Minutes

Hill Surgery Action Group (HSAG)

Date: 5th March 2024

The meeting was virtual

Minutes Maxine Green

In Attendance

Nick Andrews, Maxine Green, Anita Waters, Paul Rodger

Apologies: Victoria Peckham & Karen Purser

- The minutes from the meeting on February 16th were approved by AW and seconded by PR. They will be held on file as an accurate meeting record.
- Meeting notes for this meeting: Maxine Green, Interim Secretary

Email to Jackie Horton, Practice Manager

NA's original email dated 21/2/24 to Jackie Horton, Practice Manager, requesting a meeting has not been responded to., nor has the follow-on email asking for a response. This may be because the email address at Harold Road is no longer monitored. This email contained a cover letter explaining who HSAG was, along with attachments outlining our purpose, constitution, meeting notes for our subsequent meetings, and a request for a face-to-face meeting with JH and a GP Partner.

Action: MG will re-print the email and all attachments and hand-deliver them to the Harold Road site, with copies sent separately for the attention of the GP Partners.

• The main criterion is a request for a face-to-face meeting with HSAG at a mutually convenient date and time to discuss the concerns of the patient group HSAG represents.

Update as of 9/3/24: After hand-delivering the letter, JH has finally responded to NA's emails. JH acknowledged receipt of the first email and the subsequent chase email from Nick. The reason for not responding earlier was twofold: first, JH claims that HS does not have the capacity to deal with two groups, and second, the email address used is no longer in use, despite JH's confirmation of receiving both emails.

Effectively, Hill Surgery wants HSAG to work with them indirectly rather than directly but to engage via the Patient Participation Group (PPG) instead.

Action: As long as the current PPG respects and recognises HSAG as a bona fide patient forum and allocates an appropriate time slot on the PPG/Hill Surgery meeting agendas/minutes and actions, we will engage via PPG meetings in our own right.

We would like to request the establishment of a formal Patient Participation Group (PPG) consisting of **elected officers and a comprehensive Terms of Reference (Constitution) document**. Without these, we cannot trust the PPG's ability to effectively represent patients and prioritise their interests.

Jackie Horton's letter dated 21st February is in response to the NA letter of 14th February.

Jackie Horton sent a somewhat disdainful and dismissive letter to NA, effectively refuting HSAG's concerns and correcting a few inaccuracies regarding the size of the HS list. As the letter was Private and Confidential, it would be inappropriate to share or comment in these minutes; however, NA and MG have taken it to mean JH has rejected HSAG as a patient forum and advised that we "write to the PPG" and that our complaint and concerns "terminate here."

HSAG has raised concerns about the effectiveness of the Patient Participation Group (PPG) at Hill Surgery. According to the NHS PPG 'Terms of Reference,' the PPG should elect officers from among the members, including the Chair, Vice-Chair, Secretary, and Treasurer if required. However, there is no evidence that this process has ever been followed. During the last PPG meeting on 19/2/24, David Standon self-nominated himself as Chair, and the other PPG members did not want to fill the vacant positions. HSAG members have applied to join the PPG, but their applications have been ignored.

Action: HSAG has requested that an appropriate slot be allocated to the group within the PPG agenda and that we be allowed to attend all PPG meetings in our own right as patient representatives. This is not only within the spirit of the NHS PPG guidelines, where <u>any group or organisation can join, providing they are surgery patients</u>; it will also allow HSAG to remain independent. David Standon has agreed to this, and the next meeting is scheduled for 18/3/24. David also requested our agenda points, which NA will provide before the meeting.

Engage Consult

According to HSAG member's feedback, there seems to be a significant gap and lack of understanding about Engage Consult. Although one or two members have used it with variable success, patients lack knowledge of the platform's services and what Hill Surgery makes available, as much of the functionality appears inactive.

Action: To address this issue, we have decided to ask if a member of HSAG can be appropriately instructed in the use of E.C. by a member of the HS Management team. We can then share the training with members and support them in navigating the system. Additionally, we will inquire about the status of the webinar/video that Dr Dann agreed could be set up to help patients use the system to their advantage, easing pressure on the stretched call centre and reception team.

Patient Charter

MG shared the Hill Surgery Patient Charter during the group meeting. The group identified two areas of concern with the charter related to GP appointment responsiveness and patient complaints.

These areas where it appears not to be aligned with the charter document:

- HS will endeavour to offer an appointment with a GP within 48 hours and a primary care professional within 24 hours.
- Written complaints should be responded to within seven days.

Action: This will be discussed at the upcoming PPG meeting. What measures are in place, and are they published? What is considered a 'written complaint'?

Practice Funding

Hill Surgery recently provided an update regarding the number of patients following a merger, stating that duplicate entries have been removed. It's currently circa 21k patients, not 28k, as was believed from previous data captured from various sources such as CQC records.

AW questioned the potential impact of those previous inaccuracies on the NHS budget, as funding is usually allocated based on the number of patients registered with the practice. If the patient count was inflated, this could mean that the funding allocated was incorrect. What happens to over or under-funding?

Action: The matter will be discussed at the next PPG meeting.

HSAG Website

MG provided an update on the website's progress and design during the meeting. The group was informed that the site will be operational starting March 16th. A shared document that contained all the page content was circulated among the group. PR has agreed to proofread the site before it goes live to ensure no errors. The committee members now have email addresses associated with their respective responsibilities. This will enable patients to contact the relevant person without knowing their name. The group is still waiting for biographies from some members. Those who have not yet submitted their biographies are requested to send a photo headshot to MG, which will be added to the website. The website will have a member area, an enrolment page, an upcoming meetings page and a news page. Centralisation through the website will enable the committee to communicate far more effectively.

PR suggested that members be asked if they have specific skill sets to offer the group, such as IT, copywriting, etc.

Action: MG will add to the editable application form.

Other interested groups and new members' applications

MG reported circa 40 members from Pett & Fairlight have emailed her to become members. This will bring the total membership to circa 200. NA advised that local healthcare groups are also posting our content. The plan is to have one central database of patient members and affiliated groups.

Action: NA to advise who the other groups are so we can include them on the website. HVA? NA will compose a holding email to members who do not want to register via Next Door or FB.

GP who works from home

GPs who work from home have commented that they do not have access to patient records, although some do and can investigate past visits/medications.

Action: PPG Meeting

What access do GPs have when working from home, and what safeguards are in place regarding patient records and confidentiality?

AOB

MG informed that she was invited to meet with Sally-Ann Hart, MP for Hastings & Rye, who has
shown keen interest in the HSAG endeavours as she receives similar constituent complaints. Last
Friday, there was a meeting with Adam Doyle, CEO of the NHS Sussex ICB, and several other officers
of the ICB. During the meeting, they discussed the local dissatisfaction with Hill Surgery and the

- formation of the Hill Surgery Action Group. Amy Galea, the Chief Integration and Primary Care Officer, has offered to discuss the situation and will contact MG for follow-up.
- **For Info:** Previously, Sally-Ann Hart communicated with Adam Doyle regarding the situation following complaints from her constituents. Mr. Doyle communicated back, stating that he was told that the problems were related to a computer glitch at the time of the merger. However, HSAG believes this is not the case and will point out that this has been going on for much longer.
- Action: MG & NA will meet with ICB representatives.

A complaint was made to the group, requesting to be explained at the next PPG meeting. To protect this patient's confidentiality, no names will be shared.

The patient was asked to provide a urine sample for testing, which was delivered to the surgery at 9:15 a.m. the following day. The patient received a message from Dr Parker stating that the test was negative. During another call to the surgery for another matter, the patient was informed that the test had not been processed because it arrived too late for same-day processing by the surgery. The sample was destroyed, requiring the patient to provide a new sample the following day.

- Q1: Why did the patient receive a message stating that the test was negative if not processed?
- Q2: How are these errors recorded and measured?
- Q3: What is the cut-off time for samples to be collected or delivered to the pathology laboratory on the same day?

Date of next meeting

- Shared PPG meeting. HSAG will meet at Swallow House for the virtual meeting.
- NA will forward agenda items to David Standon for inclusion on the PPG agenda.