### NOVUM HEALTH PARTNERSHIP PATIENTS' GROUP

## Meeting: 6 March 2023 Rushey Green Group Practice 6.00 p.m.

#### MINUTES

Present: Suzy Wilkinson (SW, chair), Patrick Connolly (PC), Susan Hodge, Anthony Atherton (AA), Robert Thompson (RT, minute taker), Janet Thompson, Paul Howell (PH), Jeanne Mynett. Apologies had been received from Jan Gimble, Vincent Yip, Elaine Curley and Dr Shasi Arora.

- 1 The Chair welcomed those attending.
- 2. The minutes of the ordinary meeting on 15 December 2022 and the AGM on 5 January were accepted as accurate records.
- 3. The following matters, not covered later in the agenda, arose from the action points in the minutes (in italics below):
- i. a. The practice will continue to investigate the technical problem of the incorrect 'invalid number' response.

b. Receptionists will be informed of the issue and given direction as to the advice they should offer to patients.

c. Patients will be informed by text message and by messages on the website about the option of using an alternative telephone number (15/12/22).

The technical problem has been resolved: it was reportedly the fault of Exponential, whose contract was in any case to be terminated. Messages informing patients that either phone number can be used had been circulated. However, there is a sense that communication within the practice and between branches remains a problem, as does access by patients.

One member outlined a range of difficulties related to accessing a hospital report, which had been made worse because the telephone receptionist was not always at the branch to which the report had been sent. This important document needed to be discussed with a GP in a timely manner or read upon Patient Access, but it had been unavailable for four weeks after the hospital had sent it. PH reported continued difficulties in using Patient Access, and questioned why the Novum website links directly to Patient Access but not to any of the alternative platforms, which he has been able to use.

Action point (practice and PG): a forthcoming meeting to be arranged with a focus on patients' access to information, addressing both the practice's procedures and issues concerning online platforms. Please could this meeting be attended by both Seyhan Yusuf (for the technological matters) and a GP partner.

ii. Salary information [on the website] will be updated as soon as possible (15/12/22).

This has been done.

iii. Please can dates and locations [of future PG meetings] be added to GP diaries and circulated to staff (15/12/22).

It is understood that this has been done; the Rushey Green staff's preparation for this evening's meeting was noted with appreciation.

iv. Wording referring to language and conduct to be added [by RT] to the draft ToR document and the revised version circulated (15/12/22).

This revision was presented and accepted at the AGM.

v. RT will lightly edit and re-format the complaints procedure document, but this is not a high priority (15/12/22).

RT will do this for the next meeting.

vi. Please could the practice identify or create a suitable video explaining the various apps and websites available for patient use (15/12/22).

The practice reports that work on a video is in progress.

vii. Please can the practice be rigorous in ensuring that all PG documents are sent to members we know do not use the internet. RT will confirm who these are if necessary (25/01/23).

Relevant names have been passed to the practice and recent minutes have been sent. RT will confirm that this arrangement should apply to all PG documents.

viii. Please can the practice... include information about appointment release times in recorded telephone messages (25/01/23).

The practice reports that work on altering the recorded message is in progress; however, it has not yet been carried out. The group felt that re-

recording the message is not a complicated task and should have been done when the arrangements for appointment booking were changed.

# Action point (practice): please could the practice ensure that work on the phone message is carried out soon and that progress on the video moves forward in a measurable way?

4. Complaints poster

There was agreement that the draft poster under consideration is not what is required; we are looking for simple, accessible and clearly legible information to guide patients in the first stages of giving feedback, be it negative or positive. Good design, appropriate typeface and layout, and colour contrast to aid legibility are all critical; content needs to be simple and direct, and to avoid any reference to later stages in the complaint process, about which patients should be informed once their complaint is registered.

PG members undertook to give further thought to the proposed poster, and to look out for suitable examples used elsewhere.

Action point (PG): members will give some thought to the layout and content of a suitable complaint/feedback poster, and if possible share by email any good examples they find online. The group will try to move this issue forward at the next meeting.

- 5. The Practice Report was read by SW and its content noted. The group regretted Dr Arora's absence, but also noted its appreciation of the regular attendance of a partner and understood that if the designated partner has to drop out at short notice it is difficult to replace them.
- 6. AoB
- i. Concern was expressed about the practice's handling of complaints, which had not always met the advertised targets. Some members felt that responses received failed to address the essence of complaints. PC pointed out that there is also much to commend; it is as important to recognise good performance as to identify failings, and easy to give positive feedback through the messaging system.
- ii. There was some discussion of procedures for making follow-up appointments. Members questioned why, when a GP requests a follow-up appointment after a specified time, the appointment cannot be made there and then; there would be obvious advantages to the patient, who would not have to go through the process of re-booking, but also for the practice, as the number of incoming calls would be reduced.

Similarly, members asked why, when a telephone consultation includes the advice to make an in-person appointment if symptoms do not improve, this second appointment cannot automatically be in-person without another preliminary telephone consultation; is there no way of recording in these circumstances that a telephone consultation has already taken place?

# Action point: please could the GP joining us at the next meeting clarify the practice's official policy in these respects, and if necessary explain why the suggestions above could not be followed?

iii. Members expressed concern about errors of coding which had led to unnecessary hospital appointments as well as considerable alarm. As well as the initial impact of such errors, there was anxiety that incorrect information, once on the medical record, might not be removed. This could have an impact on future medical treatment as well as on possible insurance claims. For the practice, mistakes undermine patient confidence.

# Action point: please could the GP joining us at the next meeting outline in general terms how such errors arose, what steps have been taken to ensure they are not repeated, and how the practice ensures that medical records are corrected?

- iv. AA informed the group of a social prescribing project at Barts Hospital, aiming to devise a national pathway for treatment. Participation is invited from patients already receiving a social prescription; the next meeting is imminent, but there will undoubtedly be more in future, of which the group should be aware.
- v. AA agreed to be the 'rolling Chair' at the next meeting. RT will ask whether members might be allowed to park on the Baring Road forecourt, in view of the later time of current meetings. PH gave his advance apologies for the meetings on 19 April and 5 June; PC for 19 April.

The meeting was declared closed at 7.08 p.m.

Dates and locations of future meetings:

Wednesday 19 April	BR
Monday 5 June	RG
Wednesday 12 July	BR
Monday 11 September	RG
Wednesday 18 October	BR
Monday 27 November	RG
Wednesday 10 January 2024 AGM	BR