

Westgate Practice

Patient Participation Group (PPG)

Minutes of Meeting Friday 25th November 2022

1.30 – 3.00pm - Boardroom

Chair: Sheila Espin

Present	Apologies
<p>Chair – Sheila Espin (SE)</p> <ul style="list-style-type: none">• Prof/Dr Helen Stokes-Lampard (Dr H)• Sara Allen (SA) – Patient Liaison Officer/Minutes• Tim Boynes (TB)• Sue Charles (SC)• David Dundas (DD)• Margaret Harding (MH)• Brian Mills (BM)• Pamela Playle Mitchell (PPM)• Judith Plimmer (JP)	<ul style="list-style-type: none">• Betty Bradbury (BB)• Sam Ellicott (SEI)• Pamela Black (PB)

Agenda Item		Actions/By who
1.	<p>Welcome & Apologies</p> <p>The meeting was chaired by Sheila Espin (Chair). There were eight PPG members in attendance together with Prof Helen Stokes Lampard as GP representative and Sara Allen (Patient Liaison Officer/minute taker) who were all welcomed to the meeting by SE; three apologies were noted.</p>	
2.	<p>Minutes & actions/feedback from previous meeting (SE)</p> <p>Pg. 6 item 5 – DD asked whether a letter had been sent to Lichfield District Council; SE stated that she had met with Cllr McMahon who suggested a letter be sent to Cllr Eadie. SE had done this but received no response. DD suggested</p>	

	<p>that we write again to him expressing the view that there should be no further house building in Lichfield until more Health Facilities are provided. Dr H informed the meeting that the practice had asked the ICB for advice around the procedure to follow if we wanted to close our list as we feel we are nearing safe capacity of patients. BM felt that we should write again to Cllr Eadie. DD suggested a privately funded build; Dr H referred to a previous discussion re this, would require a very large mortgage to fund it, partners would not take this on.</p> <p>PPM stated that there had not been an increase in the budget since 2004 for buildings; referring to our recent letter from MP/Minister of Health she felt we had received the expected response. MH raised the suggestion from Andy Hadley (ICB) that current unused spaces are regenerated for use e.g. at Langton Practice. SE suggested that we refer back to Andy Hadley for an absolute plan. DD reiterated that the council need to reserve space for a health facility before all the land is used.</p> <p>SE reviewed the response received from Mr Fabricant on 20th October 2022 to the recent PPG letter. A copy has been forwarded to Andy Hadley at ICB. Suggested that some of the phrases are used in a further letter to Cllr Eadie, DD happy to support SE with constructing a letter.</p>	<p>SE/DD</p>
<p>3.</p>	<p>Update of recent practice changes in day to day operating: covid-19 booster and ‘flu vaccination update (Dr. H/SA)</p> <p>Dr H gave an update on Shenstone Branch Surgery; we did have some initial issues with blood/specimen collections which is now sorted. The surgery is open from 8.00 – 5.30 M/W/Th/Fr and 08.00 – 1.00 on Tuesdays. Dr H also read out a letter received from the MP Mr Pincher who was asking about the current arrangements at Shenstone; the practice have responded to him.</p> <p>Dr H presented information about the practice phone lines and a comparative survey of calls in August 2021 & in August 2022. Overall Aug 22 v Aug 21 calls were up by 9.8%; requests for blood tests up 26%; appointment requests up 5.6%. The system received 25,492 calls in, over 1,000 on working days. Outgoing calls dropped</p>	

slightly, 7.7%, but this was almost certainly due to more face to face appointments.

Covid/Flu Vaccinations:

Dr H reported that nationally the uptake of boosters is down, however the Lichfield PCN are at present top of the regions table for the autumn booster uptake.

SA gave an update on 'flu/covid vaccination clinics, 5 full days have been completed, with the last clinic on Saturday 19th November. Over 6,000 flu vaccinations and around 6,500 Covid vaccines were administered, using Moderna for the first 2 clinics and Pfizer for the final 3 clinics. Many patients did choose to have both vaccines at the same time. We will be continuing to do some smaller sessions for covid vaccines during surgery hours over the next few weeks and to offer 'flu vaccines at opportune times.

Dr. H thanked those members who had helped out at the clinics.

MH spoke about the fact that there is not the facility of a covid 'walk in' clinic in Lichfield which was raised at district. Also that the online options have a lack of knowledge of the facilities available e.g. Parking at Boley Park.

Dr H commented that it is more difficult to plan clinics if patients are having vaccines elsewhere and that supplies have been erratic.

PPM reported that there had been some excellent feedback at our clinics when she had been supporting.

Accelerated Access:

Dr H spoke about changes that will enable all patients to have access to their records, although this has been delayed for at least a month and promised for the past 3 years. Deemed to be a good thing for most people but some concern for some specific groups for whom it may not be in their best interests. Some discussion that it may also lead to an increase in complaints. **MH** mentioned the length of time that is taken by the Ombudsman in investigating a complaint i.e. 12 – 18 months.

4.	<p>Latest Practice Workload Statistics/Complaints/Compliments (SA)</p> <p><u>Practice Stats September/October 2022:</u></p> <p>Stats are for 2 months so have been compared to the previous 2 months:</p> <ul style="list-style-type: none"> ➤ Phlebotomist appointments – 2858 (574↑) ➤ Face to Face ANP appointments – 1361 (189 ↑) ➤ Medication Reviews – 2627 (45 ↑) ➤ Telephone Consultations – 6741 (18 ↓) ➤ Face to Face GP appointments – 1890 (32 ↓) ➤ Face to Face Practice Nurse appointments – 2796 (185 ↓) ➤ Diabetic Reviews – 235 (121 ↓) ➤ Smear Tests – 293 (23 ↓) ➤ Asthma Reviews – 211 (8 ↓) <p>Some areas where no's are down but overall still up by 421 overall.</p> <p><u>Complaints September/October: Total = 39 (29 in previous 2/12)</u></p> <p><u>Total No. of Formal Complaints = 23 (17 in previous 2/12)</u> <u>Total No. of Informal Complaints = 16 (12 in previous 2/12)</u></p> <p><u>Topic of Complaint included:</u></p> <ul style="list-style-type: none"> ➤ Appointment availability/length ➤ Prescription Issues ➤ Clinical Treatment ➤ Delay in Failure to Refer ➤ Inaccurate/incorrect records ➤ Staff attitude/behaviour/values ➤ Communications <p>5 letters were sent to patients during this 2 month period with regards to addressing their poor behaviour/attitude. 1 patient was deregistered from the practice.</p>	
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5.	<p>Update re Local Council Developments and MP Letter (DD/PB)</p> <p>Previously discussed under item 2. DD happy to support SE with constructing a letter to Councillor Eadie.</p>	SE/DD

<p>6.</p>	<p>Update re ICB (MH)</p> <p>MH informed the group that she had been accepted to join the patient panel for the Integrated Care Board (ICB). JP asked about the ICB; Dr H explained that the ICB has incorporated several CCG's so is now a large organisation.</p> <p>MH also informed the group that she is part of the University Hospitals Birmingham (UHB) patient experience group. She had attended a good presentation on virtual wards for respiratory patient's e.g. those with long standing lung conditions such as COPD, which are consultant led but enable the patient to remain at home, and also a Dementia and Dementia awareness presentation. Dr. H informed the group that 'hospital at home' can be included in government figures.</p> <p>MH stated that has been asked to join a focus group for Good Hope around consultant letters and their distribution.</p> <p>MH also informed the group about an initiative called Compassionate Care volunteers at Good Hope who are helping to support with End of Life Care in the hospital for patients and their families.</p>	
<p>7.</p>	<p><u>Mental Health/Emotional Wellbeing Provision and Links with outside agencies (TB)</u></p> <p>TB raised the question of what services are available for Mental Health support in the area. Dr H firstly gave information about services available for staff which include NHS support and that the practice will pay for GP coaching if needed. Patients are able to self-refer to the Well Being service which mainly involves talking therapies. Then there is the facility for referral to NHS mental health services. GP's are aware of different resources available but agree that there is a paucity of services generally.</p> <p>Dr H informed the group about the role of the Social Prescriber who is able to connect patients to relevant services that may support them in the community.</p> <p>TB commented that it is a large area with different services available.</p>	

	<p>Dr. H also mentioned the Care Coordinators role who also support certain vulnerable groups in navigating care, we also expect to get another role 'Health Coaches' coming on board soon.</p> <p>TB talked about his previous experience of suicide cases and also that often complaints are made which highlight mental health issues and maybe a cry for help.</p> <p>BM spoke about the University of 3rd Age (U3A) in Lichfield which offers a range of activities. SA will ensure the Social Prescriber is aware of the group.</p> <p>MH spoke about the new 'Warm Spaces' Initiative for the Lichfield area.</p>	
8.	<p><u>AOB</u></p> <p>SC raised concerns about the safety of using telephone calls for consultations. Dr. H responded that patients can ask for a face to face consultation. There is always a concern diagnosing over the phone with specific symptoms such as rashes; lumps; bleeding. Also where coercive relationships maybe at play. Some people prefer phone calls such as those with mental health issues and those with jobs, young children.</p> <p>Dr. H spoke about the 4 senses (sight; sound; touch; smell) used in consultations, and then the '6th sense' which raises your awareness that there may be 'something else going on'.</p> <p>SC was concerned that elderly people struggle to attend 'on the day' appointments where they need to get transport arranged to get to the practice.</p> <p>Dr H agreed there may be a need for Face to Face and 'allow pre book alerts'.</p> <p>MH stated that people are still struggling to phone in at specific times and that they are also seeing a lot of different GP's.</p> <p>Dr H commented that still experiencing too much demand and not enough supply.</p>	

	<p>SE asked about booking an appointment ahead if the GP says that they want to see you again for example when blood tests have been done. Dr H said that this can be difficult as may not know when the results will be available, continuity is challenging. Dr H explained that blood results are checked daily by the admin. GP they will normally contact the patient if necessary advising on the next steps. This may well not be the same GP that the patient saw initially.</p> <p>DD raised the need for energy saving devices in the practice such as thermostats that function, meeting room very warm thermostats not working.</p> <p>Dr H informed the group that she had recently delivered the James McKenzie Lecture at the Royal College of GP's conference which is available online. SA to send link James Mackenzie Lecture 2022 - YouTube</p> <p>SE closed the meeting at 3pm and wished everyone a Merry Christmas and Happy New Year.</p>	
9.	<p><u>Date & time of the next meeting:</u></p> <p>The first meeting for the year 2023 will be held on Friday 17th February 2022 at 1.30. Decision for the meeting to be via 'Teams' or 'face to face' to be made nearer to the date.</p>	