



# Grove House Partnership

## Patient Group Meeting: 7<sup>th</sup> February 2024 Hybrid

### Attendees:

Diane Mercer (PPG)  
Dan Benatan (PPG)  
John Pitt (PPG)  
Kirsty Kendrick (POM)

Dave Colleavy (PPG)  
Sharon Snape  
Jack Yeomans (RM)  
Sharon Williams (Admin)

### 1: Apologies:

Syd Broxton (PPG)  
Alan Smith (PPG)  
John Timms (PPG)  
Norma Sherwin (PPG)  
Sharon Hearty (PPG)  
Joanne Cripps (BM)

Tony Hayes (PPG)  
Nancy Alexandra (PPG)  
David Jameson (PPG)  
Caroline Nesbitt (PPG)  
Anne Findlow (PPG)  
Julie Knight (PPG)

Kirsty chaired the meeting in Syd's and Alan's absence.

Kirsty Introduced Sharon Snape to the meeting. Sharon is the Team Leader for the Admin and Secretaries team; she deals with all the hospital correspondence and recalls for chronic disease reviews.

### 2: Actions from previous meeting

iPads and Training:

*Post meeting note: We have heard back from the person, who is no longer employed by the Practice, and they cannot remember the passwords they used, which would enable us to log in to the iPads. We are looking into what other options we have.*

**Action: We will update at the next meeting.**

Defibrillator - We are waiting to see if David has any updates when he attends a meeting, as we have not heard anything back since completing the form last year to have one outside of the health centre.

Confidentiality at Reception - We are looking at options, but it is hard as staff need to be DBS checked before they are allowed to be alone with patients.

**Action: Discuss at next meeting.**

### 3: National Survey Results

The National patient survey results were shared with the group, the figures show:

Column one – The Practice Results in the national survey

Column two – ICS (local) average

Column three – The national average

Column four – The Practice resurvey results, which we completed during a flu clinic in September 2023.

## 2023 National Survey results with retake in october of same questions

questions	2023 national results (survey jan-mar)			Practice retake in Sept/Oct 2023
questions and results	Practice	ICS Survey	National Survey	Grove Re-Survey
<b>Grove House GP services</b>				
Find it easy to get through to this GP practice by phone	29%	49%	50%	42%
Find the receptionists at this GP practice helpful	67%	83%	82%	80%
Are satisfied with the general practice appointment times available	41%	52%	53%	60%
Found it easy to use the Practice website to look for information and access services				51%
<b>Making the appointment and whilst at the appointment</b>				
Were satisfied with the appointment they were offered	50%	73%	72%	71%
Describe their experience of making an appointment as easy	27%	54%	54%	53%
Say the healthcare professional they saw or spoke to was good at giving them enough time during their last general practice appointment	61%	85%	84%	75%
Say the healthcare professional they saw or spoke to was good at treating them with care and concern during their last general practice appointment	64%	86%	84%	87%
Were involved as much as they wanted to be in decisions about their care and treatment during their last general practice appointment	73%	91%	90%	68%
Felt their needs were met during their last general practice appointment	72%	92%	91%	68%
<b>Your health</b>				
Say they have had enough support from local services or organisations in the last 12 months to help manage their long-term condition(s)	47%	66%	65%	55%
<b>Overall experience</b>				
Describe their overall experience of this GP practice as good	53%	72%	71%	62%

We use the results from the survey to look at areas where we need improvement. The Group felt that the only negatives were around access. The Practice has applied for funding for sessions over 8 weeks to look at access, which would include Clinicians and we would look at ways in which we can improve access over these sessions. We completed the re-survey as when PATCHS came in, it changed a lot of our systems and how we worked, we wanted to see how patients felt about these changes. The survey for 2024 should now be in progress, and they will randomly choose patients to send the survey too. If a patient receives a survey request, they can complete it online or a paper version which is sent to them. Once the results for 2024 become available to us, we will share them with the Group, it is normally around May/June.

We are currently using bookable links, which are sent to patients, they can simply click on the link to book an appointment. At the moment, these include smears and baby imms clinics, but we want to see how we can use this more in our model and how it would work. We have had lots of positive feedback from patients who have used these links. Patients like it, as they can book their appointment there and then.

Blood Tests National Change – We have been advertising the new way to book for blood appointments. Patient will have an option to book and manage their own blood test appointment online, via a URL link sent to your mobile phone. This provides them with more flexibility and choice. The aim is to reduce the time it takes to book an appointment via the Contact Centre. If a patient wants this option, then the Clinician will click the check button and a link will be sent to the patient. If the patient does not have a mobile number, then the Practice can do it for them. It will give options as to where you can attend to have your bloods taken.

#### **4: Patient Drop-In Session 1 31<sup>st</sup> January:**

The Group has received an email prior to the meeting containing all the details of what patients had fed back to Joanne during the first patient drop-in session. Once these sessions are complete, we will share the main areas discussed with all patients, possibly in a special newsletter.

We have another session later today and two more over the coming weeks. These sessions are about opening our doors to patients. Diane mentioned that her friend wished her GP Practice did this.

*Post Meeting Note: A few group members joined Joanne for the patient drop-in session on Wednesday 7<sup>th</sup> February. Joanne greatly appreciated their help and support for the session, and it was found very useful to have some Patient Group members present.*

It was discussed that some of Reception were informing patients, that no appointments were available that day and they should call back the next day. They feel that this situation is not good for the patient nor the reception staff. The Practice do not want this to be said to patients, as it simply puts the pressure on for the next day, but it is hard to get all the reception team to say the same thing. We do have new staff training with an experienced member of staff, even on the phones where we use two-way headsets, so they should all be aware that we do not want to inform patients to call back the next day.

It was asked if we do any role playing within team training, as this can build confidence. We have used this method in the past but have not done so for some time. It was felt that it may also be useful for staff to share their customer service experiences, especially the bad ones. As you can learn from this.

#### **5: Patient Comments Online / Box:**

Jack manages all comments that come through via our patient comments email address, there are quite a lot that come through on a daily basis.

Sick note requests – We get a lot of these requests coming through via the online comments, but we are trying to get these patients, to do this via PATCHS, as the GPs need more information to complete sick notes, than what they are giving in an email.

It was discussed that using the patient.comments method for clinical issues, is not appropriate, but patients seem to be using it to bypass the routes they should use, as this method is more accessible for them. It is not manned constantly and therefore if it is a clinical issue, then it should not be used, we do state that they will get a response within 72 hours. We have to be strict with what this method of communication is used for.

**Action: Promote use of what patients should use this email address for.**

We are looking at increasing the numbers for PATCHS each day, so that it stays on for a longer time period and therefore more accessible, hoping that then, patients do not feel the need to use the email address as another way to put in clinical requests.

We have had issues with maintaining Reception staff, we have had some retire, staff sickness or family issues. We have recruited two new members to the reception team, and they are halfway through their initial training. We are also looking for apprentices to work within the Reception and Admin team, we have had apprentices in the past and they have worked out really well and grow with the business.

## **7: AOB:**

Parking at Heath Surgery – Alan sent in the below information:

*Parking at the Heath surgery. I had an appointment one evening and parked in a parking space. There were no lights covering the steps or entrance pathway and generally there was little or no lighting in the area partially due to trees masking the streetlight. On returning to the car the route can be quite perilous given no lighting and backing out due to the position of the trees is extremely difficult again due to the illumination issues.*

We do tend to leave lights on all night, we also have lights on the front and back door. The Group mentioned that there are lights along Langdale Road. The Practice did pay to have lights put there a couple of years ago, there are a lot of trees around which could be blocking some light.

**Action: Discuss further at March meeting, when Alan is present to give his feedback.**

Awareness days/weeks/ months – Sharon will go through the list and see what the most important areas are to promote awareness.

**Action: Sharon to make list of what we promote – look at days the Group could join in to help promote these within the Practice.**

Heath Business Park days – John mentioned that the Heath gym, do a lot of events that patients may find useful such as: Nifty Fifties, which tries to tackle loneliness, by exercising together and then have a chat over a coffee in the Restaurant afterwards. It was also discussed that it could be very useful if the Practice went into some of these sessions, to do something similar to the patient drop-in sessions we have been doing in Practice.

**Actions:**

- **Sharon will promote these sessions for patients and John will pass on any further information that can be promoted.**
- **John will speak to the Facilities Manager at the Heath, with regards to the Practice coming there, possibly once a month. We could take some leaflets that people may find helpful, promote the St Pauls Walk also.**

**Date of next meeting**  
**(Hybrid)**  
**6<sup>th</sup> March 2024**  
**1 – 2pm**

### **Meeting Schedule 2024:**

Wednesday 3<sup>rd</sup> April 2024

Wednesday 1<sup>st</sup> May 2024

Wednesday 5<sup>th</sup> June 2024

Wednesday 3<sup>rd</sup> July 2024

**No Meeting during August**

Wednesday 4<sup>th</sup> September 2024

Wednesday 2<sup>nd</sup> October 2024

Wednesday 6<sup>th</sup> November 2024

Wednesday 4<sup>th</sup> December 2024