MINUTES OF PATIENT GROUP MEETING HELD ON WEDNESDAY 21 FEBRUARY 2018

PRESENT: Nigel Hallam (Chair)

John Flinders
Barry Wood
Rosita Dowdall
Leslie Foster
Pauline Briggs
Jane Wharton
Mandy Hallam

1. Welcome and introductions, apologies

Apologies Mary Shaw

Mary Vukajlovic Viv Palfreyman Dr Adam Tooley

2. Minutes of the Meetings held on 25 October 2017

Nigel's name was originally omitted from the apologies, but this has been rectified. Otherwise the minutes were accepted as a true and accurate record.

3. Matters arising

Update on enquiries Aldercar School – Viv had emailed Nigel stating that she is still working on a young person to join the group. There are lots of stumbling blocks and she asked that Jane email her with the name of the work experience tutor at Heanor Gate.

Action: Jane and Viv

Update on shingles vaccination enquiries – Jane had contacted both Rosita and Mary directly regarding this. The issues are around the date of birth ranges that the Practice have to work to each year. Rosita confirmed that she has since received her vaccination.

Barry spoke about his experience of being a hospital patient volunteer earlier in the day. He had acted as a patient with a leg ulcer for sixteen students taking their final exams. He had enjoyed the experience.

4. a) To elect a Chair

Nigel reminded members that he would not be standing again once his term of office came to an end on 31st March 2018 due to his work commitments which often took him away from Heanor. Having been Chair since the PPG was formed in 2011 he felt it was the right time to step aside.

- John Flinders was elected as Chair until 31 March 2019.

b) <u>To elect a Vice/Deputy Chair</u> - no volunteers for Vice/Deputy Chair. It was decided to revisit this at the next meeting when more members were in attendance to personally put their names forward for the role.

There was discussion around the commitment of being Chair and the difficulty in giving time for this. Leslie was surprised that there are not more people in the group and Nigel explained that we do have several members who are regularly contacted, but who do not attend regular meetings. We advertise the group as much as we can including during the Survey weeks and on the Practice TV/Information screen. We also have a virtual group of patients that he contacts by letter from time and time and sends out agendas, minutes and invitations to meetings. Jane has in the past sent surveys out to them and matters for comment, but rarely receives any response.

- 5. a) Review and approve the Park Surgery PPG Terms of Reference all agreed, approved.
 - b) Review and approve the Park Surgery Constitution all agreed, approved.

(Signed copies of both documents lodged with Practice Manager Jane following the meeting)

6. <u>To discuss the offer from Emma Plummer, Southern Derbyshire CCG to present information on end of life services/issues and raising wider community awareness</u>

All agreed to a joint meeting with the other two Heanor PPG's and to invite Emma along. It was decided to inform the virtual group of the meeting closer to the date and it could also be advertised for the wider population to attend if interested. **Action: John and Jane**

7. To receive and consider Survey Report for week commencing 15th January 2018

Nigel thanked everyone for their involvement and help with the survey. He had analysed the results and had not received any comments so had informed Jane to circulate and discuss the final Report within the Practice. He confirmed that the results may now also be put onto the website and notice board. It was also agreed to send the Report to all the virtual group members. **Action**: **Nigel** (completed).

Jane will discuss with all practice staff at various meetings and feedback to the group.

John confirmed that all but one of the sessions was covered and he thanked other members of the group for their help. Unfortunately he was ill and was grateful to Barry for picking up a lot of the sessions. It had been a lot easier to analyse this year with the specific questioning and answers and a reasonable amount of comments.

Barry confirmed that the analysis had been easier this year. He explained to Nigel that they had omitted the information on ethnicity as they did not feel that this was useful information for the Practice. Nigel explained that information on ethnicity is a requirement on surveys now and CQC would expect this particularly as it had always been included in previous surveys. Equally as the prevalence of patients from Eastern Europe is increasing it is important to capture this information for the Practice to be aware of any changes in the Patient profile attending the surgery and that everyone be treated equally. Also it was vital

that no group view themselves less important to us. Jane confirmed that we can extract information on ethnicity from the computer if required.

The virtual group had not been contacted and they may or may not have contributed to the survey depending on their recent attendance at the practice. Surveys had not been completed on nurse home visits as the questions were dependant on attendance at the surgery. It is not generally felt appropriate to survey patients receiving home visits for acute illness.

Discussion took place around the virtual group and recruitment. It was agreed that another publicity campaign may generate more interest. It was decided to put a request for members on the TV information screen. **Action: Nigel** (completed) and **Mandy**

The survey itself had not generated a lot of potential actions. Rosita was surprised at how many patients had used the BP machine in the waiting room. This seems to have been very well received. Mandy felt that people had been more willing to use it after she had put visual instructions on the patient information screen. Instructions near the machine may also be useful. Jane had been concerned that patients would be reluctant to use it in such a public area, but if we move it elsewhere it defeats the object of opportunistic checking. She was reassured by Rosita's comments and by the survey results.

Action:Jane/Mandy.

Rosita reported that many patients were unaware of the patient check-in. Mandy spoke about the experience of a dementia patient who visited the surgery recently as part of a dementia project to assess if we are dementia friendly. He had noticed the self check-in straight away and was very impressed by it. She wondered if a lot of the patients simply do not want to use it so ignore it.

It was acknowledged that by doing the survey we are advertising the services and hopefully word of mouth will also improve patient knowledge.

Patients had reported that the 'bing bong' before a name is shown is not loud enough. Jane indicated that if the volume is turned up then the sound on the television also increases. Alternatively patients can be called by their name, but this is in 'text speak' so could cause confusion. Jane said they can contact the company to see if there is a way around this.

Action: Jane and Mandy

Nigel noted that whilst in the Practice in the past he witnessed many patients go straight on their mobiles and do not look the TV screen. Patients can be completely oblivious to the on screen patient call-in and sometimes doctors have to call them several times.

Action: Mandy

A concerning comment from a female patient was that she had been left alone undressed in a room by the nurse. She was concerned about what would happen if there was a fire alarm. Jane will obviously feedback the comments to the nurses, but unfortunately did not have the patient contact details to discuss with her further. Jane explained that we used to have blankets for patients to cover themselves, but had to remove them due to infection control and now bed roll is used. Barry suggested a gown being available in an emergency. This could be hung up near to the bed. Jane agreed that this would be a solution and she will look into this. **Action:Jane**

Nigel noted that the Patient list size has remained almost static since the last survey. Jane indicated that there had been no big builds in Heanor recently so this has helped to keep the list size manageable.

Nigel said that with the reducing number of PPG Members taking part in the Survey it was noticeable within his analysis that the number of hours undertaken by PPG Members during the Survey week had dropped considerable from previous years. This made it very difficult to have two PPG Members covering each session and on one occasion no coverage.

Jane thanked all of the members on behalf of the Practice for their hard work with the survey which is much appreciated.

8. Items from members

<u>Leslie had asked for an update on additional GPs for the Park Surgery</u> - Nigel explained that the group have been kept updated on recruitment in the past and that they are aware of a national shortage of GPs. He asked Jane to comment on current plans.

Jane explained that the Practice had taken into account the difficulty neighbouring practices had in recruiting GPs along with the NHS England's 10 High Impact Actions in which they are encouraging practices to broaden the workforce in order to reduce demand for GP time, and connect the patient directly with the most appropriate professional. A decision had been made to employ an Advanced Nurse Practitioner. We do not have one at present and our current nurses do not treat acute illnesses. However, after three attempts at recruitment only one unsuitable candidate had applied. We, therefore, reviewed the appointments, particularly same day requests and it highlighted that many consultations relate to medicines, medication reviews and queries. On top of this much time is spent on reviewing medication following hospital admissions, etc. It was agreed that a Practice Pharmacist would greatly reduce the workload for GPs releasing additional time to deal with acute illness and long term conditions. We have expressed an interest in a pharmacist for three days per week and are hoping to proceed with this shortly.

Opening of new Heanor Hospital. Nigel indicated due to a late finish at work he had been unable to attend the event but invited John to update members. John reported on his attendance at the opening ceremony. He had the chance to be shown around the premises and was very impressed with the building. Jane had also attended and agreed with John. She was particularly impressed with how the new building is joined seamlessly to the old one.

9. Items from Practice Manager

Jane explained that eight Amber Valley practices are working together to form a company to provide extended access at two hubs (Ripley and Heanor) up until 8 pm each evening and weekends. This will be staffed with GPs, Nurses, HCAs, etc. and will be routine work including long term conditions as well as acute illness. It is not urgent work and patients will be able to pre-book. The additional appointments offered should help considerably with the workload of the local GP practices. Leslie asked if this will affect the GPs in the Practice who are already overworked. Jane explained that interested GPs will be able to access additional work if they wish, but this will be a choice. There will be no obligation.

10. <u>Items from Dr Tooley</u>

No in attendance but nothing to report.

11. Date and Time of next meeting

Joint meeting with the two Heanor Practices on Wednesday 13 June 2018.

12. <u>Close</u>

Nigel thanked the group for their support, help and enthusiasm during his time as Chair. Nigel was thanked by the group and practice for his excellent work as Chair.