get use to the idea of this digital system- they may see the benefits of using this and with quicker/better results.<br><br>We know that digital access is not for every patient or the preferred choice. All channels of access are still open, phones are still available to ring/call, coming through the door face to face, and online access. No one is shutting down the phone lines- though in bigger surgeries, this is what they are doing, no phone calls pure total triage and it works for them. All surgeries are different.<br>**Action:** SP to come and talk to the PPG again re: post this process and gain patient feedback. MV to ensure that this happens. Also, re: access at home and journey of this online consultation form and experience using this. Will be interesting to hear and discuss.<br>**Presentation ended.** |
| | **Q&A** | **NBB:** understands this shifting towards becoming more digital is there a wide based availability of appointments open & on offer from the initial contact point.<br>These online consultation forms filled in by patients that come into the practice via an inbox on this system and is manned daily, looked at and triaged to the appropriate clinician and adequate time scale for an appointment depending on the presenting complaint. This serves to seek the priority of the patients and appropriate appointment given.<br><br>**NHS App**<br>**KP**: The use of the NHS app & the triage app if can use this if cannot phone in?<br>**SP:** Great point to bring up the NHS app. Use to work for Age well east and understand the point of views about other patients.<br><br>**Cancelling of appointments.**<br>Query when booking online the NHS App, the appointments and what is available- should be chargeable to patients not turning up, wasting appointments that could go to someone else.<br>**SP:** We want to reduce the 8am phone calls, use the NHS App, where patients are contacted through this app.<br><br>**PPG:** Cancellations on the NHS App do not work-tried to cancel an appointment but could not.<br>**MV:** Unsure about the NHS App and cancelling appointments but we have a cancellation line which works well for patients- this is the first the PM is hearing of any issues with patients cancelling their appointments.<br>**NBB:** Send reminders by text- reminders by texts for those that do not turn up for their appointment.<br><br>Is there a choice of e-consult and the newer online consultation form. (AccurX)<br>**MV:** No, it was decided to change from EConsult to Accurx because of the functionality of this software and its ability to communicate to our patients and what it has to offer regarding messaging patients, attaching docs etc. Anyone who has saved the original e-consult link or address in their phones will need to delete this and refer to the new contact us online via our website: |

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| | | Kelvedon & Feering Health Centre (kelvedonandfeeringhc.nhs.uk)<br><br>**NBB:** On the website to put a communication regarding the new online consultation form that it has changed from being "E-consult"<br><br>**KP:** was not aware of this new online consultation form- does not look at the website.<br><br>The NHS App is not provided by the surgery, it is the NHS app which links into our inhouse database- extracting its information from this- we are not in control of the NHS App. It pulls its information over from us to it app regarding patients- this came our when you all were made aware of sharing patient information and information access being shared by NHS only providers and not to other external providers- as patients you all had to agree to this.<br><br>You now have various digital health care patient portals.<br>Patient access<br>NHS App online<br><br>Please see inserted doc: pat-guid-give-another-person-access.pdf (england.nhs.uk)<br><br> <br>pat-guid-give-anot<br>her-person-access.p |
| **5.** | **RSV** | Respiratory Syncytial Virus – Practice nurse talk on these vaccines, why we have them & what they are for.<br><br>**Action:** Defer to next meeting- Practice Nurse had to go offsite on home visits- re: flu vaccinations. |
| **6.** | **Practice Updates** | **New build**<br>The patients that went to the BDW public exhibition cascaded news down to all. Patient's feel plans for the car park are totally inadequate, the design and staff car parking take over the numbers. How can we provide other services if the car park is not big enough to account for both staff & patient cars.<br><br>**MV:** Directed her question over to DP-PM at Coggeshall who said that they now have an overflow carpark put in place due to the new extension and plans of the surgery.<br>Negotiations between the GP's & BDW are in progress with regards to the new build, T&Cs etc. Our PPG is fully engaged with the new build and supports the practice with this. Agree it must happen to progress and offer other services to our patients within their community.<br><br>**Action:** MV to bring to attention of the developers on behalf of the patients regarding the carpark capacity. No plans to show re: this & BDW not to put in yet? |
| **7.** | **Staffing** | **Departures:**<br>**Recruitment:** We have a new female GP-Dr Malin Persson, works part-time on a Monday & Friday all day. |
| **8.** | **Education Sessions for patients.** | |

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| **9.** | **A.O. B** | **Suggestions made:**<br><br>**NBB:** A photograph board with the clinicians on so that patients can see as they walk in or somewhere patients can view.<br>**MV:** on the website under "Team" tab: we have pictures up of our staff & clinicians.<br>Team – Kelvedon & Feering Health Centre (kelvedonandfeeringhc.nhs.uk)<br><br>**Patient eye problems-** you must go to spec savers,<br>For other certain conditions its Pharmacy first- on our FB page.<br>On the M&SEICB website<br>Pharmacy - Mid and South Essex Integrated Care System (ics.nhs.uk)<br>NHS111 self-referral – get help for your symptoms.<br><br>This has been discussed previously with the PPG and minutes on our website for all to access.<br>Patient Survey and Results – Kelvedon & Feering Health Centre (kelvedonandfeeringhc.nhs.uk)<br><br>**NBB:** PPG members & numbers as changes every quarter & we do seem to be growing- are we looking to keep at a set number of patients and then have a subgroup to cascade information down to and be active within this group- if gets bigger and then changes again with different people how are we going to maintain stability of information flowing through to everyone.<br>**MV:** Makes sense & valid point. We do have the regular/Original members of the PPG that always attend. |
| **10.** | **Future meeting discussions** | None suggested. |
| **11.** | **Next PPG Meeting** | Tuesday 11th February 2025 at 1pm |

**Meeting closed at 2.00pm**