

Patient Group Meeting: 7th September 2022 Via Zoom

Attendees:

Syd Broxton (PPG) Alan Smith (PPG) Nancy Alexandra (PPG) John Timms (PPG) Julie Knight (PPG) Joanne Cripps (BM) Kirsty Kendrick (DOPM) Sharon Williams (Admin)

1: Apologies:

Tony Hayes (PPG) Ted Rawlinson (PPG) Terence Watkinson (PPG) Sharon Hearty (PPG) Roy Brown (PPG)

Deb Kelly (PPG) John Martin (PPG) Roy Brown (PPG) Lianne Wilson (Admin)

Joanne informed the Group, that Beryl has decided after the death of her husband, that she feels she is not in the position to be part of the Group at this time, so she is stepping down. She knows that if she changes her mind, she is very much welcome back at any time.

Joanne also wished to let the Group know, that David Culverhouse, has been going on the Friday morning walk for health with John Timms and he has expressed interest in joining the Group, so as soon as he is ready, hopefully, he will join the Group.

Sharon will start to promote recruitment for the Group via social media, the newsletter and text message.

2: Actions from previous meeting

No previous actions to discuss.

3: Access

Updates - Joanne gave the Group an update from the PLT, explaining that we had now formed a working group that is led by Dr Manesso, with other representatives from around the Practice. As part of the Group, they have looked at feedback and statistics to form an action plan and devised a better communications strategy to patients, which Sharon will discuss later in the meeting.

Joanne explained that we have also switched the self-check in screen back on and we are currently working on call waiting times, looking to improve this for patients. We have also expanded our team, with a new set of GPs, who work part time with the Practice. Joanne informed the Group that we have has a lot of compliments lately, and on the whole things are looking brighter.

We have had confirmation regarding the new e-consult software, which will be standard for all Practices in Merseyside and Halton, it will be rolled out in September, though we are not sure

when we will start to use the software. Joanne explained that there is a video available which introduces the software, PATCHS, Sharon will forward the video link to the Group. **Action: Sharon to forward link.**

New Newsletter:

https://www.grovehouse.co.uk/wp-content/uploads/pdfs/newsletters/practice-newsletterseptember-2022.pdf

Sharon shared the new newsletter with the Group, explaining that we will now put one out on a monthly basis, which will focus on items from our new communications strategy. This includes:

- Service Information: This will include key figures for appointments, call data etc.,
- Key messages: This will include information that we feel is relevant for that month. Our first newsletter's key message focuses on how we are working on ways to improve services and updates on new staff.
- Our Team: This will look at a different team member/role each month and what their role provides to our patients, starting with our GPs.
- Other Services: This section will look at other services available to patients and what they offer, such as the Pharmacy, walk-in centres, A&E.

Joanne asked the Group if they were surprised by any of the appointment figures. Alan explained that the no shows for appointments was higher than expected. Nancy agreed especially as it is harder to get GP appointments, she felt that when patients get reminders from the Practice, it does not make sense for that figure to be so high. Joanne explained that we did have a stronger DNA policy in place before the pandemic, and maybe we need to re-establish this, now face-to-face appointments have increased, especially as the majority of DNAs (did not attend) are from the face-to-face appointments. It was suggested to look at promoting to patient that they do not waste appointments.

Action: Sharon to look at promoting appointment wastage.

Joanne explained the mode of contact for August was quite a good split, with 34% face-toface appointments, 37% through e-consult and 20% via the telephone. The average appointments booked for NHSE is 72 per 1000 patients, we are at 122 per 1000 patients, so we are currently above the average. The Group asked who goes to the home visits, is it the Paramedic or the GPs. Joanne explained that it can be either depending on the actual circumstance, GPs tend to do home visits for more complex patients. The Paramedic may do a home visit then feel a GP needs to attend.

Syd asked how many staff do we have answering the phones throughout the day. Joanne explained that we have 17 in our Reception team, who do many various tasks that include the phones, digital requests and the front desk. There are normally between 3-7 on the phones throughout the day. Syd asked about how the phone queue works, as he felt, if you were at queue position 5 it could be quite a long wait if there was only 3 members of staff on the phones. Joanne explained that the system will only allow the number of calls in the queue by how many staff members are logged on. Calls can take an average of 3 to 4 minutes; some may take longer depending on the situation being dealt with.

Sharon explained that the plan for the newsletter is to put it on the website, social media, send an mjog message and put out some paper copies within the Practice. Syd felt that the newsletter looks very effective, and the Group agreed.

<u>7: AOB</u>

Communication – Nancy explained that she had an appointment at the Practice to have a further tetanus vaccination, but when she seen the nurse there was no record of her having one in April. Nancy wished to express that it was no fault of the Practice, it was the hospital who had not communicated correctly regarding the vaccination she had in April. Joanne explained that a shared record only has certain elements that can be seen, and the patient must have given their permission for it to be shared. It may be something as simple as the information is just taking slightly longer to put through the system, and it has not filtered to us yet.

Telephone appointments – Syd explained that he had received a letter for a telephone consultation, but it was not a set time and just stated 9am-12pm. He asked if this could be made into a more specific time. Joanne informed the Group that, as part of the access review, the GPs do not want to move to timed telephone slots, but will state AM or PM. This is mainly because they fit the calls in throughout their face-to-face appointments and their other daily work.

Usual GP – Syd wished to share that his usual GP has changed, and he had not been informed. Joanne explained that we do not notify as it can be too much work to let every patient know when this happens. You can choose to see any GP of choice, but your usual GP will get sent paperwork, tests etc. If you wish to, you can ask for your usual GP to changed to your preferred choice.

Flu and Autumn Covid – Syd informed the Group that he had received a letter regarding his flu and covid vaccinations, but it had no instruction included as to how it will work. Joanne explained that letters have been going out nationally, so she is assuming this is the letter Syd received. The Practice is starting to send letters out this week, appointments are being added onto the system and will be providing both flu and covid vaccinations. We will also be running some Saturday morning clinics.

If a patient phones our Care Navigators, they will check if that patient is eligible and if so, book them in for an appointment, you do not have to wait for the letter to book in. Where possible, we will be trying to co-administer both vaccines at the same appointment. A Pharmacy has been engaged to do home visit vaccinations.

Next Meeting – The next meeting date has been moved to Wednesday 12th October and will be a hybrid meeting, so those who wish to attend face-to-face can and those who choose to join via Zoom can still do so.

Date of next meeting (Hybrid) <u>12th October 2022</u> <u>4 – 5pm</u>