New Road Surgery
Patient Participation Group (PPG)
Group Meeting
25th February 2025

Tonight's meeting

1. Recap of why clinical assessment and what the data is showing us
2. New Website
3. Catchment area

71 respondents (**27%**) answered **appointments** for this question.

- In June 2024 New Road Surgery moved to partial triage model where the patient or receptionist completes a form detailing the patient need and this is then clinically assessed and appointments arranged as necessary with appropriate clinician via appropriate method – telephone, F2F, text response etc
  -

Clinical Assessment

Response type	Outcome
Direct booking of urgent appointments	Reception work from list of what is appropriate to book as urgent and these are booked only as required, not first come first served appointment booking, so appointments are still available when patients get through later in the morning
Signposting	Reception work from list of what is appropriate to signpost for other services – Pharmacy First, pharmacist, paramedic and physio appointments, speciality clinics – e.g. DM or nurse appointments, urgent care, minor injuries, A&E
Online consultations for clinical assessments	Reception have an alternative to offer to patients, instead of asking them to call back. Patients complete a form online, or reception do it for them The form is reviewed by the clinician and actioned - Same day appointment, future appointment - Further information (GP or reception may text or telephone) - Advice and guidance, self-care
Online consultations for admin	Patients can contact the practice with admin requests without having to wait in phone queues

Clinical assessment

We know that

- It's no longer a lottery - patients who get through later are offered the same service as those that get number 1 in the queue

	Avg AccuRX	Avg Mon	Avg Tues	Avg Wed	Avg Thur	Avg Fri
June	75	92	71	83	66	65
July	76	94	85	68	59	69
Aug	75	74	86	82	69	66
Sept	90	116	85	81	79	83
Oct	87	122	87	81	77	71
Nov	94	130	99	84	92	70
Dec	90	118	70	89	84	83
Jan-25	117	151	106	109	113	106

- The urgent demand has been prioritised and met
- Patients when accessing the system as it is designed are not failing to get through or failing to get an appointment when they do get through
- Patients have been signposted to other services, offered alternative types of appointments or have been clinically assessed and prioritised

Feedback

Positive feedback from staff

Reception - "I'm not afraid to pick up the phone now"

Nurses – can speak to a GP straight away (also emergency response does require pausing clinics)

Positive interactions between doctors and reception

Positive feedback from patients

Yes, it was easy to use and great to have quick access to a dr for a quick result. Great service, I hope it continues!

Yes - we have been very impressed by the response time & outcomes this time & during recent use of the online e-consult.

Yes. I was very pleased with everything - the speed with which Dr Patel called me, the fact that he had clearly read my form. The way he dealt with my issue was great.

I was beyond impressed with the service I received on Friday.

OK but...

What about the elderly

What about urgent

Negative

I needed to speak to a doctor, my usual doctor, today – we can't meet *want* but we are trying to ensure we meet *need*

NEW ROAD SURGERY **Website**

https://newroadsurgery.info

We were tasked by our local ICB to ensure the website was fit for purpose, easy to navigate and provided the correct information for patients.

We have carried out a lot of work updating the website.

The content and feel has been simplified, 95% of the changes made are to comply with the NHS GP website accessibility recommendations

Redefining New Road Surgery's catchment boundary

New Road Surgery is asking for this boundary change to protect and safeguard both current and future patient services. Attempting to manage such a large catchment area that is already covered by numerous other doctors' surgeries threatens our ability to offer the full services our patients require. This is especially true as we expect to grow the number of patients registering with us from new developments in the area.
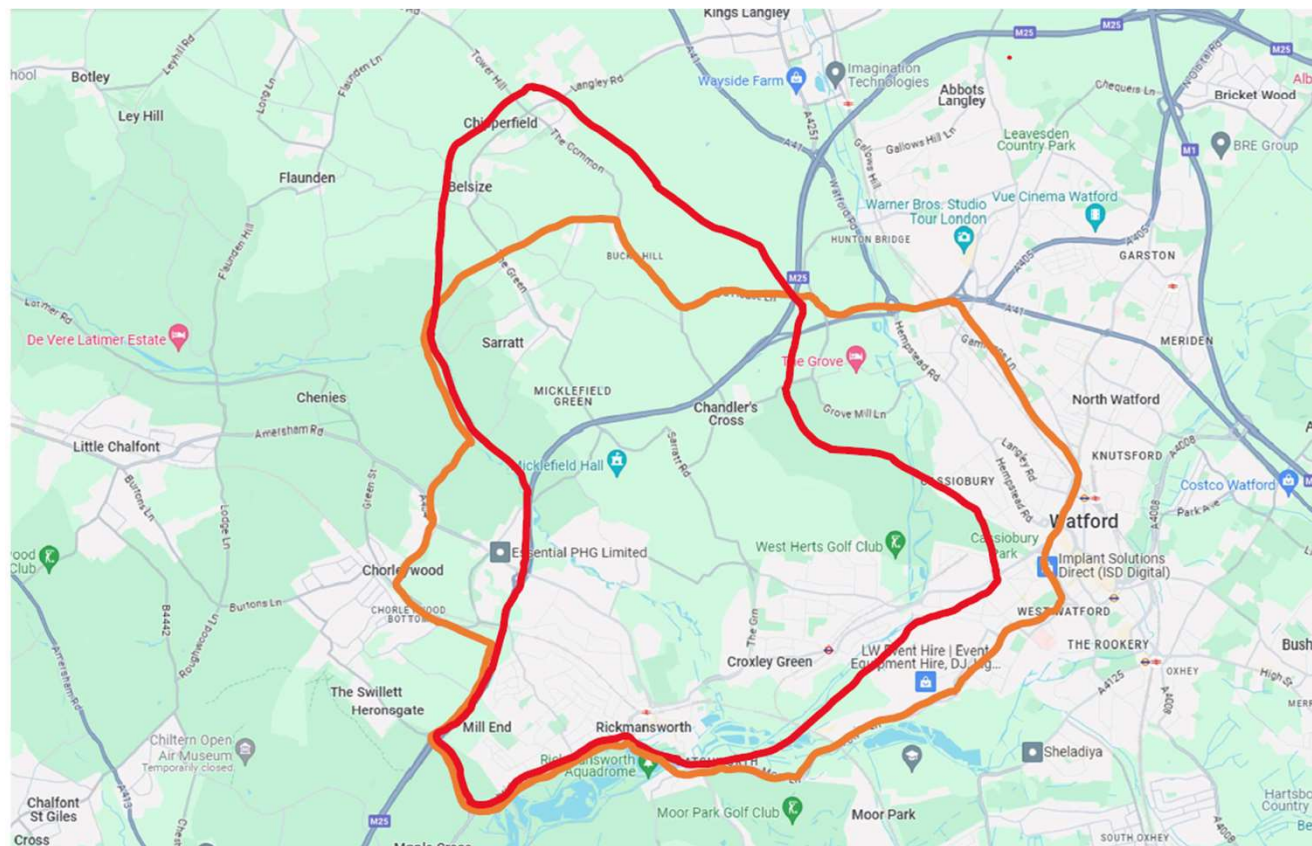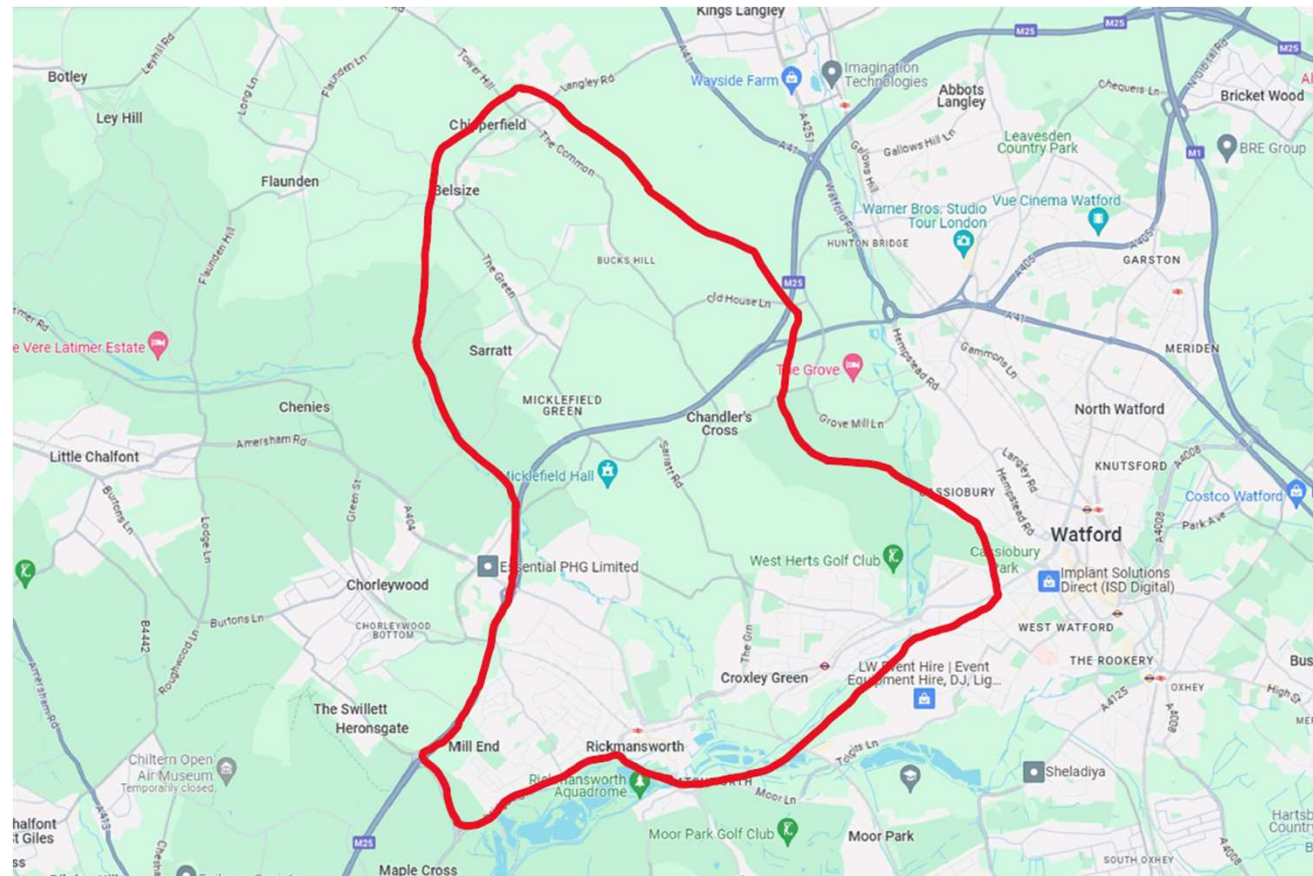
Redefining New Road Surgery's catchment boundary

What we did and progress

1. As part of PPG meetings December 2023, January 2024 and April 2024 we discussed with patients our proposals as part of the merger discussions.

2. In November 2024 A random cohort of patients were targeted about the proposed changes, the feedback was positive.

as long as I don't have to re-register Im fine
: im not surprised
: long time coming thought you would have done this ages ago.

Happy to support the change as it makes sense moving forward

: As I am an existing patient this doesn't affect me but I understand the reason for the proposed changes

: I think that the proposed changes are very reasonable in light of new developments within New Road Surgery's catchment area. It is likely not possible to increase the number of healthcare and administrative staff in the surgery, and therefore the only way to reasonably manage the increased demand is to tighten boundaries.

:I agree with the proposals, the patient volume would be too much for the Practice to sustain an efficient service.''

Redefining New Road Surgery's catchment boundary

3. Surveyed local practices who might be affected by the boundary changes

Of the seven practices approached we received responses from 5 practices all of which are happy to support the proposed boundary changes, 2 practices actively offering to be tagged as an alternative option for surgery registrations when communicating with patients.

4. Application to ICB – approved.