

Modality Group

A Commitment to Care

Patient Voice



November 2020

- Aim – to run effective patient involvement and Co Production at a PCN level
- On the 5th and 11th November, we had approx. 80 people involved co producing our proposed clinical redesign, over 50 of whom were patients
- We do have a focus on recruiting representation from key patient groups – disabled, BAME, young, old to reflect our patient populations
- The events were promoted on social media and directly to active patients and PPG's 4 weeks in advance
- Patients could submit questions / queries in advance
- Sessions held on Zoom platform



Zoom
Patient Voice

Got a burning question to ask the Modality team?

You can e-mail your questions in advance to bill.graham2@nhs.net. You are welcome to do this even if you can't attend the **Zoom Patient Voice** meetings on either **Thursday 5th November 1pm -2.30pm** or **Wednesday 11th November 6pm -7.30pm**

Some topics we will be discussing are:

- eConsult
- Silsden Steeton red hub
- Access to GP appointments
- Using health services appropriately
- Experiences during the Covid pandemic

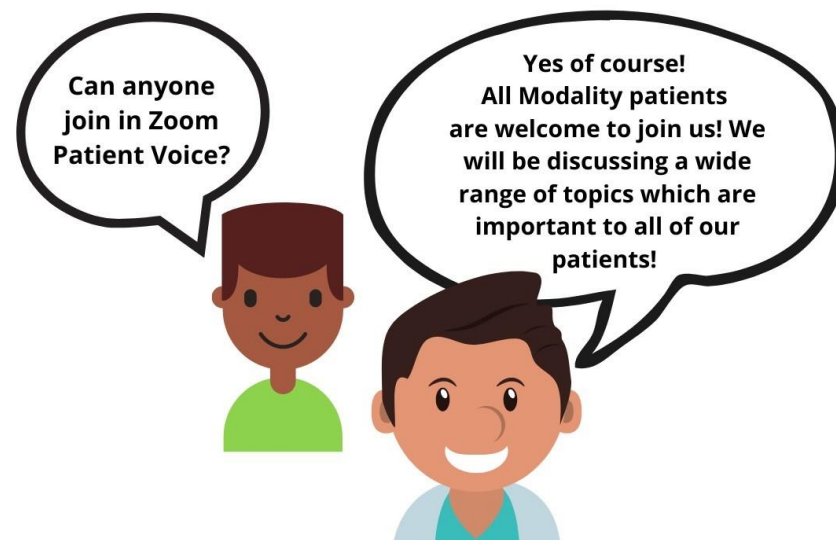


Patient Voice events are for patients and staff of Modality Practices, invited guests and stakeholders in local health systems. The events are hosted via the Zoom digital platform and we hope everyone can abide by zoom etiquette. Numbers may be limited according to demand, but other events are planned.



Seven Practical Steps to make Co-Production Happen in Reality

1. Establish leadership commitment to co-production.
2. Recruit and select diverse groups of citizens to support co-production activities, including perspectives which represent families and communities as well as the lived experience of individuals who use services.
3. Create systems to allow reward and recognition of the citizen contribution.
4. Develop a co-production strategy in discussion with citizens, explaining what coproduction means to the organization.
5. Work with citizens to strategically identify areas of work where co-production can have a genuine impact and get people involved at the earliest stages of development.
6. Provide training and development of staff and citizens to create an environment where co-production can thrive.
7. Regularly review and report back on progress – modelling co-production by moving from the “You said, we did” approach to a “We said, we did” approach.



There are 2 meetings available. Thursday 5th November **1pm -2.30pm** and
Wednesday 11th November **6pm -7.30pm**

You can register your interest by e-mailing;

rose.hadlow@bradford.nhs.uk

Please include: D.O.B, Full Name and Practice you are registered with.



Framework for patient and public participation in primary care NHSE 2016

Agenda

Timing – for 6pm start	Description	Host
12.50 – 13.00	Assemble – you may be in a zoom waiting room – we will invite you into the meeting before 1pm	
1300 – 1305	Welcome	Dr Brendan Kennedy
1305 – 1330	Presentation and Q & A Participants can ask questions/ make comments and suggestions via the chat function	Dr Matt Curtis & Dr Brendan Kennedy
1330 – 1400	Breakout rooms - Airedale Cluster, Craven Cluster, Silsden/ Steeton Red Hub, Econsult You can request a breakout room in the chat function	Host for each Breakout room will be confirmed on day
1400- 1425	Patient Question time - Open Session Q & A You can send questions in advance – we will ask for contributions from the participants	Panel of local GPs and primary care teams
1425 - 1430	Wrap up : How can we take patient suggestions forward Next meeting dates	Dr Matt Curtis

- We had a presentation followed by an open Q& A session.
- We had breakout rooms to allow for more in-depth relevant discussions
- One of the breakout rooms was hosted by Econsult – this proved the most popular breakout room for patients
- Invitations were sent to the local CCG, CQC, HealthWatch and neighbouring PCNs & patients

Topics

- Patient access to medical records (from a patient with a number of health issues where this would be helpful)
- Access to secondary care services at the time of COVID (from a patient who is a Hospital patient rep)
- Digital access for patients and digital poverty - how can we help enable access esp. for people who don't have access or have language barriers (from a patient from the BAME community)
- Easy read guides for patients with learning disabilities for Flu Jabs and for Digital access (from a patient with LD)
- Making the modality website easier to access for patients who may have a disability or a learning disability (from a patient rep who advocates on behalf of those conditions and works with disability learning England.)
- Long Lee / oakworth / Silsden Steeton/ Gargrave

***“Getting on the front foot’
Much more emphasis on
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help to transform the
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primary care in their locality.”***

***“the new system seems a much
more efficient use of everyone's
time”***

Questions

- What has been going on behind the scenes during Covid?
- Where Kilmeny are trying to get to once Covid is defeated?/ Modality AWC
- Issues faced by patients of other surgeries and solutions if there are any, e.g. Oakworth?
- Changes in organisation concerning how the different surgeries are working together
- The part played by Econsult in dealing with the pandemic and how this can be developed in the future?
- The initiatives which have stalled during the pandemic, will they come back? The same? Stronger? In a more flexible future?

“I was glad to attend the Patient Voice meeting this morning. I think you were right in your conclusion in saying the breakout rooms were more effective than the main meeting. Perhaps next time the meeting could consist more of the smaller groups with people able to change to a different group after, say, 30 minutes?”

“The other problem was the audio technology. I didn’t really catch most of the explanation about the phone system so had to ask this question in my breakout room.”

“The live chat function is fine up to a point but I personally cannot type, read messages and listen all at the same time! I have no idea whether my chat questions were answered or not. They were mostly about the website and e consult in my capacity as a patient!”

You may have seen a GP, Practise Nurse or another health care professional that doesn't usually work at the modality practice you are registered with. We have been working together across all of our practises to maintain safe staffing levels sending Drs & nurses to different practice sites depending on the needs of our patients each day

Patient feedback

- Seeing doctors at different sites
Visiting different sites (any comments) – No specific objections to this – although concerns about continuity of care
- Each practice uses computer system called SystemOne that holds medical records will become a system linking up individual practices
- A section of community do not have technology or English language to get into the system. It could be that the vulnerable category patients have been missed in the last few months

“I have used e-consult it's been vital service for me personally, during this difficult time”

“Telephone consultations could be a barrier to any patient in abusive or controlling relationships; it could prevent them from getting any help they need or to discuss any issues as they may not be alone”

The last meeting was very productive I thought so hopefully good tomorrow evening too. Are you using the same breakout groups ? If so it might be a good idea to have a GP in the e-consult “room” as people wanted to hear how the system was used “in house” PE

I can see that patients are hungry for information from actual clinicians about what they are doing, what constraints have to be overcome and their view about future developments, short term, issue specific as well as strategic. This mirrors the interest in TV and Radio doctors etc.

There was massive interest in Econsult, and in my breakout group a deal of discussion about the ‘clunkiness’ of their system, the repetition of data required when revisiting their site and the inability of 16+ teenagers to use the process.

In all this was a good exercise in ‘getting on the front foot’. Much more emphasis on methods of achieving this could help to transform the appreciation by patients of primary care in their locality.



"Congrats and thanks to all the modality team for the changes to date!"

THURSDAY 23RD
JULY 2020
1-2.30PM

"I have used econsult and it's been great - fast and easy and a really effective solution"

**HAVE YOUR SAY
AND JOIN IN THE
ZOOM
PATIENT
VOICE!**

"I used Push Doctor and found it very efficient and smooth. After a video consultation medication was prescribed and script transmitted to my local pharmacy for me to collect."

"And the new system seems a much more efficient use of everyone's time - obviously, there are hurdles to overcome to maintain adequate support of people not tech savvy or have access to tech"

Register your interest by e-mailing:
rose.hadlow@bradford.nhs.uk with
D.O.B, Full Name and Practice you are registered with.

We do hope you can join us!

“patients are hungry for information from actual clinicians”

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- The other problem was the audio technology. I didn't really catch most of the explanation about the phone system so had to ask this question in my breakout room.
- The live chat function is fine up to a point but I personally cannot type, read messages and listen all at the same time! I have no idea whether my chat questions were answered or not. They were mostly about the website and e consult in my capacity as a patient!

“It was a very positive experience for me. I have only a fairly minor suggestion which would be to allow people to register for the breakout room they want earlier in the process.”

“breakout rooms were more effective than the main meeting.”

- Great to have so many new faces.
- Great to hear a wide range of views.
- It was reassuring that the areas patients want us to improve are the same as the ones we want to improve

- Patient voice
- Informative for patients attending.
- Well chaired
- Relaxed

- Not such a diverse group as the first meeting (as far as I understand). Despite much effort little representation from diverse patients in Haworth. Probably busy putting the kids to bed etc
- People attending with specific questions almost like between a query and a complaint about the service. ? more appropriate to discuss these in a different forum and simply signpost in open meeting.

“It was reassuring that the view of patients are similar despite being in different geographical locations”

“Probably main take home for people was how to access IT support from Worth Connecting.”

I thought the Patient Voice was great – the patients and reps were really helpful and constructive in their comments and asked really useful questions. There wasn't much discussion about the changes at Silsden as I think most the participants were well informed. I think there was some discussion about flu, so we have to try to maintain the communication on this issue each year.

All in all, a very positive experience.

Cheers

Dr Matt Home GP Partner Silsden practice

Econsult Break out room

- There was massive interest in Econsult, and in my breakout group a deal of discussion about the 'clunkiness' of their system, the repetition of data required when revisiting their site and the inability of 16+ teenagers to use the process. (Patient EB)

PCN Breakout rooms

Craven

Airedale 1

Airedale 2

Improving Access to Digital health -

- Social media pages useful to inform users of relevant updates
- Use of Zoom has been easier than expected to use – helps that technology use is being encouraged by most service providers
- People First Keighley offered to help with any easy read information/leaflets

Support for digital health

- Dementia Friendly Keighley is operating a telephone helpline – advertise to those needing information to access this or website.
- **Worth Valley Connecting – offering support to patients – (see flyer)**
- **Training points for staff – better training**
- **Digital health initiative in Keighley – with local digital hubs planned (2021)**

Are you over 55 and need some help with your digital device?

We can help!



We can talk you through and support you with any or all of the following :

- Booking GP appointments
- Requesting repeat prescriptions
- Arranging flu vaccination
- Electronic consultations (econsult)
- NHS websites
- NHS approved apps
- Local health apps
- Reminders and alerts

We can offer individual telephone support and will be setting up small, safe groups in a number of locations in Bradford, Harrogate, Keighley and Skipton as soon as we are able.

This service is confidential and free.

Please call 01274 449660 or email info@worthconnecting.org

Or find us at: www.facebook.com/worthconnecting



What Will Change / What Can Change (2)

- **More access to community health offers**
- Access to more information in the community
- 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**
- Modality is investing in improved phones systems across AWC
- Work to do to promote the functionality – eg patients can request call backs, more information on where you are in phone Q, estimated waiting time.



Looking at improving the new national websites as a result of patient feedback and how we improve the way in which we can make it easier for patients to book flu vaccinations... or any vaccinations going forward! And ***Keighley People First*** and ***Exclusively Inclusive*** can help us with design ideas to make the websites more accessible for all those patients with specific conditions

Thanks to everyone who took part

