



Patient Participation Group Meeting Minutes

Meeting Title	PPG Meeting				
Meeting Location	Mannings Suite				
Date of Meeting	27 th March 2025	Start Time	11:00	End Time	12:00
Attendees	Tom Micklewright (TM), Alison Durrant (AD), Stephen Lyons (SL), Diana Salisbury (DS), Lorraine Taylor (LT), JN, DH & EL attended part of the meeting				
Apologies/Absent	David Mannings, Robin Gundry				
Additional Distribution	N/A				
Minutes prepared by	Amanda Hulse				

Agenda Ref:		Item Owner
1.0	<p>Respiratory Process</p> <p>JN introduced himself and explained that he would be giving a presentation on the updated respiratory process. He explained the pathway for patients with respiratory symptoms and no diagnosis including the initial assessment. He described the adult investigations for the over 18 years and diagnostic pathway and the clinical guidance for interpretation of Spirometry results.</p> <p>He then explained the Paediatric pathway for 5-17 years and that under five year olds they were referred to Paediatrics. He explained the consideration of FeNO, which supports asthma diagnosis if doubt exists, and showed the group the FeNO equipment, which could diagnose immediately if the patient had asthma.</p> <p>He then went on to explain the spirometry pathway for patients with suspected asthma or COPD, the asthma review pathway for all patients with a diagnosis of asthma and the COPD review pathway for all patients with a diagnosis of COPD. JN explained the summary and next steps, which were that a standardised approach improves patient care, timely diagnostics lead to better management and that the next steps were to implement updates, monitor adherence and staff training.</p>	

	<p>Lastly JN presented the updated respiratory investigations pathway (aligned with BTS Guidance) (British Thoracic Society) for patients presenting with Obstructive and Restrictive Lung conditions. JN said that there were three nurses in the team who could undertake respiratory conditions. The group thanked JN for his presentation and JN left the meeting.</p> <p>TM explained that there was an ADHD/ASD pathway as there had been many requests for diagnosis. He said there was lots of providers of this service and the LTS Care Coordinators were supporting patients with forms and then went on to be referred to the GP which reduced referral and GP time.</p> <p>TM stated there was a lesion pathway where patients were triaged and referred to the Community Dermatology Service unless the lesion needed to be referred under the two-week rule as urgent. If the patient was unable to send a photo of the lesion, a non-clinician could take the photo for the clinical assessment, which reduced the load on the acute team.</p>	
2.0	<p>Complaints</p> <p>TM introduced DH and EL who attended to give a complaints presentation and the summary of January and February complaints had been included with the agenda.</p> <p>EL explained that she was the HR and Complaints Manager and that complaints were received by post, email or via the LTS website and were acknowledged as soon as possible. Compliments were also received which were then passed on to staff. EL stated that she triaged the complaints and that clinical complaints were passed onto DH and she dealt with non-clinical complaints. She said that most complaints could be resolved by a phone call straight after receiving the complaint and that the majority were resolved and not taken further. The complexity of cases could include appointments, communications and prescriptions.</p> <p>DH explained that there was no time frames to reply to complaints but he would always triage clinical complaints as a matter of urgency and make a face-to-face appointment if necessary and if the matter was important it would be discussed at the significant events meeting for staff learning. AD asked if complaints could be learnt from and DH said that complaints were helpful. SL commented that there were few complaints considering the number of LTS patients there were and he said that meant that there was a good quality of staff. LT thanked LTS for dealing with complaints, some of which had nothing to do with LTS and AD said it was positive that there was a system to complain through.</p> <p>The group thanked DH and EL for their presentation and DH and EL left the meeting.</p>	
3.0	<p>The Minutes of the meeting held on 30th January 2025 were agreed.</p> <p>AD asked about the Walking Group and mentioned the U3A. TM said that the walking group were liaising with the Adur Wellbeing Walking Group in order that costs could be shared.</p> <p>TM updated the group that Dr JB had started and reception had a new team leader as the previous team leader had moved to a different role. He said that interviews were being held for part time receptionists and that a member of the HCA team had had a baby.</p>	
4.0	<p>AOB</p> <p>A question was asked whether the LTS had a newsletter and TM would speak with JE about producing a quarterly newsletter with positive news to be included.</p>	TM to speak with

	<p>TM asked the group for agenda item suggestions for the next meeting and said that he was now a trustee on the LTS Charity Group and now the community garden project could progress. LT said she sent apologies to the Charity EGM, as she was unable to attend.</p> <p>SL asked if any attachments to the agenda be sent separately as he was unable to open them when they were imbedded within the agenda and asked that the Team's link also be included should anyone in the group wish to attend the meeting by Teams.</p> <p>AD asked about practice feedback and TM explained that they held regular partner calls, had executive team meetings, team leads and managers meetings and monthly afternoon education closures.</p> <p>TM said that the performance statistics were consistent and Systmconnect use had gone up. DNA's had gone down probably as a result of triage changes and more same day appointments.</p> <p>SL said some towns had town centre hubs for blood tests and vaccinations and TM said that would not be possible for LTS due to having three sites and most patients attended their nearest site. He explained that some services were already being undertaken at pharmacies under the Pharmacy First scheme.</p>	<p>JE regarding a quarterly newsletter</p>
5.0	<p>Date of the next meeting The date of the next meeting was agreed - 5th June 2025</p>	