

Townhead Surgery Patient Participation Group Meeting

Minutes of the meeting held 22 September 2022

Present

Dr Anna Woodhams, GP (AW)

Catherine Redford, Practice manager (CR)

Andrea Hartas, Practice operations manager (AH)

Alex Merrett, Chair (AM)

Di Millen, minute taker (DM)

Pat Porter, returning member, welcomed by the Chair (PP)

Anne Chalkley, new member, welcomed by the Chair (AC)

Brenda Hawkins, new member, welcomed by the Chair (BH)

Maureen Whittaker (via Zoom)

Apologies for absence

Jonathan Kerr

Pat Taylor

Kathy Toft

Louise Davey

Alan Walker had not formally given notice to for leaving the PPG but had emailed AM to say he was stepping down from his Airedale Governor role.

1. Minutes of the last meeting, 23 June 2022

Subject to the amendment in item 8 of the initials AW to read AM, the minutes were agreed.

2. Matters arising from the minutes

- a) Patients' complaint procedure: there is a Feedback section on the website but there is no note of the timescales or escalation process. To be added. **Action AH/CR**
- b) PPG sign up information needs to include the wording 'please hold down the Control button when clicking on the membership form to open a new tab'. **Action AH**

- c) Feedback from PPG awareness week: hearing loops were now working and promoted in reception; a newsletter was in production; PPG and staff photo boards were up in reception too and further photos were a work in progress.
- d) Safe and well visits: MW had linked firefighters (Community Safety Officers) to wider support services, as agreed.

- e) Social prescribing presentation: had taken place on 21 September and found to be interesting and informative. JK has arranged a meeting with Amanda Nowell and Louise Try at The Place to discuss how the request by Amanda for support from the PPG with recruiting Community Connector Volunteers might be taken forward.

3. PPG membership application process

The previously circulated paper setting out the process for assessing PPG membership applications was proposed by AM, seconded by DM, and agreed by the Group.

4. Communications strategy

The previously circulated paper setting out a joint Practice/PPG communications strategy was proposed by AM and seconded by DM and agreed by the Group.

5. Workplan

AM outlined the 5 objectives in a draft workplan which were to:

- 1) improve communications and ensure patient feedback informs Practice development
- 2) ensure the PPG effectively represents patients' views
- 3) support the Practice to identify any perceived deficiencies in current services
- 4) promote joint working between the Practice and other local organisation that support health and well-being
- 5) provide support to the Practice to improve services

Objective 1

It was agreed that two actions should be added to objective 1: to establish a communications working group; and to establish an approach to using social media communications.

CR had started to draft a newsletter. It was likely to be 2 sides of A4 and would be available online and in hard copy. Distribution would be important (existing news and community publications could be used); and frequency yet to be agreed.

DM noted that the website included an option to sign up for Practice news, but it was not clear how the news was derived and posted out. **Action AH** to explore.

DM volunteered to lead on setting up a communications working group, with AH, PP and AC. Online meeting to be set up to start working on objective 1. **Action DM**

A PPG notice board had been set up with photos of all members, leaflets and PPG minutes made available on paper in the magazine rack and online. New members needed to provide a photo and short bio to AM to be added to the board. **Action BH**

Photos of all practice staff had also been posted in reception.

The Group thanked AH for sorting the notice board.

There was general agreement that the Practice website was not user friendly from either a patient or staff perspective and that it needed to be updated and improved. Key pieces of information were not easy to find, and staff found it difficult to keep up to date. The Fisher Medical Centre was mentioned as having a website that was easy to use as a patient. A revision of the website was something the Communications working group could help the Practice with. CR agreed to look at what was possible in terms of adding news and 'hot topics' on the front page including dates when the surgery is closed for protected learning time. **Action CR/?AH**

Objective 3

AM was considering how best to use the whiteboard area of the PPG notice board in an interactive way to get patients to feedback on their experience of Practice services. One idea was to ask a single question such as 'What's the one thing the Practice could do to enhance your experience of services provided?' Responses on post-it notes to put in the Comments Box. This question also to be used in Outreach Groups. **Action PP to start with Hub Group. AM to write on notice board.**

Objective 5

It was agreed that the Practice partners would need to consider the suggested action 'to support the Practice in recruiting new staff by contributing directly to recruitment processes'. **Action AW**

6. Surgery update

- **Accessibility standard:** some progress had been made, e.g. with the hearing loops, information for new patients, and record pop-ups. Large print documents had not been considered but would be. **Action AH**
- **Staffing:** two new receptionists had been appointed and a new practice nurse was being looked at. Dr Ng was leaving the practice, another GP was going on maternity leave, and a locum was also leaving. Attempts to recruit GPs had been on-going for 6 months and would continue. There was a national problem recruiting GPs and the rurality of Townhead was not attractive to some GPs living in cities like Leeds and Bradford.

The effect GP shortages to Townhead was a significant reduction in appointment capacity at a time when more face-to-face appointments had started to be made available through reception. The Practice would have to keep the situation under review, make sure face to face appointments were used appropriately and make best use of other professionals like physiotherapists and nurses.

The possibility of being able to book a telephone or video appointment online was suggested. **Action AW** to explore.

- **Flu and Covid vaccinations:** Flu Clinics had started and were available to book online. Covid starts 8th October. Both vaccines will be given together to those patients who agree, as long as supplies of vaccines enable this to happen. Delays in Over 65 Flu vaccine deliveries.
- **New phone system:** Management data would be sent to AM for sharing with the Group as it had not been provided at the meeting as an agenda item. **Action AH.** It was confirmed that calls were charged at local rates.
- **Patient feedback/Friends and Family Test (FFT):** issues raised around the table were:
 - Too much reliance on digital
 - Hard copy newsletters needed
 - Some patients didn't like being asked by their GP 'What would you like the outcome to be' (AW explained this was not a new initiative but used to help patients talk about what they need or want and to support joint decision making)
 - Not easy to find information about flu and Covid vaccinations on the website/Face Book group (AH explained that information was available in the reception area and a banner was outside the premises)

AH reported positive feedback from many patients which was much appreciated and shared with staff.

AM requested FFT findings be presented to PPG.

6. Transport update

Following the Timely Access survey, further meetings had taken place to look at patient transport as an issue. It had been reported externally that Townhead were enthusiastic about the development of more health services locally, however, there had been no further discussion since the Transport & Health Discovery Event. Townhead already provided blood tests in house so there was no need for patients to travel to Skipton or Airedale; and did more home visits than many practices. No specific transport related actions had been taken as a result of the survey.

8. Introduction to child health data analysis

A paper summarising a range of local child health indicators to inform possible areas of future work for the Group had been produced by MW and circulated. Two areas of concern were highlighted: fuel poverty and relatively low rates of breast feeding.

AM reported his involvement in Craven-wide work to address fuel poverty issues including in the Settle area. Energy ambassadors were being trained, one of whom was PP.

Information would be shared with GPs to raise awareness of the support available. **Action AM**

A discussion took place about the issue of low rates of breast feeding. As no-one had contacts in health visiting or ante-natal services, and there was no GP lead for children/young people's health, it was agreed that AM would talk to MW about how to make progress on this issue. **Action AM**

9. Any other business

AM reported that the Timely Access report would be available soon and will be publicly available. This would be shared with the Group and posted on the PPG notice board. **Action AM**

10. Date of next meeting

The next meeting will take place on 23 November 2022.