

**TWO RIVERS MEDICAL CENTRE, IPSWICH
PATIENT PARTICIPATION GROUP (PPG)**

Minutes of the meeting held on 04 July 2022 at TRMC at 17:00

Present:

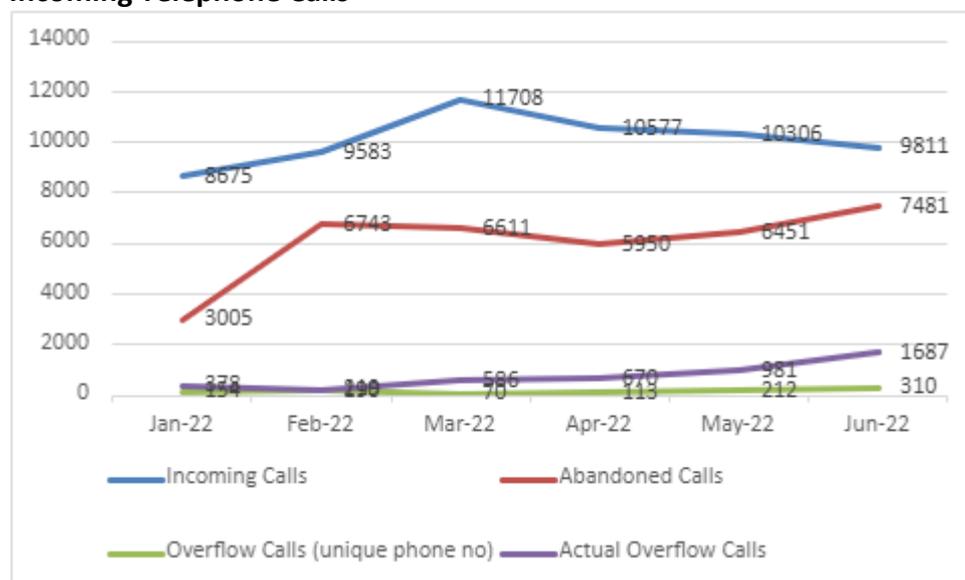
Jessica Gaskell	Dr Jonathan Knight	Sue Hayes	Jenny Pickering
Anna Soroko	Mike Holbrooke	Jan Parry	Michele More
Philip Barber			

Apologies:

Neil Masser	Mike Bernard	Marlene Robinson	Sally Gardiner
Sue Ward	Matthew Girt	Ian Quickfall	Jane Coates

PRACTICE REPORT

Incoming Telephone Calls



Incoming calls:	Amount of calls Reception have answered.
Abandoned calls:	Patient has hung up before they get through to Reception.
Overflow calls:	TRMC are at their maximum call queue length (50) so patient gets an engaged tone.
Actual overflow calls:	Actual number of patients that have received engaged tone, rather than amount of times, it has occurred.

Unfortunately, our reception team is no longer fully staffed; we have had a few leavers within our reception team and one full-time member of staff is currently on long-term sick leave.

The amount of incoming phone calls has remained consistent over the last six months and since our last PPG meeting the amount of abandoned and overflowed calls has risen. This reflects the staffing changes within our reception team.

Our clinical admin team is still supporting our reception team with one member of the team answering the incoming phone calls for one hour (08:00-09:00) each day.

Average Time in the Telephone Queue

Time	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
08:00	00:17:27	00:15:43	00:14:29	00:12:38	00:16:56	00:20:27
09:00	00:10:45	00:08:40	00:08:45	00:07:21	00:08:45	00:11:47
10:00	00:13:13	00:11:54	00:11:10	00:10:01	00:08:48	00:09:54
11:00	00:15:45	00:12:40	00:09:45	00:10:47	00:09:38	00:10:34
12:00	00:16:34	00:15:24	00:11:44	00:11:57	00:09:28	00:10:43
13:00	00:16:43	00:12:09	00:09:40	00:08:43	00:07:32	00:10:17
14:00	00:21:01	00:13:01	00:10:31	00:08:51	00:10:43	00:12:20
15:00	00:23:05	00:13:34	00:11:14	00:11:39	00:09:39	00:10:55
16:00	00:23:28	00:17:54	00:12:55	00:08:44	00:09:46	00:13:35
17:00	00:20:18	00:11:50	00:08:18	00:04:48	00:08:44	00:09:37
18:00	00:08:37	00:05:25	00:04:20	00:01:46	00:05:54	00:05:55
Monthly average:	00:17:00	00:12:34	00:10:16	00:08:50	00:09:38	00:11:28

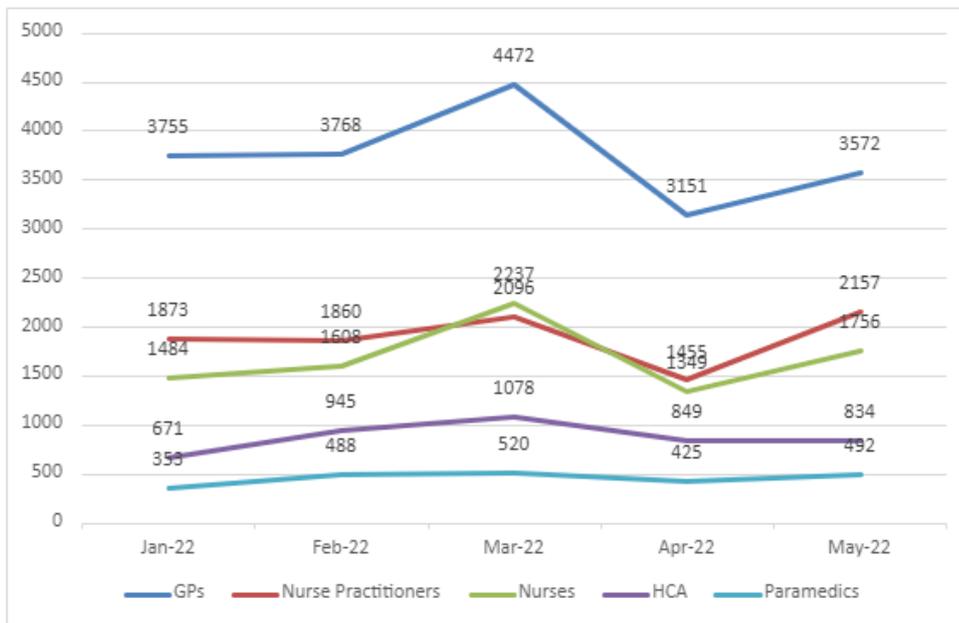
Maximum Waiting Time in the Telephone Queue

Length of Time	Jan-22		Feb-22		Mar-22		Apr-22		May-22		Jun-22	
	Count	%										
0-9 mins	3945	40%	4458	47%	6192	53%	6090	58%	6231	58%	4770	49%
10-19 mins	2597	26%	2830	30%	3575	31%	3093	29%	2547	26%	2782	28%
20-29 mins	1741	18%	1652	17%	1592	14%	1162	11%	1352	13%	1510	15%
30-39 mins	911	9%	496	5%	321	3%	212	2%	276	3%	531	5%
40-49 mins	365	4%	113	1%	27	0%	18	0%	85	1%	210	2%
50-59 mins	179	2%	17	0%	0	0%	0	0%	15	0%	7	0%
60+ mins	128	1%	17	0%	0	0%	0	0%	0	0%	0	0%
Max Wait	01:26:47		01:12:05		00:47:40		00:47:20		00:55:14		00:59:44	

Due to the vacant shifts within our reception team, we have seen a rise in the maximum waiting time in the telephone queue and average waiting time over the past two months. However, this is still lower than the times at the beginning of the year.

Reception are still answering nearly 50% (49%) of all incoming phone calls within 9 minutes.

Available Appointments

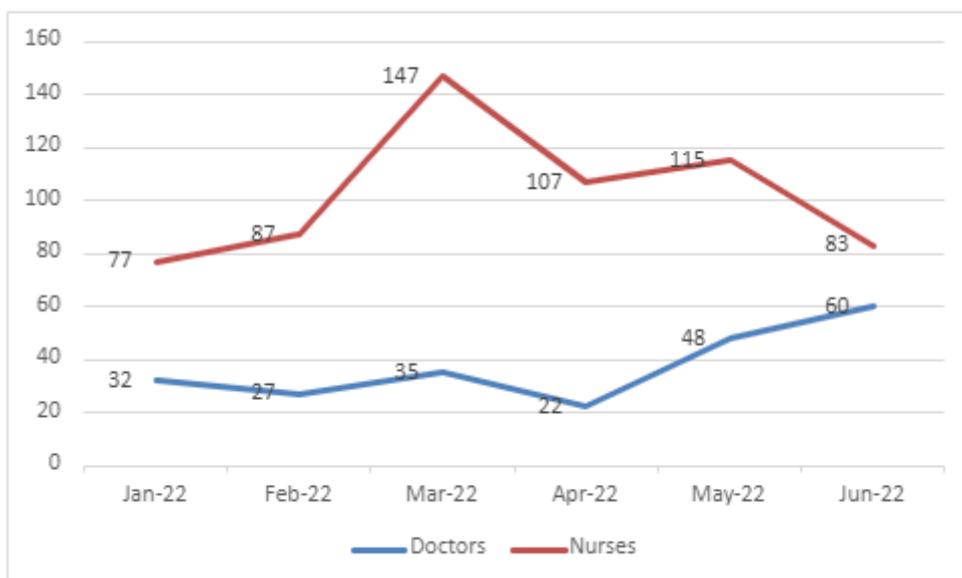


The drop in our available appointments in April was a result of staff sickness as well as annual leave and fewer working days within the month due to Easter bank holidays.

Previously, we have aimed for there to be 100 same day appointments available each day from 08:00, and the remaining appointments to be routine. However, because of staff sickness (we currently have approximately five staff members off with COVID at any one time) we are no longer working towards this and have more same day appointments. This helps us to manage the on the day demand if a clinician is unwell.

The PPG saw in our staff update section that Dr Kate Riches and Dr Dan Griffin are no longer working at TRMC and posed the question of replacement GPs for them. Whilst we have not directly replaced their sessions with other GPs, we do have a new Nurse Practitioner, Sheila. Our Nurse Practitioners and Advanced Care Practitioners support our GPs by dealing with the majority of patient's acute needs. This enables the GPs to deal with complex queries when needed.

Appointments Marked as 'Did Not Attend' (DNA)



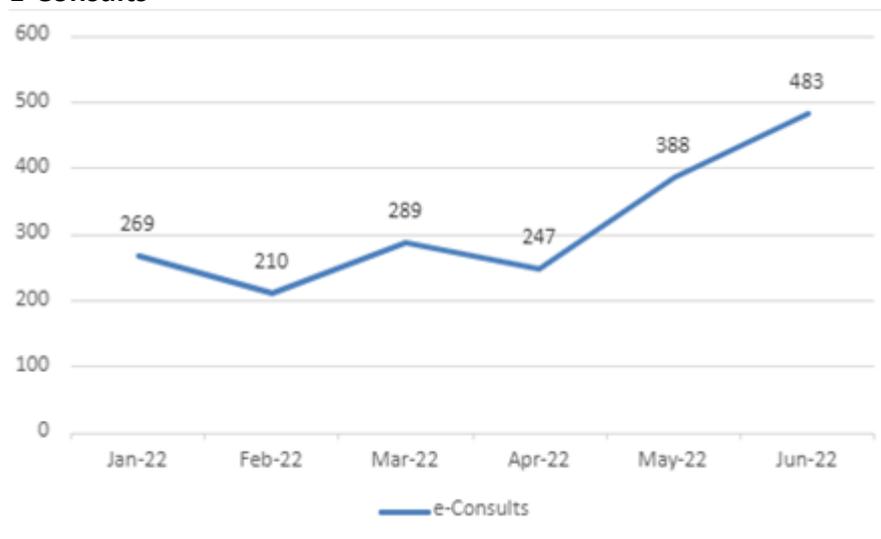
These figures show patients that did not attend for their appointment; this is formed of patients who missed their appointment and did not notify us to cancel it.

The group noted that whilst the patients who did not attend for nurse appointments is reducing from its peak in March, patients who did not attend for doctor appointments are rising.

When a patient does not attend for their appointment, we send an SMS to inform them that the appointment has been marked as the patient not attending. In the past, we have sent letters to patients who did not attend but this was a lengthy piece of work, as it required further investigation as to why the patient did not attend. The SMS works well and occasionally we will receive communication from patients apologising for missing their appointment.

Overall, our figures for patients not attending their appointments are much lower than they have been in the past.

E-Consults

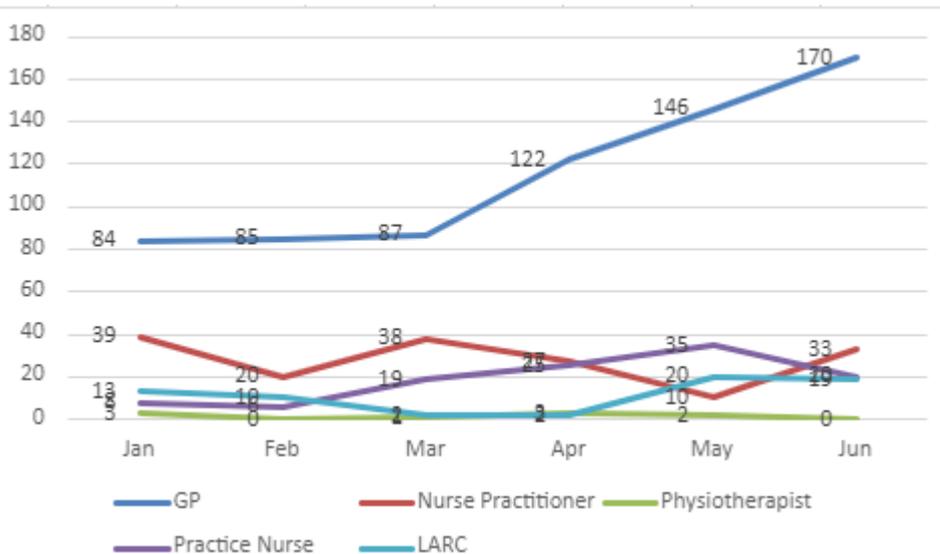


Patients submit e-consults via our website. We have tried to promote e-consults with information about them being visible on our website and in our telephone queue. This is because it reduces the amount of patients that are waiting to speak to reception via the telephone.

Our reception team processes E-consults; they direct the patient to the most appropriate care, as they would do if that patient were on the phone or front desk. If the patient needs to see a clinician, they will book an appointment, or if the patient is requesting further medication or med3, they will send a message through to the appropriate team. We view the e-consult forms as an extension of ways patients can contact us.

E-consults can be lengthy for patients to submit, this is, primarily, because the form uses an algorithm to check that the patient does not need an urgent response for their symptoms and/or query. TRMC has until the end of the following working day to respond to e-consults so they are not appropriate for urgent queries.

GP+



This graph shows how many TMRC patients have been booked into GP+ services over the last six months. Our utilisation of this is dependent on how many appointments they have available.

STAFFING UPDATE

Doctors

Unfortunately, Dr Dan Griffin left us on 30 May.

Nurse Practitioners

Sheila Bundhun started with us as a Paediatric Nurse Practitioner on 16 June

Nursing Team

Kate Allen returned from maternity leave on 06 June.

Non-Clinical Teams

Reception

Jo Castle finished with us on 20 May.

Rafaele Reeve finished with us on 28 June. Rafaele will be continuing to work as a bank member of staff.

Jodh Sahota will be leaving us on 11 August. Jodh will be continuing to work as a bank member of staff during university holidays.

We will recruit to replace these hours within the team.

Medical Secretaries

Angela Moss joined us on 07 June.

Clinical Admin

Kerry Stevenson finished with us on 31 May.

Medicines Management Team

April Stalley has not returned following her maternity leave.

Primary Care Network (PCN)

Interviews for an additional Care Co-Ordinator took place 30 June.

PRACTICE UPDATE

Complaints

April – June 2022

Complaint Category	April	May	June	TOTAL
TOTAL				
Appointment		1		1
Appointment availability		3		3
Care planning			1	1
Communication	1	1	3	5
End of life care			1	1
Follow up care	1	2		3
Inaccurate records			1	1
Parking eye		1		1
Prescribing error		2		2
Prescription issues		2		2
Refusal to prescribe	1	1	1	3
Removal from list		1		1
Staff attitude	1	1		2
Waiting time on phones		1		1

Staff group	April	May	June	TOTAL
TOTAL				
Reception	Communication x1 Staff attitude x1	Appointment availability x1 Waiting time on phones x1	Communication x3 End of life care x1	Apr: 2 May: 1 Jun: 3
Practitioner	Communication x1 Refusal to prescribe x1	Follow up care x2 Communication x1 Staff attitude x1 Refusal to prescribe x1 Prescription issues x2	Care planning x1 Refusal to prescribe x2	Apr: 2 May: 7 Jun: 2
Admin			Inaccurate records x1	Jun: 1
Medicine Management		Prescribing error x3		May: 3

Praise

April – June 2022

Staff Member	Team	Reason
Berkcan Topal	Reception	Helpful & fully explained everything
	TRMC Team	Received good care at TRMC over the last few years
Kirsty Piper	Nursing	
Claire Bliss	HCA	Patient and lovely with tricky bleeder
	Reception	Helpful & understanding
Nicola Skrinchuk	GP	
Dan Griffin	GP	Very thorough
Nicki Joy	Meds Mgmt	Got patient necessary medication
	Cancer Care Team	Support receiving
	Cleaning Team	Found and returned patient's walking stick
Jon Carlyon	Nurse Practitioner	Sorted things out for patient
Rafaele Reeve	Reception	Kind, considerate & helpful
Rosie Bowen	Reception	Kind, considerate & helpful
Svitlana Gallivan	Reception	Polite & calm
Wes Grimsey	Visiting Clinician	Care, attention & kindness
	TMC Team	Hard work & dedication
Amy Low	HCA	Professional & lovely
	TRMC Team	Everything everyone has done
	Reception	Responsive when answering calls
Vicky Scarlett	GP Registrar	Incredible empathy & helpfulness
Claire Bliss	HCA	Support with dressings & wound reviews
Joanna Ling	Nursing	Support with dressings & wound reviews
Kirsty Piper	Nursing	Support with dressings & would reviews
Jon Carlyon	Nurse Practitioner	Sorted things out for patient
	Reception	Kind, caring & professional
Oliver Lewis	Visiting Clinician	Cheered patient up
	TRMC Team	Accommodating, helpful, calm & caring
	TRMC Team	Fantastic service
Phil Smith	GP	Brilliant in appointment
Dan Griffin	GP	Help & support
Ian Day	Visiting Clinician	Providing wonderful care including follow ups
Sadie Thomas	HCA	
Andrea Hunt	Reception	Sorted appointments for patient
Natalie Whiting	Reception	Sorted appointments for patient
	TRMC Team	Kindness, tolerance, care & professionalism
Dan Griffin	GP	Supported patient with mental health struggles
	TRMC Team	Support received
Kayleigh Weedon	GP	Wonderful with patient

Attending the Practice

Prior to the meeting the group were asked to feedback any communication and/or attendance they had had with the practice. This helped us identify any positive and/or negative themes. A summary is below.

Type of contact	Reason for contact	What went well?	What could be improved?	Teams involved	Time and day of contact
Telephone	Arrange an appointment		Waiting time to get through on the telephone. Waited close to 30mins. Receiving queue information again.	Reception	Try to call in afternoons when reception (hopefully) less busy.
Face to face	Attend an appointment	Short waiting time in the practice		Phlebotomist, Nurse, GP	
Face to face	Attend an appointment	Short waiting time in the practice	NA	Call from reception notifying of available appointment	Tuesday PM
Face to face	Attend an appointment		Appointment was delayed – no information as to why.	Doctor	Friday PM
Face to face	Attend an appointment	Helpful advice	More clarity as to why appointment was needed on the letter received.	Social prescriber	Tuesday PM
Face to face	Attend an appointment	GP very thorough, felt listened to and not rushed	Appointment was delayed – however GP did not rush the appointment	Doctor	Wednesday PM
Website	Ask question & check records		It should be easier to ask clinicians a query. E-consult form is exhaustive.	Reception	

The group discussed the themes mentioned in the attendances above.

When a clinician is running late and there is a delay to their appointment time, it would be useful for the patient to receive more information. Clinicians are able to put a message onto the TV screens in the waiting room themselves. **Jess to follow this up with Rachael Shanks.**

Can the sound notification when a name appears on the waiting room be any louder? **Jess to check with Rachael Shanks.**

Whilst the group understood the reasoning behind why the number in the call queue is no longer there (discussed in May's meeting), they thought the benefits of having it there outweighed the negatives.

[Jes to discuss with Mark Cousins.](#)

AOB

Phlebotomy Services and Appointments at TRMC.

TRMC often advises patients to attend the Landseer Road and/or the Hospital Pathology Department for their blood test due to the capacity at TRMC. We ask staff to only book blood tests into our phlebotomist, Louise's, clinics (Wed and Fri), rather than with our Practice Nurses and HCAs. This is to ensure that there is capacity within our Nurse and HCA clinics for other appointments, which can include routine health checks as well as urgent reviews. If patients need their blood test done before the next available appointment with Louise then they will be advised to go to the other pathology clinics.

Health Education Events

Due to the rising levels of COVID all plans for additional health education events are on hold. We hope that we will be able to re-visit this next year.

Long COVID Services

There is now a service that clinicians can refer patients to who are suffering from long COVID. We currently have no staff off with long COVID; however, we are still seeing the effects of the pandemic. We currently have an average of five staff members off with COVID at any one time.

Masks / Face Coverings

NHS England has advised that NHS Services / Providers need to return to pre-pandemic policies where possible. This includes the requirement of wearing a face covering when entering the building. It is now patient and staff choice as to whether they wish to wear a face covering.

Some infection control measures are still in place. TRMC request that patients wear a face covering if they have respiratory symptoms. Staff are required to wear a facemask if they have a household member who has tested positive. It is still a requirement for staff to complete a LFT twice a week.

Teaching at TRMC

TRMC still has a strong emphasis on teaching.

We have recently had two GP Registrars, Dr N Adhikari and Dr V Scarlett, pass their final exams to become GPs whilst on rotation with us. Four new GP Registrars are starting their rotation with us in August.

We support UEA with teaching medical students; we currently teach years three and four.

Practice Boundary

TRMC has plans in place to increase the practice boundary to include Martlesham Heath. This is to give patients living there more choice of GP surgeries. It is not thought this will affect TRMC list size too much.

We have had around 1,000 patient net gain in our list size since this time last year.

Next PPG meeting: TRMC 5th September 17:00.