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North Kensington Medical Centre

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www.northkensingtonmedicalcentre.nhs.uk

Attendance:

Stephen Duckworth, Jeremy Raphaely, Henry Peterson, Stephen Johnson, Malcolm Mckenzie, Marian Varley, Soonu Engineer.

ACCESS:

Practice no longer offering pre-booked appointments for up to four weeks ahead. Waiting time on the phones is currently 4 mins but we are in the process of trying to reduce this down to 2 minutes.

Plan is to increase the use of online tools such as Patch's, online registrations, NHS App.

NHS App workshop will be here at the surgery on the 8th May. Discussed the roll out of the same day access model as introduced by the ICB/NHS England in the first quarter. Patients overall not keen on the model. Did not feel that the whole patient demographic would be able to access primary care if this were to be implemented.

Patients can still call up the surgery if they are unable to use online tools.

Same day access is more of an add on to help improve satisfaction rate around the appointments offered. Overall satisfaction with NKMC 82% for 22/23 remains high as per IPSOS MORI. Discussed ways of accessing IPSOS Mori and confirmed link on the website and can be access for public to see <https://www.gp-patient.co.uk/>

HUBS:

Patients and general practice will be changing as third-party clinicians will be the ones to see patients if more local hubs put in place (mainly at St Charles). Changes the dynamics of primary care. Awaiting to see what changes they propose. Re-design of the way Primary care operates, is on-going.

Roll out of pharmacy first discussed.

For six to seven common conditions patients can use Pharmacy first.

SAME DAY TRIAGE:

Feels that the triage including Patch's is working, not everyone had made good use of Patch's but those who did manage to get what they needed when requested. Overall happy with the option.

Practice tried to implement total digital triage hence SMS sent to the cohort was discussed at length. Aim was to use PATCHS assist which would have had an option to transcription as an add on and patients were always going to be able to use blended forms of contacting the surgery.

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RECEPTION CHANGES:

New reception staff discussed. Overall comments were that the new staff come across as 'unsure' over the phone. Feedback and advise would be to let the patient know when unsure and perhaps call the patient back instead.

PCN

PPG enquired about whether the PCN had responded to the request to meet up particularly in view of the issues over same day access model presented by NWL. Partners confirmed to have forwarded an email over to PCN management team but that there was no response. SD was going to draft the letter and forward on so that practice can present to the PCN again.