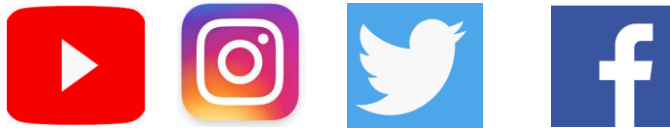


# Modality Group

## *A Commitment to Care*

### *Patient Voice*



**April 2021**



**Wednesday 28th April  
6.30-8pm and Thursday  
29th 1.30pm - 3pm**

Chat and ask questions directly via the chat function.

You can submit questions in advance to local GPs who will be available on the day.

**PATIENT VOICE  
ONLINE,  
JOIN IN THE  
CONVERSATION!**

A range of guests from the different areas that make our Modality division.

We have arranged two Zoom sessions, so please choose the one that suits you best. Spaces will be limited so we do ask patients to only request to attend one.

**To register your interest please e-mail your name, D.O.B and GP Practice to:  
[rose.hadlow@bradford.nhs.uk](mailto:rose.hadlow@bradford.nhs.uk)**

We do hope you can join us!

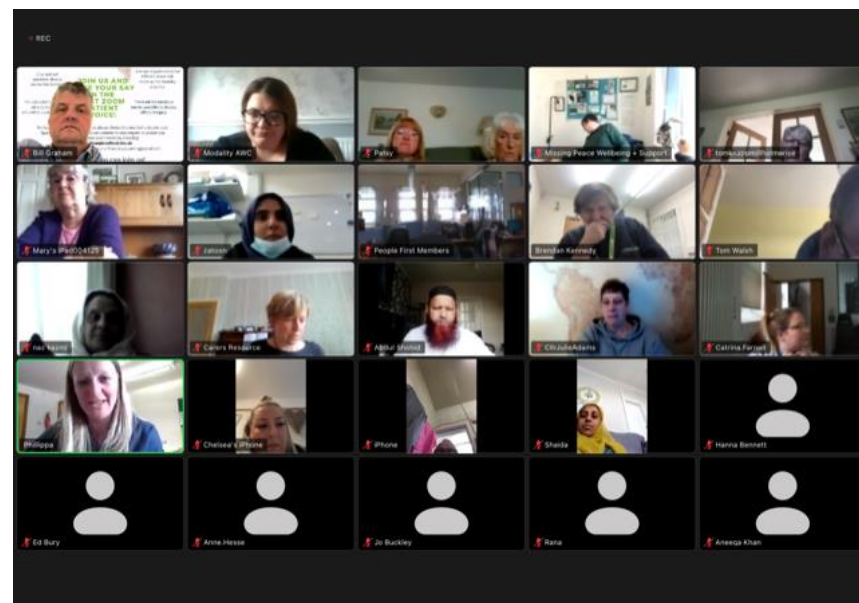
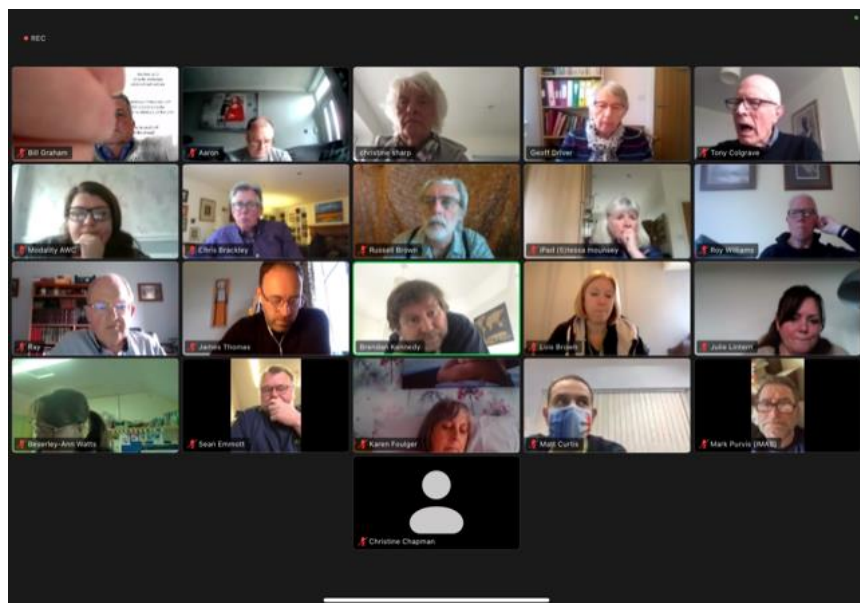


We ran two events at different times to allow for a good representation from patient population. (41 in total)

The evening event was predominately a more mature audience ( 13 attendees )

The afternoon event was a younger more diverse audience. (28 attendees )

We had patient representation from Kilmeny PPG, Fisher Practice health champions, From Learning disabilities patients, From Pakistani and Bangladeshi community groups, From Asian ladies mental health, From Caring groups such as DFK, Community groups, From Local politicians/ Councillors , people seeking election, Patients who have made a complaint in recent months, & other active patients.



- Mental Health and community level support
- Vaccination centre volunteers
- Vaccinations for more minority ethnic communities
- Access to digital health services
- Access for vulnerable patients to GP services - what can we do about this

We also had some presentations from our patients and volunteers involved in the vaccination program – Thanks to Chris Graham (Long Lee) Naz Kazmi (KAWACC) Mohammed Ramzan Hassan (Safeguarding the Community/ Emily Street Mosque) and Mark Purvis (Haworth patient and IMAs volunteer) who all spoke warmly and honestly about the impact of the vaccination program on their communities – Thank you so much

Why does it take so long to answer the phone ?

I wonder if there could be some clarification on each patient having an allocated GP?

This caused a problem regarding a form from DLVA to Farfield Practice naming the GP on the top of the prescription. The form was returned to DVLA stating “as this patient had not seen the named GP for 2 years no information could be given on the condition as requested.” The fact is, he had been seen by other GPs over that two year period. As you will be aware when requesting an appointment we accept the GP that we are offered. **This created a long delay and rather a lot of upset for the Patient.**

It can be difficult to use E consult – is there anyway to teach people how to use it?

And how soon after completing should I wait for a response ?

Do you have enough staff?

Why can't I get seen at Holycroft Surgery ?

When will we start seeing GPs face to face more often ?

When will Oakworth surgery re-open?

Should I go to A&E if I can't get through to my doctors ?

You said at the last patient voice you were getting in new phone systems has this happened yet?

Have e-consult hours changed? What are the reasons behind this?

Are volunteers still needed? Where can I sign up to volunteer?

Are any pop up clinics In the **Knowlepark ?** area particularly connected to the Bangladeshi community in this area?

Our last patient voice events there was a request for longer more open discussion time between patients and staff – so we made the majority of breakout rooms for open discussion with GP practice staff and teams  
On the Thursday we did run a LD and health Q&A which had been requested by LD patients groups.



## Patient communication and engagement

- A national campaign to encourage patients to keep in touch
- Discussion around taking health into communities and engagement. Because of covid this is the way GP services should move forward – is there a way of doing this?
- It started with “are you closing oakworth” and finished with an open conversation that we have demonstrated the importance of our patients being a key part of our plans.
- “everyone in long Lee hated modality but now this is our community’s practice that we are part of and proud of”
- Steeton as a red hub discussion or back to normal

## Community Support

- Moving to one practice- how do involve all communities
- How are we prepared for the mental health crisis and are we looking at intervention approaches before it gets to point of severe mental health?
- Elderly and vulnerable grown a fear about going out and around people - what support could be available or if some groups could be looked into if this doesn’t exist

## E consult/Digital Health

- Quite good when it works – but patients can make up a symptom – but doesn't work for everyone
- Overly safe approach and 999 direction if required.
- Shouldn't be using blood tests / having to call up about tests How do we keep contact details up to date (every contact **counts**)
- Not given an appointment time; the patient implies that the appointment can occur at any time during the day
- Is Push Doctor still going – yes
- “Telephone consultations have been fantastic for me and my family. I prefer them to coming to surgery”

## Vaccinations and Volunteers

- Legacy of Covid - how do we keep the volunteers involved - what can we get them to do - groups, befriending, community action
- The young volunteers- keep them involved and offer career opportunities
- A growing role for community development in targeting info at areas with low vaccine uptake (Roy)

## Groups and Volunteers

- The volunteers are needed and we need them in the right place
- When can we start groups again practice – and we don't know – and general practice might get blamed for not being as open as the rest of the country but we will be following guidelines
- Maybe have volunteers to start doing some befriending in GP surgeries
- Volunteering
- Health coaches and the need for these
- Learning to manage the demands and changes and educating

## Carers

- It would be great if carers could get a health check every year – as they are often the ones who don't present until a problem is really bad
- Modality have worked very well with carers resource. – very good at getting carers vaccinated – keep spreading the word about how important carers can be



## Community Engagement and Communication

- Important how we get people and patients into the right place even if we are busy in practice.
- We hope to do more outreach clinics if we can – to target patients who might otherwise DNA esp. patients with mental health or other barriers
- Its also about the social interaction of our communitie. Can you utilise the social prescribers more? more linked into community offers and groups
- GP surgeries really need to use community centres more to signpost people to appropriate avenues
- Keep working together and keep reaching out to people

## Vaccinations

- issues around hesitancy –Naz mentioning the worry of people coming back from abroad, and and issue around Menstruation and the vaccine.
- Public health might want to run flu vaccination clinics?
- Good booking systems

### Questions

#### How do we educate patients in dealing with staff?

- My daughters practice (Southampton) has suffered from resignations as a result of behaviour from the public. She herself was reduced to tears by a patient the other week.
- I think a lot if not most people still expect/want to get through on the phone. There was talk of the new phone system but I wasn't much the wiser by the end of the session.
- For me access is through E consult or push doctors. I know that communication with the older generation above me is challenging.

#### Participant comments

- National campaign to educate the public on how to use your services I suspect politicians may be reluctant to back such a campaign as it reveals the shortcomings of the NHS. However I think the need to protect your services should outweigh any political considerations.
- I'm not someone who goes on social media. Where would someone like me find out about developments and changes? I do look at websites but must confess I haven't looked at yours.
- I think word of mouth such as via your local pharmacy is important. I was asked by your local pharmacist about the reopening of Steeton. That would be a great place to give info about new phone systems etc
- I did raise the possibility of your practice having some presence on the Parish Council s website?

***“I think there does need to be a national campaign to educate the public as to how they should use your services.”***

***“I think this is all linked to problems of access to the surgeries and the increase of mental health issues”***

# Key Topics and Questions Raised (2)

## Mental health and support for patients and carers.

### Patient feedback

- Patient need for mental health support and connectedness is concern for patients.
- Feedback surrounding the effectiveness of providing a communication channel for those suffering from mental health issues has helped to reduce the need for GP level support
- Questions around volunteering in the community to connect with people who want to talk about their MH/anxieties/worries.

### Mental Health

- Missing Peace Wellbeing and Support - Huge increase in people wanting mental health support
- Services have been useful for getting those suffering with MH issues talking about it – a step before contacting the GP – this has been very effective.
- Carers Resource – helping those reluctant to re-engage in society

### Vulnerable Groups:

- People First – support for those with learning disabilities through low mood/anxieties and referring them for first response
- Highfield Centre – connecting more vulnerable people to simply get chatting over zoon has been enjoyable for those involved (most computer and/or English illiterate)

**“We have a huge increase in people wanting support with their mental health ” –**  
*Missing Peace Wellbeing and Support*

**“People have found chatting about their worries has meant a build up of mental distress has not reached GP-needing level”**

## Mental Health communication support

### What needs to change?

- Discussion around the mental health pressures on GP surgeries and the increasing need for community level support rather than GP level.
- Patients wanted feedback about if there could be a need for volunteers to help with community-based offers

### What can we change?

- Support for mental health issues to talk about worries/anxieties
- Social prescribers and coaching
- Groups to help reconnect people in society after the pandemic

## Vaccination Programme

### What needs to change?

- Discussion around the vaccine uptake especially in minority ethnic communities
- Feedback around the connection to Bangladeshi community in Keighley
- Concern over lack of uptake or targeting for this group

### What can we change?

- Pop-up clinics in Keighley Mosque saw change from 150 people at first one to 600 people at second one.
- “Is there any pop up clinic for the Knowle park area Bangladeshi Community?”
- **This has already changed** – feedback lead to a contact and a pop up clinic already set up

## What Will Change / What Can Change (2)

### More access to community health offers

#### What needs to change?

- Access to more information in the community

#### What can we change?

- Smaller groups to be looked at in the future – e.g., Community groups and their specialisms to discuss issues connected to communication with doctors' surgeries. – use of breakout rooms is planned
- **Phone Systems – Improvements – Hopefully Summer 2021**
- Modality is investing in improved phones systems across AWC
- Work to do to promote the functionality – e.g patients can request call backs, more information on where you are in phone Q, estimated waiting time
- **More pop up clinics (Bangladeshi community asked – one is now organized 27<sup>th</sup> May. .**



Thanks to everyone who took part

