

## Agenda & Minutes – PPG Meeting

Date: 24 January 2019  
 Time: 18.30 to 19.45  
 Venue: Tilehurst Village Surgery  
 Attendees: Dr M Thompson Partner (MT), Jackie Small (JS), Tracy Craig (TC) and Catherine Guscott (CG) Practice Managers and PPG Members

	Agenda
1	Welcome
2.	Purpose of PPG
3	Telephone Triage
4	7 Day Working
5	Website
6	Appointment of Chairperson
7	Integrated Care System Event
8	AOB

Agenda Item	Minutes	Action
1.	<p><b>Welcome</b></p> <p>JS welcomed the new group and introductions took place. JS advised that there was another member but he was unable to make this session and that the PPG would be encouraged get more patients to join the group.</p> <p>PPG suggested that we could have discussion events for patients with diabetes, COPD etc. which could be ran by a Nurse.</p> <p>PPG asked whether we close at any time during the day and it was confirmed that we remain open from 8.00 am to 6.30 pm with some early morning opening and late closing. The only time we close would be for training in practice and advance notice is put up in the waiting room and website.</p> <p>PPG asked how many GPs were employed by the practice. We confirm that there are two partners, 7 salaried GPs and 4 regular locums and that we are in the process of trying to recruit another salaried GP.</p>	
2.	<p><b>Purpose of PPG</b></p> <p>JS advised that the purpose of the PPG is to promote good relations between the practice and patients by community patient's experiences, interests and concerns and by providing feedback to the practice on current procedures and proposed new developments. Copy Terms of Reference will be sent out to all members to be agreed.</p>	JS
3.	<p><b>Telephone Triage</b></p> <p>MT/TC explained the purpose of having the telephone triage system following the closure of three local GP practices. This system allows the practice to offer more appointments to those who need to be</p>	

seen. MT advised that we average 160 phone calls per day and see approximately 60 patients. This system allows us to offer a service to as many users as possible.

MT advised that we offer On The Day Triage, Pre Booked Apts, Apts that are released 3-5 days before, Timed telephone appointments which we are currently trialling. This will enable the patient to book a telephone appointment online and the GP will do their best to stick to those time slots. The timed telephone appts are between 08.30 to 09.20am.

MT advised that one third of the telephone triage phone calls convert to face to face appointments.

MT advised that two doctors do telephone triage each day at TVS and one doctor does telephone triage at CH.

MT also advised that we do extended hours on Monday and Tuesday and alternate Saturdays.

PPG stated that patients cannot always have their phone with them at work. MT says most employers are reasonable and that by offering time telephone appts may be a solution to that problem.

MT advised that those patients with longstanding chronic conditions can pre book to see the same doctor.

If the problem is acute MT advised that GP would be able to see patients history and try to book with the same GP for continuity of care.

PPG asked how do GP prioritise the calls i.e. elderly, children. CG advised that reception will ask questions and the more information that can be passed onto the doctor doing telephone triage enables them to look through their list and prioritise the calls. TC advised that the doctor can see the age of patient.

PPG suggested that we do a patient newsletter to get the message out. CG/JS advised that TT has been in the latest newsletter but we can certainly prepare some posters for the waiting room.

PPG asked whether there was a limit to the amount of patients we could take on. MT advised that our list size has increased by 1,500 and we have 3 consulting rooms and a treatment room at TVS and that the CCG ask practices if they would take on patients as a result of surgeries closing. CG confirmed that patients are entitled to see any GP surgery in the catchment area hence the growth of the list size. MT explained that we are having to utilise one of the desks in Admin to facilitate another doctor doing telephone triage to help out.

It was suggested by PPG that they should lobby their MP. More houses are being built and no surgeries to accommodate these

	<p>patients. CG stated that there is a nationwide shortfall of 6000 GPS.</p> <p>PPG asked how do we police those patients who are out of area or on a violent list. TC explained that we send letters to inform patients that they are out of area and that if they remain, we cannot accommodate home visits. Those patients on the violent list are covered by a specialist GP practice.</p> <p>MT advised that PPG can visit BWCCG website regarding list sizes of GP surgeries in Reading.</p> <p>PPG asked whether we could expand the building. MT advised that we have a meeting coming up regarding building/premises.</p> <p>Car park – requires planning permission/ grant from government.</p> <p>MT/TC explained that porta-cabin had been looked at in the past and was very expensive.</p>	
4	<p><b>7 Day Working</b> TC advised that we offer early morning, late evenings and Saturdays. TVS 7.30 – 8.00am Monday – LB &amp; SG 6.30 – 8.00pm Tuesday – TAU, LS, LB 8.30 to 12.30pm at TVS once a month</p> <p>CH 6.30pm – 8.00pm Monday 08.30 to 12.30 Saturdays CH once a month</p> <p>MT explained that other practices do lates on Wednesdays and Thursday. Friday, Sunday and bank holidays is covered by Reading Primary Care Alliance (RPCA) so collectively there is 7 day working.</p> <p>PPG asked whether this could be advertised more.</p>	
5	<p><b>Website</b> CG explained that we have a new website and that it was in keeping with most of the surgeries with regard to format etc. CG advised that you can now access different rooms such as Ask a Doctor/Nurse a question, order prescriptions, request patient access so that you can view your records, results. PPG asked whether we would be going down the skype route. MT advised not at this stage.</p> <p>PPG asked whether we looking at changing the telephone system. JS advised that we are looking to change to a system that says “you are</p>	

	number 1 in the queue etc. PPG said that this system would work better and at least this would give the patients a better idea as to whether to continue to hold or call back later.	
6	<b>Appointment of Chairperson</b> JR was nominated as Chairperson.	
7	<b>Integrated Care System Event</b> JS advised that there is a PPG event on 20 February 2019 between 11am and 1pm at Reading Town Hall Blagrove Street. This meeting is open for Practice Managers and PPG Chairs with the option for one additional PPG member to attend. JS to send out details.	<b>JS</b>
8	<b>AOB</b> PPG asked about continuity of care for ongoing illnesses such as cancer patients, immunosuppressant patients, palliative, over 75's etc.  TC advised that alerts are put on the records and that we have regular meetings where patients are discussed and followed up. Also alerts are on the system for those aged 75 and above as they may require a longer apt.  Extended hours appointments are 15 minutes at present but this might change in the future.  Meeting closed 7.45pm	