

Meeting of Patient Participation Group, Woodstock Medical Centre
The Meeting Room, Woodstock Medical Centre
Wednesday 19th June 2024; 18.30 – 20.00

1. Welcome, introductions and apologies noted by the chair and below:

- **Present:** David Inglis - Primary Care Team, Eleanor McLean - Chair, Neil Campbell – PPG Member, Elaine Young PPG Member, John Taylor – PPG Member, Ruth McCallum – PPG Member, Liz Forbes – PPG Member, Colin Angus – PPG Member, Alistair McInnes – PPG Member, Jennifer Boyd – Nurse Consultant, Jennifer Crawford – ANP, Lisa Johnston – Group Ops Director, Margaret White – Office Supervisor, Laura Black – Admin(note-taker)
- Apologies: Lisa Bartkus, Site Manager, Alba Medical Group; Hazel Kay, PPG Vice Chair; Fiona Thomson PPG Member; Leonard Gray PPG Member; Elizabeth Hunter, PPG Member; Dr R Lal, GP Partner; Dr U Rehman, GP Partner; Craig Cunningham, Head of Commissioning & Performance, SL HSCP; Alistair MacKintosh, Primary Care Team.

2. Previous minutes of Wednesday 24th April 2024:

- Minutes previously approved by those in attendance.

3. Approval of agenda items and matters arising not on the agenda:

- None

4. Review of Terms of Reference: no changes required

5. Practice Update:

- **General:**

Recent operational issues, such as IT failures and staff shortages were discussed. It was noted that in order to improve patient understanding such circumstances be communicated if they were likely to impact on the smooth running of the practice. These types of scenarios are generally circulated via a number of platforms – social media; Ask My GP; telephone; website. Information will also be provided to PPG.

- **Results**

Patients who require a copy of any medical results or records must complete a Subject Access Request, access to this can be found on the Alba Woodstock website. Requests can also be made via email, Ask My GP or by letter – these should be highlighted as Subject Access Request. Request forms will also be made available at reception.

- This is as a result of GDPR to ensure data protection governance and the process is set out by the Information Commissioner's Office (ICO). This is not a local process.

- There is a timescale afforded to complete, one month. However, we try to process simple requests, such as one off results, more quickly if possible and workload allows.
- There are no costs for SARs.
- An update will be circulated to the practice team to ensure they are aware of this should a patient make an enquiry with a clinician
- An update will be issued via usual platforms to communicate this information to patients

- **Prescriptions**

A number of items were discussed relating to prescriptions

- Due to recent vandalism the external post box will not be replaced. There is still a post box between the internal doors at the front entrance and is accessible during opening hours.
- The practice aims to process prescriptions within 48 working hours (2 working days). Discussion was undertaken about the challenges faced trying to achieve this. Comments were made regards other local practices having extended the processing time to anywhere between 3 – 7 working days. It was mentioned that maybe the a 72 working hour turnaround would ensure everyone's expectations were met and if it is going to take longer than that then a message should be issued to make patients aware.
- Further discussion was had about what the different statuses are and that this should be explained so patients have a clear understanding of the process from requesting to being dispensed.
- Further explanation might be required about when repeat items require to be reauthourised after a certain amount of issues, as this means the processing time takes longer.
- A question was raised about blister packs, JB explained most pharmacies provide this service but they may have waiting lists, currently it is only Lanark Pharmacy which is actively taking on new patients.

- **Private Healthcare**

An overview of procedures and process for patients who wish to opt to have care provided privately. Information from the Lanarkshire Local Medical Committee was also provided for members understanding and awareness. This related to private care and follow up at home and abroad.

- That referral for private health care was not a requirement, patients can seek this directly with the provider.
- The private GP/hospital may send updates/information to the practice if they felt the surgery needed to know the information, it is not a requirement for them to do so.
- Private prescriptions, follow up tests and aftercare cannot be transferred back to NHS/GP. These will incur an ongoing cost to patient.
- Private health care providers may inform surgery of any urgent treatment/surgery that the person required however this would not necessarily be classed as urgent treatment/surgery on the NHS.

- Cardiology and Physiotherapy are the most common private referrals carried out
 - If you do seek advice from private health care, the specialist is responsible for arranging follow up care. It may be appropriate for this to be provided under the NHS and if this was the case the specialist would refer back.
- **Ask My GP**

Report were provided to demonstrate activity, demand and patient feedback for the month of May 2024. Over 5000 patients have now registered with the platform and it has been in use for almost 2 months. A recent IT issue had resulted in the system being down intermittently, this has now resolved and was related to an attachment feature being upgraded. The team commented that use of the platform had brought about improved team working and communication. Help was available to users on the platform to enable use by clicking on **the question mark?** on the top RHS of the log in screen. An AskMyGP practice user demo link will be circulated as well as a link to other helpful articles and information. Highlights noted below:

 - 4105 requests were made during May, this included a combination of direct and indirect requests.
 - Approximately 80% of these requests are made directly by patients or their proxy (i.e. parent/guardian); 20% are made via patient calls to the practice and added onto the platform by admin.
 - Demographic shows more prevalence to the female population; most telephone requests come from the 50+ age group.
 - Monday, or day following a Public Holiday, still remains busiest
 - Peak demand is still at 8am.
 - Approx. 20% of requests are deemed to need a face to face consultation; remainder are handled via telephone calls or messaging.
 - Patient feedback: 252 responses in May, with almost 80% of these patients saying the patient feel the service is very good/good.
 - It was also brought up that even though the system is not online to patients it is still available to surgery staff. If the system goes down patients can phone into the surgery and the staff can do an AskMyGP request for them.
 - As advised previously there is a move away from the “Triage” 2 hours between 8am & 10am as AskMyGP is open throughout the day.
 - Patients are being encouraged to go online if they are able to so, this frees the phone lines up to those who cannot.
 - AskMyGP is available most days between 0800 – 1600 (or 1500) in order for the team to then manage the work. Patients can still call the practice if they feel they have an urgent need that cannot wait. The platform is closed over the weekend and Public Holidays, as the practice is closed then.
 - Despite appointments being offered and confirmed it was highlighted that the number of did not attends, DNAs, is rising, and this is being monitored. Patients who fail to attend repeatedly will be sent letters. Discussion

followed whereby a communication would be made available to highlight this loss of capacity and implication for other patients wishing to access care responsibly and appropriately.

- The next patient experience survey would be issued soon, and this would be issued on AskMyGP.

- **Newsletter/Dashboard/PPG Minutes**

A request was made that the newsletter is printed onto plain paper with black ink and be combined into one document with the dashboard information. This was already a work in progress and most recent update would be issued shortly.

6. PPG Update:

- **Communication Boxes**

An overview was provided regards the numbers of forms submitted and the feedback gathered from these submissions. Common themes were mainly focused on prescription timescales. Further conversation and discussion was undertaken as below:

- Try to find different locations to place the boxes where people might find the time to fill out the questionnaires, perhaps coffee shops or library.
- Would it be better to maybe sit and speak to people face to face and fill out the questionnaires?
- It was also noted that a change was required in relation to gaining consent questionnaire to allow the individual's information to be shared with the surgery.

- **Health and Wellbeing Fayre**

An update on progress of above was provided.

- Plans were still progressing and it was confirmed the event would be held on Saturday 7 September 2024 11am – 3pm.
- Latest information advised 19 organisations confirmed attendance
- CAB, South Lanarkshire Council & Money Matters also expressing an interest.
- Attendance from the practice would be confirmed nearer the time and they would fund tea/coffee/drink refreshments.
- Wonderful donation of box of 100 Border Biscuits has been made
- Donations also being sought from local providers such as dentists and opticians.
- Tesco had also confirmed generous donation of fruit.

7. AOCB

- **Annual General Meeting (AGM)**

Discussion was undertaken about arrangements for an AGM, date and venue to be confirmed. Conversation about planning the event included:

- Questions asked were who will pay for the hall? Lisa Johnston will discuss this with the partners.
- AGM will maybe take place in October but this will be discussed at the next meeting in August.
- It would be expected to last for a few hours
- Unclear about how many will attend, numbers need to be kept manageable and to do so might require people to register to attend, and once the venue is full, a waiting list might need to be held.
- PPG advised they would keep in touch with the practice about this and present more specific details at the August meeting.