

Notes of Patient Participation Group at Hoyland House

18th March 2025 15.30



Present

Patient reps: David Perry (DP - Chair), Neena Buntwal (NB), Sue Canning (SC), Veronika Dutfield (VD-V), David Gratton (DG), Peter Morse (PM), Jo Richardson (JR), Christine West (CW).

Staff: Dr Rhys-Evans (RE), Jenny Vallely (JV), Amanda Heyden (AH)

Apologies: Sue Canning (SC), Charlotte Tempest (CT), Brian Painting (BP), John Finney (JF)

New member	Veronika Dutfield-Valeckova was welcomed as a new member of the Group having been on the waiting list since last summer.
1 Obituary, Anthony Fisher	<p>DP led discussion of the sad death of Anthony Fisher since our last meeting. He was the last founder member of this group in 2013 and has served throughout that time as the Group's Treasurer. Latterly, he also loyally took minutes by recording the meeting using a phone, which was extremely onerous for him, but no-one else would take over the role for some years. The group will miss him. He was also more widely known for his leadership in the use of digital devices to manage his diabetes. DP will include a piece in the Beacon Bulletin on behalf of the PPG. The limited numbers of early minutes and papers relating to the group that he left on paper will be digitised by DP.</p> <p>ACTIONS:</p> <ul style="list-style-type: none"> - Item for the Beacon DP - Digitise minutes DP
2 Minutes of last meeting	<ul style="list-style-type: none"> - Focused questions requested from patients in the Beacon DP undertook to do this for the April edition. - JV reported that a text messaging appointment reminder system had been implemented soon after the last meeting and seems to be at least partially effective. This operates through the NHS App which is free of cost to the Practice but non-App users incur a cost (though not currently to the Practice).
3 Helping Patients in Reception (NB) Receptionist Bertie Graham (BG) joined the meeting	<p>BG has been welcomed back to the practice after three months travelling. She is working on improving the use of the NHS app by Patients and staff. She is encouraging its use at registration, by placing a QR code in all appointment rooms etc.</p> <p>NB as NHS App champion, is happy to provide sessions at the surgery to encourage patients to register for this. Other venues could include the Library, Richmond Village, Friday club etc</p> <p>ACTIONS: NB and GB</p>

Continued . . .

<p>4 Update re Practice management (JV). [Full paper supplied to members]</p>	<p>a) JV had set out a full list of staff for members including a new nurse and receptionists starting in April. She noted that they would all need time for induction and training.</p> <p>The Practice had undergone an extremely difficult period over the last 18 months catered on financial pressures resulting from reduced funding and increased utility and staff costs. The latter had suffered from a shortage of suitable applicants delaying successful appointments as well as some long-term sickness. However, remaining staff had given extra time and three new appointments are now in hand.</p> <p>b) Phone answering restrictions are now partially lifted with a secondary process available for patients needing to speak to the Practice urgently.</p> <p>c) MH reported that there has been some reduction in abuse from patients, probably as the phones are being attended to for longer periods now and possibly helped by the responses from other patients saying how appalled they were. Apologies have been received from some 'miscreants'.</p> <p>Most complaints are verbal and are about the time taken to answer the phone/ time taken for an appointment or time to respond to requests for non-NHS work eg. insurance forms. There are very few written complaints each year.</p> <p>PM raised the issue of the impact on staff at the practice and their mental health. JV responded that having a small staff team means they act like an extended family and are very supportive of each other. However, pressures on individuals had been extreme in recent times.</p> <p>JV noted that she would be reducing her employed hours now the team approaches full capacity.</p> <p>ACTIONS:</p> <ul style="list-style-type: none"> - To ensure that these difficulties are included in the PPG reports to the Beacon. DP - To ensure that casual communication between the PPG members and wider patient group includes information about the staff difficulties. ALL PATIENT MEMBERS
<p>5 Report from Dr Rhys Evans (Senior partner)</p>	<p>The announced closure of NHS England means a great loss of jobs and concern for the consequences especially as the local ICB (One Gloucestershire) has also had a 50% budget cut announced. In RE's view they are generally supportive of services, but have increased local bureaucracy. The IT system has not helped in collecting data required as it involves hours of work to ensure that every activity in the Practice is coded correctly to ensure that the work done is paid for. There are 71 different funding schemes just in the NHSE 'Quality Outcome Fund'.</p>

	<p>Most of the money proposed in the new budget is already ring fenced for either existing work or salary related increases.</p> <p>The Painswick practice has an older population than an average practice and our extra needs are not adequately considered in the budget. The practice sees, on average, twice as many patients in a day than is considered good practice by the BMA and are worried about the safety issues that could result.</p> <p>eConsults submissions have to be extremely carefully considered for the GP to be sure not to miss an urgent diagnosis. Other practices locally, close down eConsult submissions when their appointments are fully taken. So far, our Practice has not done this as there are few alternatives, but are interested in what the practice population would support. The practice has closed eConsults out of hours, as this has proved safer. When eConsult is closed, the patient is then transferred to NHS 111, which acts as a triage but unfortunately usually suggests contacting your Practice. The Practice can defer non-urgent requests until the following day.</p> <p>From April, all eConsults will be required to be given a response, though this could be an automatic response saying to contact NHS 111. eConsults should automatically divert patients to alternative care routes eg. pharmacy and physiotherapy, as does the information on the practice website.</p> <p>From April, phlebotomy services will be almost solely based in primary care apart from exceptional cases requiring rapid analysis. The practice will then be paid for this work, which previously has been unfunded.</p>
<p>6 Reports from County-wide PPG meetings</p>	<p>BP had to withdraw from the meeting at a late juncture but sent in his report.</p> <p>Discussion deferred to patients only meeting – report to be forwarded (DP)</p>

<p>Patients only section</p>	
<p>7 Members' roles: - agenda item contributions - Treasurer/group secretary - Fund-raising</p>	<p>Treasurer - JR volunteered for this role Car park liaison for the vaccination clinics - V D-V, SC, DP</p> <p>Further roles to be discussed at a further meeting.</p>
<p>8 AGM - to confirm intentions and set planning meeting date</p>	<p>The National Association of PPGs recommends holding an AGM to widen patient involvement, but we have not held one so far.</p> <p>Further discussion will be held in the patient only meeting to follow.</p>

9 One Gloucestershire dissemination	A new guide for patients on how to get the most out of their appointments has been published by the Patients Association.
10 Further meeting	DP will arrange a further patient only meeting to finish the discussion of item 6 as well as the intended 7 & 8

Actions	By	Due
Obituary for Beacon in PPG Bulletin	DP	23 March
Current staffing issues are included in Beacon bulletin	DP	23 March
Patient only meeting date to be arranged by poll	DP	immediately
Digitise early documents from Anthony Fisher	DP	Ongoing
Disseminate information about staffing issues etc at any casual opportunity	All patient members	Ongoing
Increase use of NHS app	NB and GB	Report to next full meeting
Treasurer induction	DP & JR	asap
Car park supervisors for vaccination sessions	VDV & CW to prep rotas DP to provide guidance to volunteers	By dates provided by JV