Westlands Patient Group Meeting Minutes

Date of Meeting	Wednesday, November 4th 2020
Start Time	1600 hours
End Time	1840 hours
Venue	Zoom call hosted by Westlands
Attendees	S.Martin (SM, Chair) G.Smith (GS, Minutes) A.Waudby (AW),
	R. Bloomfield (RB) E.Howkins (EH), G.Stewart-Bye (GS-B), L.Oakey
	(LO), Dr.E.Nash (EN), J.Dalby (JD), D.Moore (DM)
Apologies	EmmaClaire Isherwood, Amanda Craig

Item for discussion		Notes	Action
Welcome, apologies	SM	As above	
Matters arising from previous minutes	SM	Correction of minutes. It should read 'zero hours contract for member of <i>reception team'</i> , rather than a GP.	
		Although the circulated minutes were accurate with respect to the agenda item 'Update on POD appointment system', DM asked that the phrase "some patients hate it" be substituted by the phrase "some patients were resistant to it".	
		LO described her experience with trying to get an appointment for emergency paediatric services at QAH. She discovered that nowhere in any documentation does it explain that children should be taken straight to QAH, rather than using 111 to make an appointment. Sue has forwarded an email about this to QAH and EN suggested she contact David Barker at CCG. Post script note- SM has done this.	
Website	SM	Sue asked EN to identify her priorities for this meeting; it was agreed to discuss 'Website'as the first item.	
 Process for PPG suggested improvements 		EN began by commending LO for her help with the web site, particularly her input from the patient perspective.	
Patient feedback about use of webite		SM asked how the PPG can be involved, for example providing feedback on any new material added. EN, on behalf of Westlands, said she is open to, and welcomes, feedback about the website from the PPG, acknowledging that Westlands has ultimate responsibility and liability for it. EH asked about the process for feeding back. JD asked that SM acts as the conduit for this. GS-B felt that Westlands website is not yet DDA compliant, although LO has started to work on this. Discussion followed about the technical aspects of enlarging print.	GS-B to provide LO/Westlands with ideas for promoting DDA compatability.

		SM asked GS-B to identify some key points to help LO/Westlands with DDA compliance. GS-B iterated that, in her opinion, specialst input was preferable. JD replied that in order for this to happen, resources would have to to be taken from elsewhere. She felt that improving the front landing page took priority but also recognised that there is more work to be done. GS-B acknowledged Westlands' progress thus far with DDA compliance, but felt that Westlands needs to continue to work towards this. DM added that the CCG is generally happy with the website but Debbie Langley has had to deal with a governance issue.	
Inputs to the 'Live Well' page on the website	JD/SM	This section is a recent addition, as the information boards in the waiting room are now largely redundant. JD has been receiving 'e' posters and would like suggestions about topics from the PPG. GS suggested each member come up with a theme and resource, RB suggested a Veterans theme, EH suggested that the autumn newsletter reflect ideas from the group.	Each PPG member to suggest a topic for the 'Living Well' page on the website, and if possible identify a source for current and appropriate information. Suggestions to be brought to the next PPG meeting.
Communication and feedback with those who do not have internet access	SM	SM asked EN, JD and DM about their priorities for communicating with this group, for example a patient survey. Issues such as how the PPG can help and the practicalities were discussed in full. In particular, the process by which feedback from patients, both web users and non web users, could be obtained. EN felt it important to know about patients' expectations and whether they are being met. EH confirmed that although anecdotal, her feedback suggests that there are still difficulties for individuals. Regarding a questionnaire, GS commented that devising the right questions is a big subject. JD felt that there is a disparity between 'wants' and 'needs' in relation to questions asked. After much discussion, it was agreed that the National Patient Survey will form the basis of a questionnaire. Regarding distribution, DM suggested that the concierge could approach patients [who come to Westlands] to complete a questionnaire, using an IPad. Letters and questionnaires could be sent out, although JD confirmed that they are not able per se to distinguish web users from non web users.	EN to draft a questionnaire for both web and non web users & send it to EH,RB,LO and GS-B, via JD and SM, for their comments.

	1	CC D wandared whether a 'nan un' link on the	
		GS-B wondered whether a 'pop up' link on the website could be created to attract the attention	
		of users.	
PPG recruitment	SM	There was general agreement that PPG numbers need to increase. Recruitment suggestions included placing a notice on the board outside Westlands, and developing a virtual group. Westlands could supply SM with an NHS email address to manage communication with a large group. Social media were seen as important, such as FaceBook and Voice of Portchester. JD welcomed these ideas but cautioned that terms and conditions must be established, with a focus on governance.	
		In order to advertise the work of the PPG, LO suggested writing a summary for the notice board. GS-B wondered whether Lloyds could send out PPG information with prescription items, and EN offered to add something to the bottom of a prescription request. PPG to discuss this further at their next meeting.	Recruitment strategies to be on agenda at next PPG meeting.
		SM thanked LO for posting the minutes of the PPG meetings on the website.	
Feedback on running flu vaccination clinics	JD, DM	JD explored the huge challenges faced by Westlands this year. 3 different vaccines had to be ordered in, almost one year in advance. A booking system for those in group 1 was available via the website. Those in group 2 had to phone for an appointment. Clinics have been, and continue to beheld, midweek and Saturdays since September. Two and half thousand patients have been vaccinated so far.	
		LO asked that the verbal information given about allergies and anaphalaxis be 'toned down' to avoid upsetting children. GS asked why temperatures were not taken before entering Westlands. JD confirmed that it was discussed by the medical staff. GS suggested that those waiting for their flu injection should, as a priority before entering the building, be asked if they have any COVID-19 symptoms. RB asked about the classification and identification of those 'at risk', specifically those shielding. JB advised that surgeries furnished these details to NHS England and information is available on the NHS England website regarding priority groups.	
Westlands' responses to COVID-19 challenges	JD	JD delivered a detailed slide presentation. In summary, she explained how Westlands had to respond rapidly to the changes demanded by	

		COVID-19. Their priorities were to undertake risk	
		assessments for staff, patients and the building	
		to ensure safe service provision. Planned work	
		was brought forward to improve the reception	
		area and flooring in the waiting room. All this	
		was approved by the CCG. Westlands' aim was	
		to meet the service standard of a 4 hour	
		response to an urgent appointment request and	
		a 5 day response to a non urgent request. 4,600	
		urgent request forms were completed between	
		April and October.	
		During phase 1 of lockdown, all patients were	
		triaged initially and where appropriate, offered a	
		face to face appointment. This system has	
		continued. Home visits, both proactive and	
		reactive, continued during this time. One of	
		Westlands' priorities was to set up online	
		request facilities for repeat prescriptions.	
		Recently, it has been agreed that repeat	
		dispensing can take place for simple	
		prescriptions.	
		Cancer screening has recommenced, and for	
		those with chronic health problems deemed at	
		high risk, telephone screening is in place.	
		Currently, an audit is being undertaken to	
		review the 2 week wait for cancer referrals.	
Undata an talambana	10	During the presentation ID gave the following	
Update on telephone	JD	During the presentation, JD gave the following information:-	
systems at Westlands			
		-2 extra telephone lines installed -dedicated direct dial numbers for secretarial	
		staff and those dealing with prescriptions	
		-3 mobile phones available for use	
		-71% increase in incoming calls March -October	
		-88% increase in outgoing calls March -October	
		-56% merease in outgoing cans water -october	
		EH asked whether it would be possible to install	
		a call back system. Currently, Westlands has no	DM to contact
		way of knowing how many people are waiting to	telephone provider
		be connected. A call back system would avoid	to find out costs for
		patients having to wait for an available line.	installing a call
			back system.
Undata on unreceived	ID D/4	ID and DM avalained that two systems are used	
Update on unreceived text messages issue	JD, DM	JD and DM explained that two systems are used for sending text massages. Micro is used for	
tevr illessages issue		for sending text messages. Mjog is used for campaigns and 'reminders' and is considered	
		'the best they have'. AccuRx is used for one to	
		one text messaging. For campaigns ie sending	
		large numbers of texts, Westlands always uses a	
		dummy and other sources to test the reliability	
		of text messages. SM wanted it to be	
		acknowledged that despite this, not all text	
		messages are being received, citing evidence	
		from the recent flu vaccination campaign and	
		updates about the POD system earlier this year.	
		apaates about the FOD system earlier this year.	

Autumn newsletter		There was insufficient time to discuss this.	
AOB	SM	AW enquired about face to face appointments, on behalf on an elderly friend who is hard of hearing and doesn't like talking on the phone. JD confirmed that for risk assessment purposes, there has to be a telephone conversation with either a nominated carer or the patient before a patient can be offered an appointment at the surgery. SM thanked everyone for coming to the meeting.	
Date of next PPG meeting with Westlands		To be set for January 2021	