



Grove House Partnership

Patient Group Meeting: 2nd February 2022 Via Zoom

Attendees:

Syd Broxton (PPG)

Ann Turner-Culverhouse (PPG)

Alan Smith (PPG)

Nancy Alexandra (PPG)

Beryl McWhan (PPG)

Sharon Hearty (PPG)

Joanne Cripps (BM)

Kirsty Kendrick (DOPM)

Sharon Williams (Admin)

1: Apologies:

Tony Hayes (PPG)

Ted Rawlinson (PPG)

Terence Watkinson (PPG)

John Timms (PPG)

Roy Brown (PPG)

Deb Kelly (PPG)

John Martin (PPG)

Lianne Wilson (Admin)

2: Actions from previous meeting:

Grange Pharmacy – Syd asked if we had any updates regarding the Pharmacy. Alan explained that he went to the Pharmacy on the 1st February, and it all seems to be resolved. Alan had written to the area Manager and the reply said that there was now new staff at the Pharmacy and there was no queue when he went.

Phlebotomy Service – Syd asked how it works now for Grove House patients? Joanne explained, whilst we don't have a Phlebotomist allocated from WGH at present due to resourcing issues, the Practice has started using own staff to supply a service and we have some allocated resource occasionally from GP Health connect service. So, we're adding as many phlebotomy appointments in Practice as possible and there is still the full service at the hospital locations.

Access Survey Action Plan – Joanne explained that due to winter pressures at this time there has not been any progression to share the Group. Ann felt that the action plan was very clear, and the Group agreed with the actions that need to be focused on.

3: Call Data:

Kirsty shared a presentation with the Group around recent call data for the Practice. She explained that the first two slides shown our call data for October 2021, with a Comparison to another Halton GP Practice. Kirsty explained that this particular month was also an extremely busy time for all Practices, due to patients also phoning for covid and flu vaccination appointments, along with a lot of covid queries. We did have some long call waiting times during this month due to increased demand on the service.

Data for Grove House calls taken during October 2021

7644 Calls were presented during this month.



The average queue time was 00:07:09 and the longest queue time was 01:26:23

Comparison Data against Weavervale Practice calls taken during October 2021

6906 Calls were presented during this month.



The average queue time was 00:09:16 and the longest queue time was 01:45:14

Kirsty then discussed the Practice call data for December 2021 and January 2022, both of these months shown an improvement in calls answered, even though demand was still high, especially due to covid boosters. Kirsty explained that when we went to triage first system and a high majority of patients were using econsult, we did expect calls to be less, but this has not been the case.

Data for Grove House calls taken during December 2021

6208 Calls were presented during this month.



The average queue time was 00:04:01

Data for Grove House calls taken during January 2022

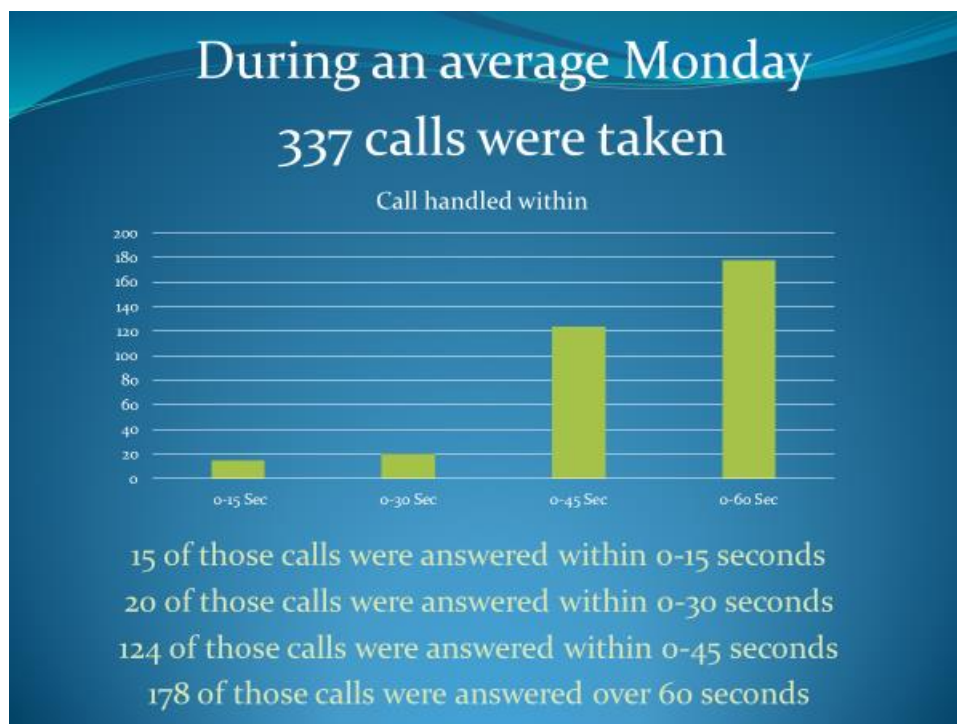
6096 Calls were presented during this month.



The average queue time was 00:03:06

Kirsty then discussed call data for an average Monday and explained that 48% of calls on this day were answered within 60 seconds.

Syd asked when do the call times start from, as the message at the beginning of the call takes a while. Joanne explained that the timings start from when the person is connected through to the Practice and placed in the queue, after the pre-messages are completed. Beryl felt that the pre-message was very long. Joanne explained that we were asked by the CCG to add a part in regarding the covid boosters, but this has now been removed and it is just Dr Wilson's message that lasts for approx. 60 seconds.



Beryl asked once you are in the queue why does it take so long to speak to Reception. Kirsty explained that at the moment, we are still receiving extra queries regarding covid, but on top of this, if a patient cannot use econsult then the Receptionist takes them through an econsult lite, which is more time consuming. This can mean that some calls can take a while as the Receptionist has to ask for a lot more information. Some calls can be very fast, but then some require more time and we also get calls through from hospitals, requesting information that can lead to more lengthy call times. Joanne informed the Group that on 01.02.2021 the reporting system stated 332 calls presented and the average wait time was 3 minutes and 7 seconds. She explained that it can seem a long time when you are in the queue especially if you are queue position 6 and all calls take a while to be dealt with.

Syd asked how the phone and queuing system works when selecting calls. Joanne explained that once an agent becomes free, the next person in queue will be put through to that agent. Ann felt that there does seem to be good improvement in this area and that the more people use econsult, the less busy the phones should be.

Ann mentioned that she has noticed sometimes the econsult system tells you that the service is not available. Joanne explained that when the GPs reach capacity for that day, the service can be paused. The Practice do keep it on for as long as we can, but for instance, on Monday, we had 2 GPs call in sick and this impacted the service, so it was paused. When the Practice is open, the patient is still able to contact Reception who will assist them.

4: Social media:

Sharon discussed the latest social media statistics, explaining that these stats help us to try and get as many patients using our Facebook and Twitter pages as possible, as our social media is used to keep patients informed with important updates from the Practice along with other health and Practice information. As of 31.01.2022 the Facebook page has approx. 2000 followers and the Twitter page has just over 200 followers. Syd asked about the type of information we put onto our social media sites. Joanne explained that of recent we added a lot of information around covid guidelines, for example, the past week, we have been adding information around the new face covering guidance. However, it can be on numerous issues, such as, flu vaccinations, health campaigns and Practice updates.

Ann felt that the text messages that the Practice sends out are good and easy to understand and follow. Joanne agreed and explained that we also reach many more people with the text messages, we can reach up to 12,000 patients via this service. Ann felt that possibly when we send the next text message out regarding our social media sites, we need it clear that if people want to see our posts in their newsfeed, then they must follow or like us. She felt that the wording is very important, so people know what to do and increase our followers.

Action: Sharon will look at changing message wording, before sending out another text, to inform people of this.

6: AOB

Covid Booster – Ann explained that a lot of people are confused over how many doses of covid vaccinations they should be receiving. Joanne informed the Group that the current guidance is that for the majority of people will receive two vaccinations and a booster, but those who are immunosuppressed will receive 3 primary doses and a booster.

Action: Add more to inform our patients of the current guidance.

Syd asked how we are doing with other immunisations such as chicken pox. Joanne explained that we are doing ok, but the uptake has not been as good, especially with flu vaccinations and now that people are taking masks off, there is a concern that there will be a rise in flu cases. The Practice can vaccinate for the flu up until the end of March, so she asked if the Group to keep giving the message where possible., that flu vaccination and covid vaccination is still available.

Meetings – Syd wished to say how well he feels the meetings are going lately and that as a Group they are receiving good information from the Practice. We agreed to have the March meeting via Zoom, but possibly return to a face-to-face meeting in April. We will review this closer to the time to ensure current guidance allows it. Joanne explained that she will not be present at the next meeting due to annual leave. Joanne suggested looking at the Practice profile at the next meeting and identify ways to recruit new members to the Group, so that we have all age groups represented.

Action: Sharon will check to see if the room within Community is free for the April meeting, as there are a few members of the Group who are unable to go up the stairs.

Date of next meeting via Zoom:

2nd March 2022

4 – 5pm