

Spa Surgery PPG Meeting Minutes

6th August 2025 1700 – 1830

Welcome and Introductions

A welcome was given to two newer members, and introductions given by all existing members.

PPG Members:

Practice Representatives:

Michael Drew (MD) Practice Manager

Dr Sian Greenwood (SG) GP Representative for the PPG

Apologies:

Minutes and Matters Arising:

Practice Update:

PPG Meeting Actions:

Mike ran through the points below, and the action tracker:

- See Action tracker responses (attached to e-mail)
- We have changed some message templates to make sure things are clearer (inclusion of clinician when sending out booking links for same day appointments)
- Management team being more conscious of number of SMS sent out, ie are trying to reduce the amount of bulk communication sent out in short time frames. (eg. Flu comms scheduled a bit later on due to volume of Digital support messages sent out)
- Digital Access sessions and appointments
 - Looking to expand these as they continue to be popular
 - Reflecting personally, the variety of queries people come with has been eye opening.
- Addressing Phone wait times:
 - Increased the hours in the care navigation team (by >20hrs)
 - Automated phone service (equivalent of e-consult but a non-digital pathway) – *discussed that Check and Change should be up and running at this stage. (over 3 days we have had 80 people use this service since the PPG meeting).*
- Recent examples of communication issues for discussion:
 - Example from MD, appointment booking links very unclear resulting in patient being uncertain about which appointment they had booked in for.
 - Examples from PPG.

We discussed that communication was often complex and verbose, both within Spa and the wider NHS, and that Spa would like some help improving this.

PHARMACY FIRST:

The example used to discuss this comment about the communication was Pharmacy First. With communication around this from the NHS and Spa creating confusion around what this delivers. This was further compounded by a variety of different individual experiences.

- We discussed the referral process from a Spa point of view, and why this is useful, as it means we have visibility of the patient journey and any responses from the pharmacy. It should also generate a guaranteed appointment with a pharmacist.
- Pharmacy first representatives have stated that one of the ideas behind the GP referral is that it should then encourage patients to start presenting at the pharmacy at the first instance, after a couple of GP referrals as they become aware of what the service does offer
- There have been a variety of experiences, with some individuals turning up and getting seen straight away, while others have encountered a big queue, left at the pharmacist's recommendation and then returned to an even bigger queue.
- Though all pharmacists in the local area now offer this service, it is not clear which ones do and do not, which makes the service more challenging to access
- There is uncertainty around what exactly is offered and what the outcomes could be, with mention of the lists of available treatments changing and lack of clear communication from the NHS around this.
- Mike said he would feed this back to the 'lead' for pharmacy first in the area to help increase awareness of the confusion patients face.
- Mr Green also mentioned that this is something Healthwatch were considering looking into in more depth.
- It was suggested that maybe there could be a monthly meeting between PMs and Pharmacy Managers, Mike said he would discuss this in more depth with the other PMs in the local area.
- It is worth noting separately that we found an excellent example of the disconnect in our understanding of a word, as a provider and the understanding of the patient.
 - For us, community pharmacy is a clear definition, making a clear separation between a place like Cohen's and our pharmacy staff.
 - However for patients this phrase means little and adds to the confusion.

TEXT MESSAGING:

We agreed that a good starting point would be the template SMS messages we use. Mike agreed that we should invite PPG members in to review these, with the aim to make them clearer, more accessible and with an improved tone wherever possible, and Mike will send out a separate invite for those interested, so we can allow ample time to go through them.

We do not currently allow the reply to all text messages options, as we feel this would be hard for us to keep track of, as another communications pathway, something we acknowledged we already have an overabundance of, however Mike did agree that in the instance discussed an option to reply should have been added, and this is usual practice when our clinicians send out text messages. I will make sure this is reiterated.

The use of names in messaging was seen as a positive change, but it was suggested that the inclusion of roles would be even more useful, Mike said he would have a look to see if we could set this up.

DIFFICULTY BOOKING CERTAIN APPOINTMENTS:

- The PPG raised concerns that some types of appointments were hard to book for patients, the two main ones mentioned were Smears and Phlebotomy (Blood tests), Spa acknowledged that we are aware of this, but thank you for bringing this to our attention, currently this is due to staffing:

- *SMEARS: Spa have prioritised this training within the nursing team, as currently we only have one nurse able to deliver this service. We hope there will be an increase once one of our nursing team returns from Maternity, with capacity further increasing once training has been completed and more of the team can offer this service.*
- *PHLEBOTOMY: we are expecting to add additional in- house ones from September, and had increased the volume slightly in the preceding few months, including the addition of 'urgent slots' bookable by the SPA team.*
- *We also discussed the external options for phlebotomy, YHN (Grove Park), the hospital and chain lane. It is worth noting that the waiting time for the walk-in service at the hospital has continued to increase.*

GENERAL COMMUNICATION:

- *The tone of the Zero Tolerance poster was mentioned, and Mike agreed that Spa felt this wasn't the direction we wanted communication to move in, and that the Care Navigation Team manager had been working on an improved version, with kinder wording.*
- *Increased Publicity was suggested for:*
 - *Andy's Man Club, though we have posters up, this is considered to be a really useful service and we could do more to help promote this to our patients.*
 - *Blood donation, more is always needed!*
 - *The Harrogate Male Voice Choir, which is an excellent local group.*
- *We discussed that the PPG Notice board is intended for the PPG to use as they please, and they are welcome to publicise and add whatever posters/ information about groups, that they feel is relevant to our patients. Whatever that may be.*
- *Mike also mentioned that we could include these kinds of items in the newsletter, to help give it a more 'community' feel.*

WEBSITE:

- *Mike acknowledged that we missed a really good opportunity to better communicate the change to the website, we could have used the pop up message on the old one to make people aware we were changing it.*
- *There were a few comments about areas to the website which the PPG felt we could improve on:*
 - *About Us page – very hard to find an individual, given that for the most part patients are aware of the name, but not necessarily the role, Mike said he would get this changed, probably to one page, which you can scroll up and down, which should also, hopefully, improve the search function.*
 - *E-consult header – does not make it clear that we will see people in less than the time indicated on the header, which the PPG felt might be a barrier to people accessing the service.*
 - *Ordering prescriptions page – there was a contradiction in some of the wording by Spa, saying we don't accept prescriptions over the phone, while directing people to a phone service, agreed to change the wording to 'Our Care Navigators do not accept prescription requests over the phone'*
 - *Generally the changes were well-received, thank you again for your feedback on the website at a variety of stages, as this has been the key driving force behind the majority of the changes.*

HEALTH & SAFETY:

- *A lack of handrail on the steps down from the staff car park, Mike agreed this was a risk, and he will raise this with our new Facilities Manager*
- *People using the flower beds to gain access to the path from the car park – agreed there is a hazard here, and Mike will pass on to the Facilities Manager to try and find a solution (possibly planting the bed)*
- *Parking on both sides of Myrtle street presents a hazard to road users – though this is not in the surgery's remit we would support a letter to the council.*

PPG Update:

- Newsletter: suggestions of articles and contents for this month, any volunteers for contributions?
- Review rough draft of Patient Information Pack

AOB:

- *Frustrations about pharmacy blister packs and how challenging these can be for patients to use, though this is out of our control, and we cannot say how manufacturers or the pharmacy might provide a medication, you can request that a specific supplier is provided to you, especially if it makes the medication more accessible.*
- *The challenges of communication and record sharing with other providers was mentioned, Spa agrees this can be frustrating, and we are working, alongside HDFT representatives and other practices to improve this within the local area.*

Next Meeting:

- First or Second week of November, which ever suits best.
- In the interim a separate meeting for those who are interested to discuss the text message templates we use.