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**50 VICTORIA ROAD WORTHING BN11 1XE**

**Telephone: (01903) 230656**

Dr Navdeep Sandhu. Dr Mohammed Haque. Dr Eugenie McCreanor. Dr Kenneth Lim.

Dr Zoe Chandy. Agnieszka Dixon MPharmS. Dr Kosnatu Abdulai. Dr Lidia Machado.

**PPG meeting notes 23rd April 2025**

**Attendees:**

**Jo Lowes**

**James Smith**

**Donna May**

**Alan Stepney**

**Stephen Peckham**

**Peter Jones**

**Andy Jinman (met with Jo Lowes separately)**

**Hospital appointment notifications –**

We have been made aware that in recent months patients have been receiving letters/messages from the hospital with appointments following old referrals that are no longer appropriate.

Sadly a member of our PPG group received one of these letters for his late wife.

Jo will feed this back.

**Total Triage –**

We discussed the new accurx total triage system which we will be launching on 6th May in great detail where we answered any questions/queries that may arise from the implementation of this change including the following:

* Concerns re the use of technology for the older generation.
* The effects this will have on appointment DNA’s.
* The extra capacity this will create.
* The benefits re reducing the 8am rush, booking routine appointments to enable us to deal with urgent on the day problems and so on.

The PPG agreed that this sounds very beneficial and are all happy to give this new system a try. However, if unable to use reassured they can still call or pop into the

Surgery where a member of the reception team will complete the forms on their behalf.

Questions that were raised include:

Will the patient receive an automatic reply stating their request will be dealt with within a maximum time frame of 48 hours?

Do patients automatically receive a receipt to say we have received their request/?

**Recruitment/Staffing -**

Our lovely Dr Machado is due to emigrate next year. Discussions around this included the plan we have to replace Dr Machado who currently works part time with a full time GP – this is very welcomed by all.

General Practices are currently contracted to allow extended access appointments. We have this set up at present however we made look to provide more over the coming months, we work with our PCN to provide these appointments

AARS funding – We were given funding for the temporary recruitment of newly qualified GP’s earlier this year. This really helped us manage patient demand sadly this has now come to an end. The recruitment of said GP’s across the board is a very difficult process as there is very strict criteria which states the GP must have qualified within the last 2 years to beeligible.

**General discussions re improvement that could be made to the surgery –**

Our PPG group kindly bought some new ideas to our attention which they feel would improve our services these include:

* Very clear, simple and consistent communication on a regular basis with patients to inform them of services which are available to them i.e pharmacy first. Having the knowledge regarding which service to use would benefit us as a practice as this takes away the pressures on GP practices.
* TV in the waiting room to show a video/demonstration of what the total triage system would look like.

There are some concerns currently regarding the lack of communication between patients knows best and patient access.

Often patients will receive notifications re blood results which do not align causing distress to the patient.

Unfortunately this is not something we have any input with or control over.

**Extra Services –**

In previous meetings it was discussed that we would be looking into offer extra services. Micro suction in particular, this was not as simple as we had hoped however we are keen to still get this up and running. There is a lot of competitiveness regarding these appointments across other professional bodies’ i.e Pharmacies and Specsavers due to the funding this brings. James will look into this.

**Next meeting –**

To be held in 3 months’ time Jo will send an email prior to this with details.

We hope to be able to reflect on the total triage change and get feedback as to how our patients feel this is working.

**Post meeting changes/follow up’s**

**AccuRx –**

Following on from our meeting we have done some internal investigations to see whether patients receive an automatic reply to inform them their request has been received by ourselves/if a receipt is issued.

We can confirm the following will appear once your request has been successfully submitted.

**Request submitted!**

**This request is now in the Accurx inbox.**

If you want to add more information to this request, this can be done by adding a note in Accurx inbox. You can also save the request to your clinical system.

Make a note of the reference number below and share with your healthcare provider if there are any technical issues with your request.

**Receipts –**

If you are submitting a form on someone else’s behalf a confirmation text message is automatically sent. We are looking into option can be selected for all requests.

Information screen in the reception area –

James has arranged for a detailed slide to appear on the TV screen in the waiting room. This will be visible to all patients in surgery from 06th May 2025.