#### MINUTES OF THE THURLEIGH ROAD PRACTICE PATIENT GROUP MEETING

### 9th September 2024

**Present from the practice:** Neil Lazenby (General Manager), Monica Shahjadee (Practice Manager) and Huma Jagirdar (Assistant Practice Manager)

**Patient group:** Anna Walker (Chair), Sara Turner (Vice Chair), Patrizia Cooke-Hurle, Janice Price, Ricky Thomas, Angela Davies, Sara O'Reilly, Liz Freeman (minutes) and Marina Ratcliffe

Apologies: Alison Mansfield (Secretary), Nina Smith, Emily Travis, James Marsh, Chris Hyde

Anna opened the meeting by welcoming the new Practice Manager, Monica Shahjadee. Monica's last role had been as Practice Manager for Parliament Hill Medical Centre which was rated as outstanding by CQC. She moved from Sweden to the UK in 2021. She has been a lecturer and research assistant and worked for an international IGO. She now lives in Tulse Hill and thus her move to Thurleigh Road Practice. The Patient Group welcomed her warmly.

Minutes of the last meeting were accepted and there were no actions.

#### **News from the Practice**

Huma has been promoted to Assistant Practice Manager. The Patient Group congratulated her warmly for a well-deserved promotion and thanked her for all her work at improving the Practice's processes. Neil reported that Zac Kapoor is a new part-time administrative assistant and Lila Best full time. The final administrator to be appointed will start in October. There will then be no vacancies.

Two new doctors start in October and November and there will then be full medical capacity. No agency or locum staff will be required, thus a great financial saving.

#### BMA vote on GPs 'Go Slow':

The doctors had decided not to take any action that would jeopardise patient care. The action the Practice was taking included not signing off new data sharing agreements and switching off medical optimisation. It was recognised such actions could affect patient wellbeing in the longer term, but the reasons for GP action at the moment were recognised.

#### Patient information sharing

Anna reported on the drive across the NHS to improve sharing of patient data and information between surgeries and local hospitals. This would be very helpful for patients and even more important in the future given the government's policy of moving care from hospitals to the community.

Patrizia spoke of her husband's recent discharge experience. The Practice confirmed its normal practice is that patients should make the initial contact with the surgery after a hospital stay. However, it was aware of those who are vulnerable and/or unable to make contact with the surgery and contacts these. The hospital issues special 'alerts' if the

matter is urgent.

It was generally agreed that this policy needs to be made known to patients and should go onto the new website.

Action: Monica Shahjadee and Huma Jagadir

## Annual GP patient survey results

The annual GP patient survey takes place every year. Surveys are sent out in January and the national results are available in July. The link to this year's results: <u>GP survey results</u>

At Thurleigh Road, 400 surveys had been sent out randomly and about 100 replies (26%) received. This was a very small sample but it was important not to ignore it as the survey was done annually (and therefore charted views over time) and allowed national and local/Integrated Care Board (ICB) comparisons. Anna said she had used the comparison tool to compare Thurleigh Road with Balham Park Surgery and Putneymead which we were in touch with and was thought to be very good in SW London. The results were not good. Anna asked Neil for the surgery's views. Neil agreed our results were not good. The Practice had been at its lowest point in January - a shortage of clinicians and administrative staff with triage in its infancy. He thought the January results were a true reflection of where the practice had been but things had definitely improved since then.

Our own survey last January had provided more detailed feedback. We are in a better position now. Triage is working much better, though the process now needs to be extended to a full working day. Aneesha cannot do this alone so other clinicians will need to be involved. The Practice did not have a deadline for all day availability of triage but needs to sort it as soon as possible. Huma confirmed that she and Aneesha plan to go to Putneymead as soon as possible now the summer holidays were over to learn from their experience on triage.

#### Introduction of the new website

Neil said that introducing the new website was taking longer than planned as the suppliers had so many practices to deal with. The Patient Group thought a new website was a very important part of the Practice's overall improvements and urged Neil to agree implementation end dates with the suppliers asap. Others would do this and there was therefore a risk our Practice would be pushed to the end

Action: Neil to agree an implementation date for the new website with the suppliers

The group discussed the patient use of the website and how it was accessed. All minutes, dates of meetings and occasional information needed to be on the patient section. David Veloso would be the Patient Group contact.

# **Telephone**

There are delays concerning the telephone system. Tor is due to record the new script next week.

### Group Practice meeting with patients on 2nd October

Emails had been sent to about 9k patients (those over 18 with email addresses) and, so far 172 have signed up to come. The form for signing up had been designed by Sara and can be filtered for various types of information eg attend or not, main issues of concern etc. Sara was thanked very warmly by the Group for all her work on the form. Sara said that the main issues flagged to date related to booking appointments (by far the most), repeat prescriptions and continuity of care. Janice said that she thought it was very important that patients understood what triage was and how the practice carried it out. Huma explained the system of a standardised online form to be filled in which was viewed by two clinicians before a decision was made as to the next step. It was also felt important to emphasise that ALL practices were implementing this system, not just TRP. It was agreed that an explanation would be important on 2 October. Anna would chair the meeting on 2/10 so she could deal with persistent complainers if needed. The purpose of the session was:-

- For the Practice to explain the improvements and processes it had in hand
- To give an opportunity to patients to raise issues of concern to them There was discussion as to whether there should be an open door policy on the day or a limit on numbers. The church could seat 400. It was agreed that we would monitor the numbers signing up and take action depending on what the final number looked like.

# Action prior to 2 October patient session

- 1. An agenda would be drawn up in the light of concerns patients wanted to raise action: Patient Group and Practice
- 2. The Practice would nominate someone to help the Patient Group with the arrangements action: Neil
- 3. meeting to be advertised prominently on the website action: David Veloso
- 4. an **email reminder** would be sent to all patients (done! Thank you David!)
- 5. some members of the Patient Group had not received any notification of 2/10 (including Anna and Liz Freeman, Richard Hatfield) action: Alison Mansfield to check whether all Patient Group members had received invitations and let David know (done 18/9) David to advise on why there has been a problem and how it can be remedied
- 6. it was agreed that all attending should be given a leaflet on arrival containing the agenda and a brief resume of triage action: Practice to produce a short draft explanation of the triage system: Neil and Huma, Patient Group to comment
- 7. Anna would liaise with the church on raised seating for the panel of speakers, loud speakers and posters for the church door, and Western Lodge for the staging. action: Anna
- 8. Huma agreed to produce nameplates for the speakers so all attending knew who they were **action: Huma**
- **9.** Anna would arrange a pre-meet for the Practice and the Patient group on Friday 27 September **action: Anna**

10. It would be helpful to have as many Patient Group members as possible on 2/10 and we should sign up action: Alison to encourage all Patient Group members to sign up (done 18/9)

### Patient suggestion box and notice board

Discussion on this was postponed to another meeting

### **Regular information for the Patient Group**

The Family and Friends survey went out randomly to about 100 patients a month for their feedback about their experience of the surgery. Formal complaints also had to be reported to CQC. Neil said there had been only one complaint in the last eight weeks.

Sara suggested that more needs to go on the website – especially good news. It was agreed that, if complaints and Family and Friends results were being reported to CQC, the Patient Group should also have that information on a regular basis **action: Neil**Huma mentioned Google reviews as the Practice would like more positive ones.

## **Wandsworth Primary Patient Care Forum**

No one was free to go to the last one on 4/9. Good if someone could go to the next one. Alison, Ricky and Sarah O'Reilly have been and found it useful.

Action: Alison Mansfield to circulate the next date when it is known and ask for volunteers

It was noted that Healthwatch Wandsworth was currently doing a project on access to primary care in the borough. The contact was Max Russell <a href="max@wandcareall.org.uk">max@wandcareall.org.uk</a>
Action: Anna or Alison would contact Max re our possible participation in this project

#### Meetings in 2025

There was a proposal to change the day the Patient Group meetings were held from Mondays to Thursdays in 2025. Anna could not do Tuesdays. It might be that the day needed to vary at different meetings.

Action: Alison to canvass the day change with all Patient group members

#### Any other business

1. it was suggested that there could be a bench at the back of the Practice, where there is a small garden area, for the surgery staff to sit and have coffee or lunch. This was thought to be a good idea and it was agreed that we would explore the availability of Patient Group funds

action: Alison and Gwen

2. Huma asked if anyone knew a handyman to take down the barrier at reception and put a wooden platform in its place. Action: Anna to ask her street What's App group

Next meeting: Monday 18 November including AGM 5.30-7.0 at the surgery