



Monday 14th November 13.30-14.30 hours
IWMP Patient Reference Group Meeting

Attendees:

Geoff Brown (GB) - Chair	Rachael Pengelly (RP)	Dr Chris Lachmann (CML)
Helen Whitham (HW)	Annika Gilljam (AG)	Sue Field (SF)
Neil Scarlett (NS)	Ian (Edward) Shepherd (IS)	Jan Helbert (JH)
Marieke Koenhorst (MK)		

Absentees:

David Cockshoot Neil Scarlett Annika Gilljam Marieke Koenhorst

Agenda:

1) Apologies for Absence

Apologies received from Dr David Cockshoot, Neil Scarlett, Annika Gilljam and Marieke Koenhorst

2) Introductions

Alan Miles was introduced to new participants.

3) Declaration of Interest

There were no declarations of interest.

4) Minutes of the Meeting on 26th September 2022 and any matters arising

Minutes approved and no matters arising.

5) Appointment System

AM stated that difficulties obtaining appointments were based on attempts to book in August and so may no longer be valid. IS commented that it was appreciated that it was possible to get appointments during COVID as this was not possible at other practices.

There was general consensus that all associated with the practice have delivered an excellent service during COVID and special mention was made regarding the reception staff. RP to communicate praise.

RP stated that the online booking system is as it used to be in terms of providing face-to-face consultations. E-consult also offers a facility to contact GP services. CML explained that capacity has to be made available to deal with urgent cases.

RP updated that the practice went live with online registrations on Thursday 10th November. This service is unique in Wharfedale and Craven and has resulted in 10 new patient requests in a matter of days. Some were patients new to the area and others were moving practice. JH enquired as to how it might be recognised that the patient list is getting too big. RP explained that operational status now has to be declared for primary care. IS asked how this was assessed. RP discussed that statistics were obtained on a Monday linking numbers of requests to numbers of healthcare professionals. The practice is usually Green whereas the norm is for practices to be Amber or Red. CML noted that although guidance allows for flexibility of registration there is a preference for patients to be within the catchment area as this allows for enhanced service provision.

6) Telephone System

AM stated that telephone issues that had been brought to his attention were pre-August. Mention had been made of phone queue lengths of 27. RP and CLM indicated that this would most likely have coincided with opening up vaccination bookings.

A new cloud-based phone system is in place which provides a dashboard facility to analyse calls and if more than 10 calls are queueing then QueueBuster technology provides a call-back solution. AM had used this technology but it had unfortunately failed. This may have been later in the day and RP will investigate what happens after 6pm. CLM suggested these calls could be queued for the next working day. As the system now specifies the queue size which has not happened previously RP felt it would be useful to provide an update about the new phone system.

JH suggested that the answerphone message should be amended as it still relates to COVID pressures. RP will oversee this amendment. AM suggested that the message voice might be changed and RP will investigate. IS wondered if the music while on hold might be improved but RP said that this is not possible.

7) Patient Online Access to Medical Records

RP stated that NHS England want full online access to medical records to be available to patients by the end of November. CML and RP discussed concerns regarding opening up records from 30th November particularly relating to safeguarding and mental health. Patients on a two-week pathway may be distressed to see referral for cancer and decisions may have to be made regarding access rights. SF wondered if this might restrict clinical content and CML said that care would be taken.

AM felt it would be useful to see test results particularly to ensure that they are back. He felt opening up the system may lead to an abundance of queries. CML said that a test result of 'abnormal but expected' would be an example that might cause confusion.

IS queried if patients will be proactively told about the availability of online access to medical records. RP stated that this was not the intention.

8) Update on the COVID/flu programme

RP stated that this is on target to complete by the end of the month. There are around 100 over 65s who will be written to as they may not have access to computers and mobiles to receive messages, AM wanted a written record as to how well the practice has done rolling out the vaccine programmes. It was noted that a lot of GP practices have chosen not to deliver vaccines and the Group was appreciative that Ilkley & Wharfedale have. CML stressed that the programmes have taken a lot of organising and credit was due to all involved.

9) AOB

- AB reflected on the previous minutes and that in his opinion Lloyds Pharmacy offered a similar level of service across their pharmacies and perhaps blame may not be attributed to local patients.
- GB brought up issues relating to water collection outside the building in heavy rainfall. RP will contact the landlord to see how this might be resolved. She explained that there was potential for work to be carried out on the site in the future as capacity problems currently exist.
- **Date of Next Meeting**
Monday 20th February 2023 at an earlier start time of 12.30

Sue Field
16th November 2022