



Grove House Partnership

Patient Group Meeting: 7th June 2023 Hybrid

Attendees:

Alan Smith (PPG)
Sharon Hearty (PPG)
Anne Findlow (PPG)
Dave Colleavy (PPG)
Norma Sherwin (PPG)
Diane Mercer (PPG)
Joanne Cripps (BM)
Jack Yeomans (RM)

Julie Knight (PPG)
Dan Benatan (PPG)
John Timms (PPG)
John Pitt (PPG)
Kirsty Kendrick (POM)
Sharon Williams (Admin)
Malcolm (Wellbeing)

1: Apologies:

Syd Broxton (PPG)
Nancy Alexandra (PPG)
David Jameson (PPG)
Siobhan Chadwick (PPG)
Rae-Ann Roberts (PPG)

Tony Hayes (PPG)
Stephen Lancashire (PPG)
John Martin (PPG)
Roy Brown (PPG)
Deb Kelly (PPG)
Nic Comer (PPG)

Alan Smith chaired the meeting in Syd's absence.

2: Actions from previous meeting

True record of minutes and signed off.

Outreach Days – The PCN have said that, although they would love to facilitate these, there is no capacity at this time, as their main focus is currently around access. So, they will leave it to each individual service to do their own outreach days but hope this is something that they could come back to in future.

PATCHS Data – Jack Yeomans, Reception Manager, joined the meeting to share the data with the Group. Jack explained that PATCHS only went live at the beginning of April, so the data we have is limited.

In April, we in 2073 requests, 1626 of these requests were unique patients.

Request Type	Requests	Unique Patients
New Health Problem	971	913
Ongoing Health Problem	704	626
Admin Request	233	193
Medication Request	114	103
Other	48	46
GP Practice Message	3	2
All Types	2073	1626

In May, we had 2439 requests, 1934 of these requests were unique patients.

Request Type	Requests	Unique Patients
New Health Problem	1218	1143
Ongoing Health Problem	894	775
Admin Request	267	203
Other	60	51
All Types	2439	1934

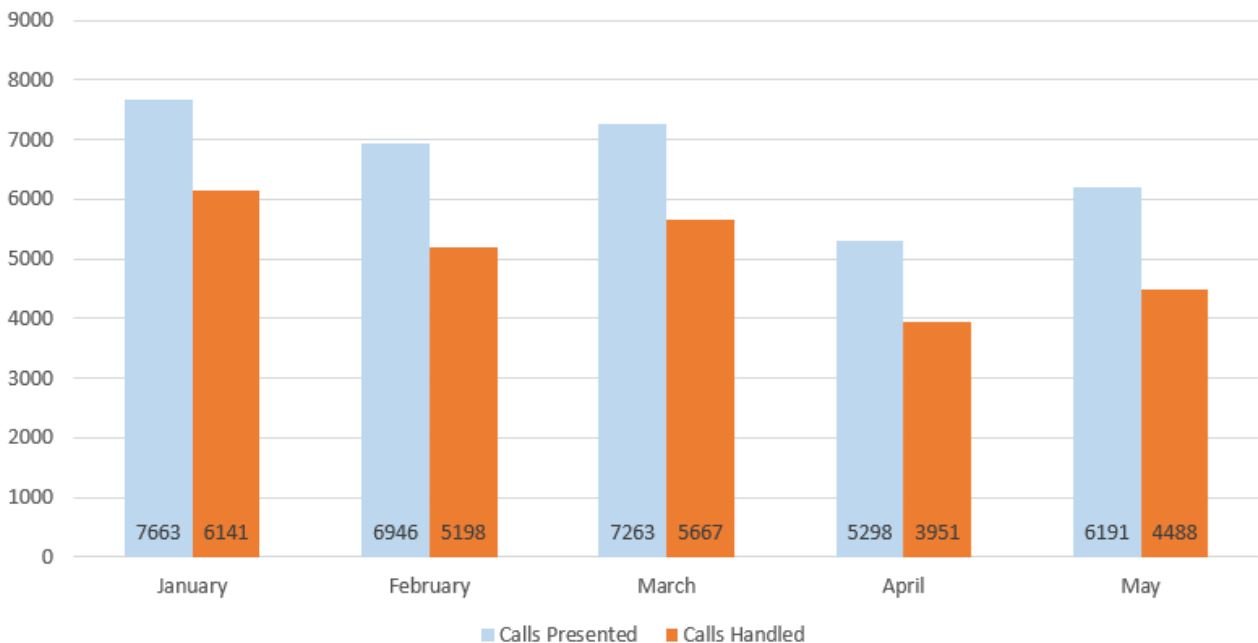
Jack explained that the figures seem to be sitting at the 2000 mark, but it is rising, so we project that the figures will continue to do so next month. We will update the Group with more data as we receive it.

Dan asked if Jack could give an insight as to how many of the unique patients in May, are different than the patients who use the service in April, as it would be interesting to see the growth within the patient population. Jack explained that we are unable to give this data at the moment, but the software is continually being updated and we are getting new information each month.

Diane asked how many patients the Practice currently have. Joanne explained that our Practice list has grown again, and we are now at 14,700. She informed the Group that a Frodsham Practice did a data list cleanse, and some patients were asked to move to a Practice closer to where they live, this has been one of the main impacts of why we have seen the growth. Diane asked if Grove has any patients on their list that are out of the area. Joanne explained that by agreement, we have a few patients that live in Widnes, which is out of our catchment area, but they are ones that have ongoing tests / results etc. and it was not right for them to transition to a new Practice. Our area is quite a wide area, we do stretch to Moore and Daresbury, and all places in Runcorn.

Jack shared call data stats, which were broken down by month, this includes how many calls were presented, along with average waiting times.

Calls Presented and Handled



The call waiting time is coming down, now that we are getting to grips with the new system.

Online Submissions		Incoming Calls - TOTAL	
15/05/2023	160	15/05/2023	238
16/05/2023	135	16/05/2023	321
17/05/2023	60	17/05/2023	153
18/05/2023	119	18/05/2023	344
19/05/2023	100	19/05/2023	293
Incoming Call Length		Average Queue Time	
15/05/2023	00:04:30	15/05/2023	00:11:31
16/05/2023	00:04:27	16/05/2023	00:07:19
17/05/2023	00:03:25	17/05/2023	00:08:44
18/05/2023	00:03:17	18/05/2023	00:08:33
19/05/2023	00:03:25	19/05/2023	00:08:22

Dan asked, what does the average call queue pattern look like throughout the day. Jack explained that we do have this based on weekly data, which gives a bit of a better picture. Joanne explained that we do tend to do a snapshot of certain points in the day, which looks at the answer time, over the first hour of the morning and afternoon.

Diane asked do we have any data on the age groups, Joanne explained we do, but it is a different system we use. It breaks down our demographics, our biggest population is the middle-aged group, 30-55. The data will also break it down into female to male ratio, which is reasonably equal.

Action: Joanne to add Apex summary to be circulate.

Alan asked if there is anything that the Practice needs from the Group, in terms of making things easier for the Practice. Alan mentioned getting Admin help via PATCHS, such as, if a patient needs a blood test. He personally, could not find anywhere on PATCHS just to ask for this. He felt that there is nowhere on the site, that states what a patient can actually ask for admis requests, such sick notes. He feels that if people know what they can request via Admin, this could save people calling and taking up the phone lines.

Joanne explained that because PATCHS is a national system, they are quite generic as to what they show you on the main page. It is about us then being able to understand how we can tamper with this a little to make it more specific to Grove House. Dan feels that asking for things via Admin requests should be common across the country, so it could be taken back to PATCHS. Joanne explained that it is also looking at how we process it, as it will be a clinical request. Kirsty explained that may we could put those types of requests through to a GPA or a Practice Nurse. Dan felt that the advantage of it, would be that it would not take patients thought the entire PATCHS dialogue, just to make an admin request.

Joanne explained that we have also been looking at adding some call options back in, we did have this a while ago and had some software to help with it. We ran it for around 12-18 months, but we received a lot of complaints about it, as people felt it was not as helpful as it should have been. It is a voice that says, if you have this problem press option 1, if you have that problem press option 2 etc. We believe that within our system we could put options on, for example, if someone is calling regarding a prescription query, we ask that they phone after 2pm. The option would say is you are calling regarding a prescription then press option 2, they would then be put through where a message would remind the patient to call back after 2pm and then the call will end.

Joanne explained that it could be frustrating for the patient, if they have taken a while to get through, choose that option then get cut off. However, it could be an improvement in the long term, as we may end up sifting some of those calls out and improving call waiting time. The concept of it, would be that the people who have a medical need, get through in the morning and the ones who do just need prescription help, then they would be happy to wait until later in the day. Joanne explained that instead of the call just ending, we could say that there is an email option.

Joanne asked the Group, if there were any other options that they feel would be acceptable at the beginning of the call. Alan felt that after the main message, there should be something that says, if you are calling about a test result or a prescription matter call after 2pm. Joanne explained that test results, would be another easy one to put somewhere into that system.

3: Wellbeing:

Malcolm, from Wellbeing, introduced himself to the Group and gave an update on their current service. He explained that they are based in Bridgewater House and that everything is free for people who use Wellbeing services. They are currently helping people with the affects of cost of living, along with other issues such as housing, where people may have rent arrears etc that is causing them a lot of worry.

They also help people to access services such as CBT and counselling, Wellbeing can usually access counselling faster than a GP Practice. They have a good database within Halton where they can refer people too. Malcolm gave the Group some information on their upcoming events within the area. They are also doing a lot to re-engage people back into activities since covid such as walks and swimming.

Malcolm explained that they have a high intensity section, which deals with people who tend to use A&E and GP surgeries a lot. Malcolm works with those people, who are more complex cases and sees them within the community such as their homes or a coffee shop. Malcolm passed some information and cards to the Group.

Diane asked if Wellbeing services are on the Practice website. Joanne explained that we do have social prescribing on the website, and that Wellbeing enterprises are just one option. We also have the Practice walk which Sharon Hearty and John Timms lead every Friday and there are a lot of other local walks too. She informed the Group that Wellbeing enterprises, have invested in some technology, so that a GP can do a referral direct within the clinical system. Also, the Care Navigator can navigate a patient to the Wellbeing service, depending on what the patient is saying to the Care Navigator. Patients can also self-refer to their Wellbeing services. Joanne explained that we value Wellbeing enterprises and we have worked with them now for around 5-6 years, social prescribing really does work.

It would be good if the Group could promote the services and what they do. Joanne explained that we need to look to promote the services more on our website, social media and perhaps the next newsletter.

Action: Sharon to look at promoting Wellbeing enterprises.

Post meeting note: We promoted the service in our June newsletter:

<https://www.grovehouse.co.uk/wp-content/uploads/pdfs/newsletters/practice-newsletter-june-2023.pdf>

4: Code of Conduct:

Sharon had circulated the Code of conduct to the Group prior to the meeting and asked anyone who could do so, to print it off and sign prior to the meeting. For those who did not have access to a printer, printed copies were available. Joanne collected in all signed copies to be scanned onto our system, Sharon will ensure that members who are not present receive a copy and sign it ASAP.

Action: Sharon to ensure all members of the Group sign a copy and scan all copies in electronically.

5: Practice Event Days Update

Sharon explained that we had several local services come in along with John Timms, who promoted the health walks.

Wellbeing all day from 9.30am
Alzheimer's Society from 9.30am
MIND Halton from 12pm
Age UK Mid Mersey from 11am

All the services and others have asked to let them know if we do another, as they would love to come along, they felt it was very well organized and helpful. We have not had any feedback from patients, but the services who came in said that even if they only help a couple of people each time, that is a couple of people they may never have seen had it not been for the open day.

During the event, we realised that maybe the waiting room was not the best place to have the tables, as it was quite crowded. It may be better to possibly have the tables for the services at the front in between Grove and the Community section, where we have held coffee mornings in the past, as this may also be more spacious and visible to a lot more patients, rather than just those who came into the waiting room.

John Pitt explained that he came in during the open day. He was unsure of what perception he had when he came in, but he felt it was cramped and he did not realise it was in two sessions, with services in at different times. Sharon explained that she did try to inform people of when each service would be available, as not all could not be there all day, but she was aware that not everyone will have seen this. Possibly next time we could ensure services let us know more in advance, when they will be available, so it can be promoted better, possibly signs within the Practice as well as social media etc.

Joanne explained that we did try to aim for 9am-3pm, but it was not possible for all the services to do that, and things were moved about at last minute, which makes it a little difficult to manage. Joanne felt that there were a lot of successes out of the day, but there are things we could improve on. Dave felt that this is what they are for, to learn each time and what we can improve on each time. What did work well, was having John Timms in at the same time, as people recognised him and would speak to him. If anyone from the Group is free for the next open day, hopefully that could come in and support, the Group agreed.

Action: Joanne and Sharon to plan next date and to ensure that too much space is not taken up in the waiting room. To look at a few dates so that not as many services are in within one time.

6: Patient Comment Box:

Joanne explained that we moved the comment box into a more visible place within the waiting room. Sharon informed the Group that there was one comment in the box, which asked if we could provide comment sheets and pens. Sharon spoke to Terri, Senior Receptionist and she printed some forms and put some pens out.

Action: Look to get an A5 holder to put the comment forms in and attach to wall next to the box.

Diane asked if there was a facility for patients to put comments in via the website. Joanne explained yes, we do, and we have discussed breaking these comments down into main areas and look to discuss at the next meeting. We could look at some numbers and main themes from the comments, see what improvements we could make from them.

Action: Jack and Kirsty to look at comments that come in via patient.comments email.

7: AOB:

New Members - John explained that he was unsure of everyone's name within the Group, so they went around the Group to introduce themselves.

Action: Sharon to provide labels for the Group to put their name on for the next few sessions.

Road Closure – The Group discussed upcoming road closures on the Daresbury expressway, which could impact patients getting to the surgery. The latest information is as follows:

The start of the temporary closure on part of the A558 Daresbury Expressway has been delayed until **July 5**. The expressway will be closed from the junction of Innovation Way to the roundabout of Blackheath Lane and Pitts Heath Lane to allow for Redrow to carry out work on their new housing development.

The closure will end mid-September. It will be lifted from August 24-29 for the Creamfields festival. A diversion route will go along the A56 Chester Road to the A533 Southern Expressway then along the A533 Central Expressway and back on to the A558 Daresbury Expressway. All diversion signage will be marked with a square symbol.

Date of next meeting
(Hybrid)
12th July 2023
4 – 5pm