

Leckhampton Surgery Patient Participation Group. Wednesday January 29, 2025
Leckhampton Surgery. Time: 1 – 2.15 pm

Minutes:

Attendees: Katie, Clive Fenney (acting Practice Manager), June, Judith, Joy, Mike, Ian, Veronica.

Item
<p>1. Welcome and Apologies Welcome to Clive Fenney, acting Practice Manager. Apologies - Nigel, Susan.</p>
<p>2. Minutes of the meeting Nov.27th. 2024 & matters arising a) Cancer care centre Integrated Care Board information bus Friday 31st January, 10.00am - 3.00pm, Cheltenham High Street. Cancer care centre funded from NHEngland + £15m target from charitable donations, not the Trust.</p>
<p>3. Update from the Practice Katie: Jennie off ill. Clive currently acting practice manager. Partners proactive in approaching Clive to cover. 2 new Patient Care Advisers/ Reception staff - 1 for only 2 weeks so vacancy advertised. Things are going ok. As per hospital practice, unwell people asked to wear masks. Lead PCA is Nicky. All PCA's rotate roles adding variety and spreading expertise and all handle prescriptions working closely with the pharmacist team.</p>
<p>4. Receptionist abuse – Joy's case study - Practice response Receptionist put in invidious position having to say "No". How PCA's can manage this? The 3 specific types of urine sample pots and tests were explained, hence the need to know what type of test before pots can be given out. Options/ response? Duty doctor available for PCA's to refer to; keeping a tally of the "No" responses to improve responses; rotating PCAs from reception duties and taking a break when needed.</p> <p>Clive added the PCA role is the most difficult job in the practice. There is 50% turnover per annum of PCA staff due to abuse. This practice has a lower % figure.</p>
<p>5. Patient access to GP appointments – standing item 8 phone lines - phone data used to meet demand. Abandoned phone calls monitored. Suggestion to try and reduce the time the phone rings out when reaching number 1 in the queue. Practice provides PCA training and support. The practice does offer Saturday appointments. The NHS App & SystmOnline both serve a purpose at the moment. The Healthwatch Booklet on GP access - thanks to Nigel and Joy for feedback via email.</p>
<p>6. Text messaging from surgery to patients. Access via NHS App to letters re. patients from the hospital Mike raised after clicking on blood pressure test request email from the practice, the data form for inputting readings twice a day for the 7 days starts ticking. If you delay, the form is unavailable resulting in many hand delivered notes with blood pressure test results. Katie to follow up with provider Acurix. Clinical follow up? At the moment if results are normal - no follow up. Benefit for patients completing the feed back loop- just need acknowledgement. Blood pressure parameters are age & medication related. Katie explained the demand for blood tests increasing - e.g. NICE guidelines for over 75yrs. blood check now every 4 months. 500 patients = 1500 blood checks p.a.</p>
<p>7. Report from PCN PPG Chairpersons meeting Other PPGs have GPs attending. Very conscious of time pressures on GPs but suggest GP link/ 10 minute drop in?</p>
<p>8. Rota for NHS App training and advertising Dates 1st. Weds of the month 2 - 4 00pm. 5th Feb. Veronica & Ian; 5th March June & Mike; 2nd April Judith & Joy. Judith to confirm rota. Katie to do poster.</p>
<p>9. AGM – progress with speakers and advertising Tues. 8th April. Social Prescribers and Pharmacists Nita helping to find speakers. Information to be put out. Venue - waiting room.</p>
<p>10. Any other business and Date of next meeting Weds. 12th March 1 - 2 00pm</p>

