

# **Lambton Road Medical Practice Patient Participation Group**

## **Minutes of the meeting held on 20 November 2019**

### **1. Welcome and Apologies**

**Present:** Peter West (Chair) Geoff Shorter, Marilyn Frampton, Penny Smith, Laura Jenkins, Clare Gummett (Merton CCG)

**Apologies:** Michael Keene, Jose Lourtie, Judith Brodie, Clare Pickard

### **2. Special Item – Dr Threapleton on Medicines Management**

This item was deferred due to extra hospital commitments for the speaker.

### **3. Minutes of the Last Meeting**

The Minutes of the meeting of the last meeting were agreed and signed off.

### **4. Matters arising**

#### **a) Matters arising and action points for PPG from previous meeting, not on the Agenda**

There were no matters arising.

#### **b) Matters arising for the Practice**

There were no matters arising.

### **5. Update from LRMP**

The Practice will have two staff providing access to social prescribing on four days a week. Initial review of patients for potential referral to social prescribing has highlighted that some patients have very high consultation rates, in one case 52 appointments in a year. The longer term aim for social prescribing is to include volunteers but it will be important to find ways of matching patients with volunteers.

The Practice is again putting on a lunch before Christmas for a group of patients who live alone. There will also be a free Christmas Lunch available at the Alexandra pub in Wimbledon.

The Practice has a Darzi Fellowship. These provide time for GPs (or others in the NHS) to develop and test ideas around service innovation. It is anticipated that the fellow will have further discussions with the PPG. More details will be presented as the fellow's project develops.

Joint working with Francis Grove through the new Primary Care Network (PCN) is slowly developing but there are no major changes to report at this early stage. PS noted that an underlying principle of PCNs is that they match up with social care areas, hence, for example, the Practice has not formed a PCN with its associated practice, the Grafton Practice in Tooting.

It is understood that the Babylon Practice is growing and may reach the minimum level required for it to be eligible for some specific support funding from the NHS on top of the patient capitation fees. This is provided to practices over a given size. GS noted that by using a private GP service to develop an innovative IT approach in the NHS, it may be possible to test this innovation through an arms-length relationship, with less direct responsibility on the NHS.

PS noted that there had been further work and presentations around the other NHS algorithm approach, Dr Link, but that there were concerns about the relatively high rate of referral to hospital accident and emergency departments and to 999 calls. There is evidence of peak use in the evenings and a rising number of younger, more mobile people seeking their health care directly at Kingston Hospital. Concern remains about the need to keep some appointments reserved for patients who might in future be referred, to be seen at short notice, by Dr Link.

PS noted that in view of the small number of calls received on Saturday mornings, the Practice, which was never funded for calls on Saturdays, would stop taking calls on Saturdays so that staff could concentrate on other activities. (PW post-meeting note – it will be worth looking at future statistics to see if there is a knock-on effect on calls on Mondays.)

LJ presented the most recent, October statistics from the Practice:

- 108 patients completed the Family and Friends Test and 94 per cent would recommend the Practice;
- There were 401 DNAs in October, the highest figure for a month this year;
- 431 patients booked an online appointment in October, of 3,920 appointments made available in the Practice in total (11 per cent);
- 851 appointments were made available online in the four weeks to the meeting date in November;
- Average call waiting times on the BabbleVoice system were over 2 minutes on 28 of 29 working days in October, over 3 minutes on 23 days and over 4 minutes on 12 days. This reflects the volume of calls, with the longest wait of over 6 minutes on a Monday when 487 calls were received. Over 500 calls were received on two Mondays in October;
- LJ noted that the Practice has been given local incentives to ask some initial questions of patients in order to assess the potential timing of their appointment. This has increased the time needed to complete each call but could be having a balancing effect on the availability of appointments.

## **6. Update on the Local NHS – Clare Gummett**

CG provided an update on recent changes affecting the local NHS. She noted that some potential developments or changes may not be announced during the run-up to the December General Election.

Local Clinical Commissioning Groups (CCGs) are being merged into a SW London larger commissioning body. This will be chaired by the current chair of Merton CCG,

Dr Andrew Murray. There will continue to be a role for local GPs in commissioning bodies but detailed budgetary arrangements are not yet clear.

Funding for the development of the Wilson Hospital Site into a Health and Wellbeing Centre is not fully confirmed. Use of the Nelson Hub by patients is not as high as expected. GS commented favourably on a recent patient experience with the physiotherapy service at the Nelson.

Epsom and St Helier Hospital has a new chair, previously the chair of St George's. (Epsom and St Helier is on the government's list of hospitals to be redeveloped.) The consultation on future services to be provided is on hold as it will now need to be resolved by the new commissioning body for SW London.

#### **7. Focus on Communication**

Due to the time, this item was only briefly discussed.

PPG members asked about the extent of flu vaccination calls and PS replied that, due to shortages of flu vaccine during the vaccination period, calls to patients to attend had been very limited this year.

PS reported that as well as signing in for appointments, similar technology could be used, as in the Blood Pressure pods, to provide patients with access to their test results.

#### **8. Patient Feedback**

PW complimented the Practice on the way that reception staff had shown awareness and monitoring of an older person who sometimes wanders in Raynes Park and can appear confused but reluctant to accept help. This person frequently comes to the waiting room without an appointment and without seeking one but is now known to staff.

#### **9. Update on Twitter**

No update as JL was away.

#### **10. Any Other Business**

There was no further business.

#### **11. Date of Next Meeting**

18 December was agreed as the date for the next meeting.