Manor Park Surgery Patient Participation Group

14th July 2022 – 12 Midday

Attendees:

Joanna Ford (Site Co-Ordinator Manager)

Lynne Gathercole (Patient Representative)

Michaela Stevenson (Patient Representative)

Kevin Ritchie (Patient Representative)

Matt Barton (GP Partner)

1. Welcome and introductions (JF)

Joanna welcomed everyone to the meeting, MB having technical issues, JF started meeting.

2. Review last meetings minutes – couple of updates since meeting, included on minutes but not discussed: (JF)

- Following the meeting Matt received confirmation that Henry has restarted for obese children and their families.
- Since the meeting government has rationed HRT to 3 months due to supply chain issues with covid/Brexit.

3. Practice Updates (since April 22) (JF)

- <u>Clinician updates:</u>
 - New starters: Dr Ogelsby, Kim Bowman (Nurse)
 - <u>Leavers:</u> Dr Beeby, Sarah Lumsden (Nurse)
 - Return: Victoria (HCA)
- Admin updates:
 - 2 leavers and 2 new recruits.
 - Still recruiting for call handler and front desk admin positions live job advertisements on NHS jobs and indeed.
 - Joanna will be leaving on 31st August

Recruitment

- We continue to recruit admin staff, and we are facing staff
 shortages/recruitment challenges in the same way that other organisations
 are. We believe this is due to an overall reduction in our national workforce.
 The available workforce is reducing, due to a few factors: early retirement,
 reduction of hours, pregnancy, career change, outlook on life postpandemic.
- We are recruiting reception staff we need to meet our patient demand, but this is taking time due to us ensuring that we recruit the right candidates and the thorough training processes involved.
- Our current resource levels are driving an increase in complaints and longer wait times on our phones. It is difficult for our team to answer the incoming calls more quickly when we have absences.
- Example: Last week, week commencing 4th July 2022, we had 2 staff on AL and 2 staff ill in the booking service. Additionally, we had clinician sickness and the team also needed to contact patients and rearrange clinics, which adds additional impact to our service levels.

What are we doing to help with recruitment?

- Increased hourly rate of our reception teams.
- Advertising vacancies on Facebook.
- Attended apprentice fairs in the hope to attract more apprentices.
- Reviewing current ways of working. Usual hours are 7.15am-7pm, considering looking at offering more flexible working hours.

Kevin suggested attending the annual recruitment fairs (generally early in the year (feb) for Leeds). Also suggested council job shops, including the Armley/Bramley drop in. JF to look into this & produce advertisements to be shared.

Masks

- Individual choice, not required to wear in surgery, unless symptomatic and been seen in insolation room/symptomatic mask must be worn.

4. West Leeds Primary Care Network (WLPCN) Updates (JF)

Representatives from the PCN Nick (Social prescriber)

Services are continuing to be developed with new clinics being added, at a variety of locations.

Current clinics available, which are based at Manor Park include: Physiofirst (Tuesdays), Health care assistant (Wednesdays), mental health nurse (Fridays).

Other clinics held at other sites: physio, mental health nurse, care support workers, occupational health, community wellbeing team, frailty, dietician,

cancer care coordinator, domestic violence, smear clinics, pharmacy, paramedic home visits.

The PCN PPG have held 1 successful meeting, we are all invited to join their next PPG meeting – Date and time TBC. I will share this as soon as communications are received.

5. Ground Rules, Terms of Reference, Purpose & Agenda (10min) JF

Review and check all ok with ground rules/terms of reference.

Notes: to drop explanation marks, reword point "It's not a grumbling shop" to "constructive criticism, not complaints". Quorum change to 5, but if any major decisions being made this has to be 5 members, not including practice staff.

Discuss plan for future meetings – frequency? Online/in person?
 Evening/lunch? Day of the week?

MS mentioned that we may get more attending the later sessions, it was discussed that this is not necessarily the case. Lunch time meetings discussed as members may be working and unable to attend. Consensus was to continue virtual meetings as more convenient for members to attend. KR voiced that he has noticed that due to COVID people have got out of the habit of attending meetings. Potential dates to be shared with members by email to determine next meeting date/time.

LG voiced that we should look at recruiting new members. This is something we are aware of and will be producing an action plan to work on this. JF explained that there is new information up in the practice, LG rightly stated a lot of patients are not attending the practice as having telephone appts.

6. As a group what do you want from the PPG meetings? (JF)

- Any projects the PPG want to work on? (Examples: Notice boards/patient info for sm. Organising volunteers for the vaccination clinics.)
- Brainstorm/voice ideas

LG stated she would like to be more involved.

Discussed we could look at having one of the members in the waiting area spreading the word of the PPG, practice noticeboards. KR suggested more of the 'you said, we did' work.

MS voiced that waiting rooms are empty

7. Complaints Analysis 2021-2022 & Compliments (JF)

 Share presentation/graphics created by Karen – also going to be displayed in the practice.

Not covered in meeting will circulate with meeting minutes.

8. AOB

The emails sent confused the group, as a cancellation was sent to all. JF apologised for this, as believed followed up with an email, all participants felt the same. Something to keep in mind before sending the meeting invite/details to the wider group to avoid confusion. The email reminder in the morning was useful as this is what was used to join.