Holt Area Patient Participation Group – HAPPG		
Date of Meeting	Monday 20 <sup>th</sup> January 2025	
Present	From HMP: Katie Franklin (Business Manager) <b>KF,</b> Dr Shelley Cook (Executive Partner) <b>SC,</b> Becky Burns (Operations Manager) <b>BB</b> From HAPPG: <b>Antonia</b> Hardcastle <b>, Janice</b> Kemp, <b>Alex</b> Stewart, <b>Elaine</b> Thexton	
Apologies	John Pugh-Smith, Ann Pugh-Smith	
MINUTES		
Updates following on from last Meeting	<ul> <li>HRT – change to 28-day scripts has gone smoothly.</li> <li>FAQs – John has met with BB to discuss content for new website page – will discuss at next meeting when he is present.</li> <li>Phone Upgrade and new Message – phone message and system has been updated – now has call back functionality which has been well received. The new system will provide better data that will help shape future developments and training.</li> <li>New members – KF emailed the Treehouse Café but no response yet. Current feeling is that there are enough members. However, if someone from our under-represented patient cohorts was keen to join, we would encourage their application.</li> <li>April Budget – still looming and still no further information on what it will contain or what our core funding for 25/26 will be. This makes planning for everything (staff, services, premises) incredibly difficult if not, impossible. Hopefully there will be news soon.</li> </ul>	
Meeting with other PPGs	On Friday 24 <sup>th</sup> there is a meeting at Sheringham with other local PPGs. John is hoping to attend. KF to send rest of group's apologies but a keenness to be re-invited to any similar meetings in the future, with more notice.	
Health Inequalities	BB went to the initial session on this. Sounds interesting. Further training and support will be offered to help identify ways we can enhance equality of access and services from our sites.	
NHS App	Figures now static – approx. 54% of all patients signed up and using it. Contractually we are required to be at 60% - but practically, the NHS App has SO many positives for patients we are keen to improve uptake. As this is a system wide issue – could the ICB help promote for all? Community centres, village meetings? Could Healthwatch perhaps get involved with something locally?	

	<ul> <li>Hoping to get a patient seating booth in Holt with signal/internet connectivity so we can help support patients that may be having sign up issues and to show them how to: <ul> <li>view their record;</li> <li>see their test results; and</li> <li>order their medication through the app.</li> </ul> </li> <li>Antonia offered to take leaflets to Wiveton village meeting to hand out.</li> <li>HMP to make sure leaflets at Booth, Branches and in Pharmacy to ensure ease of sign-up.</li> </ul>
Pharmabox24	2 machines were ordered before Christmas. 8 – 12 weeks in production (perhaps a bit longer due to holiday season). Expected delivery end of Feb/beginning of March.
	Discussions now to organise trades, utilities and IT infrastructure required to install and integrate them.
	Operations meetings starting to plan how exactly we will sign patients up and how to train/promote staff and patients.
	Once we have delivery dates/installation dates we will be able to plan properly for a launch date.
	PPG suggesting positive press coverage to celebrate their opening and the increased flexibility they will provide to patients. Invite local press, members of the community, Parish, Village Hall, Glaven, Legion, Counsellors.
	Could we have some Superusers who are comfortable with the machine and willing to promote its benefits (and help others locally who may value support).
	Need to plan for out of hours support and what that looks and feels like for patients.
	We will look to create some media to show how to use the machine.
Patient Health Kiosk	Usage is steadily increasing.
	New signage has arrived which should encourage patients to use it more.
	Is an excellent way of saving appointments, for the right patients (for example if a patient just needs their blood pressure – usually this would be an HCA appointment, but instead they can use the Kiosk and the HCA's appointment can be used for more specialist issues that cannot be supported by the Kiosk).
Automated Recall System	We are looking at investing into more technology to assist in the automated recall of patients with chronic diseases or who require regular monitoring due to their medications. Hopefully this will make process clearer and more streamlined for staff and patients.
PPG Patient Survey	Alex asked if we had done a PPG led survey recently?
	We agreed it was a good idea. Excellent exposure for the PPG and patient led feedback is usually more impactful than when coveted by the Practice.
	Alex will see if he can get an example of another surgery's successful survey that we could review for ideas at the next meeting and set a date.

Date of Next Meeting	Monday 17 <sup>th</sup> March @ 2.00pm @ Holt Surgery	
Ongoing	<ol> <li>FAQs – John and BB</li> <li>NHS App Promotion - everyone</li> <li>Automated Recall and Clinical Triage – KF and SC</li> </ol>	
New	<ol> <li>PPG Pt Survey – PPG next mtg</li> <li>Health Inequalities Training – BB/Amy</li> <li>Pharmaboxes – installation, integration, and launch - KF</li> </ol>	
ACTIONS		
Date of next meeting	Monday 17 <sup>th</sup> March @ 2pm – 3.30pm	
	Long way to go before we change anything, if we do – will keep PPG updated.	
	Hopefully more control over the requests will enable better management of demand and we will still be able to ensure excellent access for our patients when they need us the most.	
Clinical Triage	Could the ICB help? It is a national issue and so until central comms and press are directed from national to patients, is something HMP will need to tackle on their own, in the most effective way for HMP.	
	PPG concerned might increase access to A & E? Might it improve DNA rates and stop things being booked so far in advance?	
	This enables the clinician to determine who the most appropriate Healthcare Processional is for the pt to see or whether an appointment is needed at all at this stage. It also ensures all tests and readings required to assess the patient are taken <i>before</i> the appointment to ensure nothing is wasted.	
	This triage system would sit at the point of access (either via phone or form) and would mean requests for <u>unplanned</u> appointments would be triaged by a senior clinician before they are booked in.	
	HMP is struggling to keep up with the demand. More patients are requesting to be seen more frequently, but not always for reasons that require an appointment. There are also still patients that insist on seeing a GP only when other healthcare professionals would be more appropriate. Managing these expectations can be hard for Reception, who are not clinically trained.	
	Discussed headlines about why HMP are looking into various forms of clinical triage that may be implemented in the future.	