

## Holborn Medical Centre Patient Participation Group

Meeting of 23<sup>rd</sup> June 2016

### From the Practice

Chair: Dr Alex Moghissi – AJM - (Partner)

Minutes: Oliver Honeywill – OH - (IT Admin)

Guest: Martin Emery - ME - (Camden CCG Engagement Team)  
Sophie Harper – SH -(Camden CCG Communications Team)

### Patients attending:

Gillian Braithwaite-Exley (GBE), Ruth Steele (RS)

### Apologies:

Abjal Afrus, Philip Brisebois, Michael Pountney

## Minutes

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### 1. Introductions

AJM introduced himself and gave a brief recap of the history of the practice, its growth from less than a thousand patients to over eleven thousand today, the changes in both demographics and the delivery of healthcare in the last 30 years. The rest of the attendees then introduced themselves by name as above.

### 2. Martin Emery

ME gave an outline of the role of the Camden Clinical Commissioning Group (Camden CCG), and the Camden Patient Engagement Group (CPEG).

He outlined how both groups aim to work on the basis of being democratic, accountable and transparent. Members of both groups are appointed by election, can be deselected, and have to be periodically re-elected. The CPEG is included on committees including, but not limited to Procurement, Commissioning, Quality & Safety, with the aim to improvement – for example, patients have been included in the procurement exercise of Musculoskeletal Services (MSK), ensuring the patient experience is considered during the selection of providers. Patient representatives have to commit to attending six meetings per year (half afternoon times, half evening) plus optional open meetings.

Main providers are in attendance (University College Hospital, Royal Free Hospital, etc.), with the aim of improving patient experience and service.

3. Martin Emery takes questions from attendees

OH – how can he support development of the PPG here at Holborn?

ME – successful strategies for other practices have been to:

- Have a standardised agenda for every meeting

- Use the practices Choices webpage as a guide for discussion

- Have fixed meeting schedule, set in advance – bi-monthly

- Poll PRG members for agenda items

- Forward on CPEG newsletter to be sent to PPG

- Invite CCG team leaders to discuss new initiatives

- Use practice survey results as starting point for discussions

- Use comments from Friends & Family Test survey for discussion

- Engage with Health Advocates to increase awareness and interest in PPG

- Engage directly with local colleges, mosques

4. Dr Alex Moghissi announced changes to staffing at HMC, update regarding contract review and discuss psychological services at HMC.

**Staff** - Dr Lis Hanson mentioned as new salaried GP, who has 14 years' experience as a partner with an Islington practice. Dr Benedict Hayhoe also introduced, latterly as a GP with a specialist interest in medical ethics.

**Contract review** - Patient Participation is a requirement of our service. At other practices there are more active groups – with a virtual group in the hundreds and a core of 40-50 attendees, with a usual turnout for meeting around 15 people. Demand management is still an issue here at the practice, although the management still feel that urgent appointments are better handled each day by review i.e. telephone triaged by on-call GP, with priority given to children and the elderly. RS mentioned she felt there was an issue with the amount of time allocated to an appointment, especially if seeing a different doctor than previously seen. AJM mentioned there was a motion for GPs to allocate 15 minute appointments as standard, as opposed to only having this length of appointment for GP registrars. AJM also the forthcoming 'forced-federation' of practices, to group together to form blocks of 30-50k patients; this is still something which has not been settled here at Holborn, however, there could be accompanying benefits to such a group, i.e. the pooling of back-office staff to assist with unexpected staff shortages. Also discussed was an impending CQC inspection, relatively poor figures for Cervical Cytology for Holborn, and the reasons behind this (relatively transient population of women within the target group), and the expansion of the patient group to include Great Ormond Street Staff, and general growth in population size to help ensure practice survival.

**Psychological Services** The partners have ring-fenced funding for in-house mental health provision (for the time being) however, the waiting list continues to grow.

5. Oliver Honeywill - brief discussion about varying times of meetings – it was thought by all attending that it would be helpful to have both afternoon and evening meetings scheduled
6. Any Other Business.  
Telephone system, discussion revealed the phone system was perhaps more complex than it needed to be - OH said he would look into simplifying the options and also the cost of additional lines for the phone system, and whether there would be any actual benefit.
7. Date for next meeting.  
TBC