

Thurleigh Road Practice Open meeting 2 October 2024

In conjunction with Thurleigh Road Patients' Group

Held at St Luke's Church, Ramsden Road

Background

The meeting was convened by the Practice with the aims of:

- Informing patients about national trends in policy and General Practice;
- Explaining to patients recent and upcoming changes in the Practice;
- Answering questions about issues raised by patients in their responses to the invitation to the meeting.

An invitation to the meeting was sent out by the Practice in mid-September to all patients for whom they had an email on record (around 9300 patients). 384 replies were received (with some duplicates) of whom 297 patients were planning to attend. Of the remaining 87, 53 would like to attend another daytime session; 19 would like to attend an evening session; 15 do not want to attend an open session at all.

Anna Walker, Chair of the Patient Group agreed to chair the meeting and members of the patient group were on hand to help.

The issues raised by patients in advance in responses to the form were predominantly about how to make appointments (including getting face to face appointments) and the use of the triage form. There were also several questions about continuity of care, follow up appointments and test results, repeat prescriptions, communication between hospitals and the GP surgery as well as a range of more specific questions.

The meeting

The format of the meeting was to have an hour with information provided by the Practice from a panel and questions from the floor. This was followed by a further hour in which the panel and further members of the practice team and the patient group were stationed at tables which people could visit to gain more information on particular topics of interest to them.

Members of the Thurleigh Road Practice team who were present on the panel:

Neil Lazenby	General Manager
Monika Shahjadee	Practice Manager
Huma Jagirdar	Deputy Practice Manager
Dr Shazia Ovaisi	GP Partner
Dr Sajid Patel	GP
Tor Godfrey	Advanced Nurse Practitioner
Stephen Woolford	GP Registrar

Anna Walker set the scene outlining some national trends including the government's commitment to improving access to primary care with appointments needing to be given within two weeks, of increased demand for services from GP with higher numbers of patients

per GP, increasing use of digital platforms, the greater range of clinical and professional staff at GP surgeries and the requirement to use triage as a way to access services.

Neil Lazenby explained that triage was a process whereby a clinician looked at a request for care and directed it to the most appropriate team member.

He also updated the meeting about positive changes:

- There has been successful recruitment of both GPs and administrative staff meaning that almost all posts at the surgery are now filled.
- There is now a wider range of staff including Pharmacist and Pharmacy Technician, Physician Associate, First Contact Practitioner, Social Prescriber.
- Face to face appointments are now the default with 15 minute appointments replacing 10 minute ones. Patients can still request a phone appointment.
- New cloud-based telephony which gives information about a patient's place in the phone queue and also offers the option for the surgery to phone the patient back to save waiting on the phone.
- There is a new website coming which has unfortunately been delayed but it will be a big improvement as the practice will be able to make changes at a local level..

Huma Jagirdar expanded upon the triage system:

Triage is now the only way to access an appointment and if a person phones the surgery, the reception staff will, in effect, complete a triage form with them rather than booking an appointment immediately. This request enters the triage system.

- A range of specialist staff makes it possible for people to be dealt with on a case by case basis so that they see the appropriate person as their first point of contact.
- The Government wants everyone to be seen in 2 weeks from putting in a request.
- The online form is the easiest way for total triage to be carried out.
- At Thurleigh Road, a clinician looks at form rather than a Care Navigator as in some other practices.

Questions

In the Q&A session the main points covered were:

- Seeing same GP cannot happen on a regular basis as everyone has to be seen within two weeks.
- Complex cases are discussed in multidisciplinary team meetings (MDT) meaning all staff are familiar and can hand over care. There are also registers of people with specific priority needs such as vulnerable children and people with serious mental illness.
- For follow up/routine appointments with GPs, patients need to fill in a new triage form. The Practice will look at appointments with nurses to see if they can be booked further ahead.
- The Practice wants to encourage uptake of NHS app, which allows you to see lots of information especially for things like blood tests results.
- A booklet is available explaining step by step how to obtain a repeat prescription.
- The Practice is aware of website issues - inaccuracies and the need for clearer information. It is moving towards new website, and will pursue the new provider for early action. It was not expected to have taken this long to achieve.
- Communication between primary and secondary care is a major issue especially when the hospital is outside the St George's group. The South West London Integrated Care

Board (ICB) is trying to fix this. Sharing information with different areas remains a challenge.

- The online triage system is only open for a limited period each day because of capacity issues – i.e. not enough appointments. Practice staff are concerned that if it was open all the time when appointments were not available, there might be an emergency request which was not responded to. So it is only open when there is a clinician to look at requests.
- Admin requests can be made at any time on the triage form.
- The NHS now asking all GPs to move towards keeping the form open as long as the surgery opening hours and the Practice is working towards this.
- The triage form needs to be as user friendly as possible. A patient offered to critique the processes on the website from the patient's perspective. Anna Walker said the Patient Group would follow this up. All agreed the new website needed a clear definition of what triage was and how patients needed to fill in the form.
- The Practice encouraged patients to make full use of the form e.g. if issues were very complex, a double appointment could be requested; if no previous reply had been received, this should be flagged in the request.
- The Practice encourages patients to use NHS 111 for out of hours issues as appointments can be given at a hub location where the GP has access to the patient's notes.
- Video appointments could be a possibility moving forward. The Practice would explore this.
- Correcting information in the online medical record can be done through filling in an admin triage form.
- There has been a rise in the number of patients with eating disorders since the pandemic. Staff do have ongoing training in this area and it is a topic which comes up in multi-disciplinary discussions. There are real challenges in accessing secondary care.
- Preventive care and wellness advice was raised. Tor agreed this was vitally important. She mentioned over 40's checks, pre-diabetes screening and screening such as mammograms, smears and bowel cancer tests. The Practice would like to have more time to focus on wellness.
- If a person needs more medication before a hospital discharge summary reaches the Practice, they should fill in an admin triage form.
- The Practice does not automatically contact patients who have been discharged from hospital. It was up to patients to initiate the contact. However, hospitals sometimes sent the surgery a "red alert" in particularly difficult circumstances.

Further questions could be answered by staff in different locations in the church

- Triage / GPs
- Nursing team
- Pharmacists
- NHS app
- Management and admin staff
- Patient Group

Additional staff who attended from the Practice were:

Aneesha Dhillon	Physicians Associate
Liberty Redpath	Nurse
Linelle Best	Associate Nurse
Kamran Mangral	Pharmacist
Heeral Patel	Pharmacy Technician
Ameer Razvi	Administrator

Olivia Grimmit Administrator
 Yonatan Tulloch Administrator
 Rim Yosief Administrator
 Zak Kapoor Administrator

Feedback following the meeting

A short questionnaire was sent out by the Patients’ Group to capture feedback.

There were 77 responses of whom 54 attended the meeting.

Of those who attended :

Very helpful	Fairly helpful	Not very helpful	Not at all helpful
33 (61%)	19 (35%)	2 (4%)	0

Patients’ opinions of the practice following the meeting were:

More positive	More negative	Unchanged – already positive	Unchanged – already negative
39 (72%)	0	14 (26%)	1 (2%)

Patients were keen to have further meetings with 36 (67%) suggesting have them annually and 16 (30%) suggesting every 6 months and 2 people (4%) suggesting no further meetings.

Suggestions for improvements for meetings included:

- Better introductions of people on the platform with more microphones for them.
- A clearer time frame for the meeting with questions in advance to avoid duplication.
- Clearer explanations of triage and making appointments and not making assumptions about what people knew already. Explanations on the website.
- Powerpoint slides.
- Shorter first part of the meeting.
- More roving microphones and more even spread of questions across the audience.
- Break out groups.
- Targetting future meetings at different age groups. Smaller meeting.

All but two of those who were unable to attend favoured a future meeting in the daytime (N.B. these were people who had already opted for a daytime meeting) and that such meetings should be every six months.

Thurleigh Road Patients’ Group
 October 2024