# Dawley Medical Practice Patient Forum

# Minutes PF Meeting 09 December 2023

**Attendees:** Patrick Spreadbury (PJS) Chair, Lynn Pickavance (LP) Vice-Chair, Neil Clarke (NC), Diana Clarke (DC), Brian Churm (BC), Maggie Hunt (MH), Kate Ballinger KB) Denise Hallett(DH) Practice Manager, Katie Smith (KS) Practice Admin.

**Welcome**: PS welcomed new member Kate Ballinger, joining Dawley MP from another local practice.

Apologies: David Hunt, Dianna Young, Paul & Jenny Carter

PS informed the meeting that due to family commitments Simon Meadows had regrettably had to withdraw from the group.

# Minutes and Actions of Meeting June 2023

The minutes of the meeting 3 June 2023 were accepted as true record of the meeting.

# Agenda Item 4: Practice Update

DH presented an update on developments at the Practice since the September 2023 meeting:-

#### Staffing :-

DH reported that the Practice had faced another challenging period but there was some good news as 2023 draws to a close as Dr Bufton had now completed her treatment and was looking forward to returning once she had fully recovered. She wanted to thank everyone for their kind thoughts and good wishes during her absence. Dr Lovett had recently returned from her maternity leave and Drs. Oluchi Aschiegbu and John Davies had agreed to continue to provide locum cover during Dr Bufton's absence and phased return.

The Practice has welcomed Sue Walsh who has joined the in-house clinical pharmacy team as a technician. She will be working across the three primary care network practices supporting the pharmacists, patients, and admin staff.

DH informed the meeting that the Practice had now started to take student pharmacy technicians and Practice Nurses who would be gaining practical experience as well as

helping with the Practice workload. The Practice will also be looking at supporting student paramedics.

It was reported that the Practice had lost part time staff in admin, including the two male colleagues, as they found the job to be far busier and more stressful than expected despite being given this information at recruitment stage. However, one former member of the admin staff had returned after having left to take up a post at a local veterinary practice.

## New Phone system: -

DH was able to report that the 'Go Live Day' would be Thursday 21st December. The provider the Practice had chosen (X-on) covers almost 40% of the phone systems for UK GP practices. The new set up is a cloud-based system which means an increase in the number of phone lines in and out of the practice. The new system will have a virtual call queue, where callers can request a call back from the Practice, hang up without losing their place in the queue (which means no more hanging on the phone) and once they reach the front of the call queue the Practice calls them back. DH informed the group that a text reminder would be going out to patients the day before and the change-over was also included in the current Newsletter. Patients will need to listen carefully to the new messages and options especially regarding the virtual call queue. DH hoped that the change-over would be hiccup free but patients would be urged to be patient with call handlers in as they get to grips with the system.

#### Facebook: -

DH reported that Katie Smith (IT/Admin) had now managed to set up a Practice Facebook profile which does not allow for comments but that this might be changed once staff have got to grips with the media page. There would be lots of local and national information to post and it also would be possible to promote the Patient Forum group and post PF meeting minutes too. The FB page would be launched later in December or early January together with our 12 month communication plan.

## The Jayex screens:-

Screens in the ground and first floor waiting rooms are now both working and reception staff have updated the information on them. PS asked if it would now be possible to supress radio when Jayex displaying information with audio and was assured that this would now be the default setting.

#### Access to medical records: -

DH confirmed that the Practice had hit the 'go live' button on the Govt requested date of 1<sup>st</sup> October 2023, so patients who had not opted out of this feature could access their patient record, including free text comments, if they had already downloaded the Patient Access App or the NHS App. DH outlined the benefits for patients to have downloaded the NHS App, Patient Access and similar Apps to view their medical records (problems (diagnoses), medications, allergies, consultations, results (including GP comments), documents, appointments, immunisations). PS &LP agreed

to assist with another round of patient survey sessions and to encourage patients to download one of the apps.

# Refurb of Reception:-

DH informed the meeting that, unfortunately, discussions on the refurb of Reception, as well as clinical rooms, would have to be placed on hold until Dr Bufton returns. DH explained that Dr Bufton was the senior partner and she would have to be involved as talks would involve the landlords, Assura, too.

#### **Enhanced Access: -**

DH informed the meeting that it can still not get data re: enhanced access appointments from GPAD, but confirmed the appointments are utilised, even though the Practice still registered a number of DNAs for the nurse face to face appointments. She confirmed that the Practice did ring patients and remind them of their appointment and tried to get as much information as possible from the patients over the phone, for example, if it was a long-term condition review. She reiterated that the new phone system might help with this as there could be a cancellation line open for patients during our enhanced access clinics.

#### Site Maintenance:-

PS reported that he was still waiting for a response from the Clerk to Gt Dawley Council on one of the Community Action Teams possibly being drafted in to clear the grass verges bordering the rear of the patient parking area. MH added that the CAT is in great demand locally. PS also wished to clarify the responsibility of the local council for the upkeep of the car parking plot as it had now taken over the lease from Assura for the whole car parking area,outside of the surgery car park spaces, and wondered if that might cover replacing the blue fencing that had now fallen into disrepair.

#### Action:

PS & MH to contact Clerk to GT Dawley Council re Community Action Team and Council's responsibilities re the car park perimeter.

DH informed the group that the gentleman who had volunteered to attend to the shrubs along King Street and tidy the garden area in the staff car park was no longer able to do so due to ill health. KB mentioned that there were a number of organisations who were often looking for small projects for volunteers, such as the Probationary Service. She would share contact details with DH.

#### Action:

KB to provide DH with details of organisations with volunteer projects

# Agenda Item 5:

# **Data Privacy Notice:-**

A copy of the final draft of the Practice Data Privacy Policy for the Patient Forum had been shared with PF members for perusal prior to the meeting for any comments. As no comments had been received it PS proposed that the Data Privacy Policy be accepted to be shared with any new members joining the group. It was agreed that the policy would be amended if required at some point in the future.



# Agenda Item 6: Appointments: -

DH confirmed that the Practice was continuing to offer appointments via telephone, in person in the surgery and via online/digital platforms. The Practice would be looking to extend the online booking of appointments for patients needing annual reviews, medication reviews, screening etc.

DH reported that, since the introduction of the Urgent Care Hub (UCH), the Practice continued to have appointments left at the end of most days and had been making use of the Government funding for additional roles such as paramedics in GP Practices for acute/urgent care work.

DH explained that DMP was not looking to go completely 'total triage' as some Practices had done and would continue to follow the Government's modern general practice for patients (see NHS General Practice for Patients diagram below).



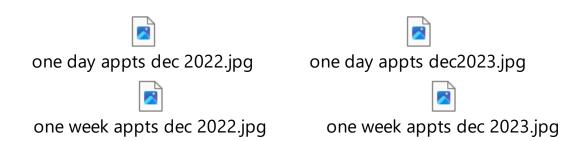
# Modern General Practice for Patients.jpg

It was emphasised that not all patients have access to digital means and would prefer to speak with a person, but also appreciate that some patients work long hours and may prefer to send in an online consult request outside of our normal opening hours. Online consults are gradually increasing month on month – June 2022 registered 13 requests, June 2023 50 requests and Oct/Nov 2023 in the 80s.

BC had noticed the most recent figure for appointments had shown a considerable increase on the previous month, Patient increase is 3.4%, whereas appointment availability has increased 42% since October. He was keen to know where these patients might have gone for medical assistance if the UCH had not been up and running and providing a considerable number of additional appointments. DH was

unable to give a definitive answer but presumed they would have had to seek assistance from the other options available, such as 111 and A&E. BC wondered if figures were available from the A&E department showing the number of patients per month per medical practice. KB said she would investigate.

DH shared some data on take-up, DNAs, type and date of appointment for one day in December 2022 and the nearest similar date in December 2023 and similarly for a week during the same periods. These show the increase in the number of appointments offered from 2022 to 2023. See attached charts.



# Agenda item 7:

#### **GPIP communications Events Calendar:-**

DH wished to share with the group the plan to set up an Events Calendar as part of GPIP. The idea is to integrate all communications so they have more impact – all comms on website, waiting room notice boards and Jayex screens, patient newsletter, Facebook would all follow the same monthly themes. This could also include local information. The aim would also be to include patients in the themes- such as exercise and wellness groups where posting the progress of the staff and patients could be posted in the waiting room linked perhaps to set targets and donation total for a local charity. Patients who might like to go to the weekly Telford park run but not alone might like to have a member of staff or another patient join them for encouragement, or patients who are military veterans getting involved in October when the communication will focus on supporting our veterans. Calendar of events to follow,

## Agenda Item 8:

#### Flu/covid clinic 7 October 2023:-

DH reported that the Practice staff gave more than a 1,000 vaccinations (covid and flu) at the Super Saturday vaccination clinic on 7<sup>th</sup>.

The final total raised by the PF on the cake stall was £251.74. Agreement from the PF was sought by the Practice to go ahead and use the money towards purchasing more waiting room chairs with arms to replace the current waiting room chairs to be located in the 1<sup>st</sup> floor waiting room. There was no dissent.

Teams from the practice had also been out and about vaccinating the housebound patients and those resident in local care homes.

# Agenda Item 9:

## Practice Patients' Handbook:-

Copies of the final version of the Practice Patients' Handbook were shared with members. Members wished to thank Sue Hodgkins (admin) for her hard work in pulling together all the information and suggestions from members to produce a comprehensive guide to the Practice for new and old patients. A copy of the handbook would be available on the Practice webpage and on DMP Facebook pages too.

With regard to the list of services listed in the Handbook by the Practice, PS enquired about the type of ear irrigation for ear wax removal offered on the NHS at DMP and how it differed from that offered as a private patient by local opticians. DH explained that the Practice offers ear wax removal using a warm water pressure system which is not suitable for all patients due to small risk of infection and damage to the ear. The system offered by a national optometry chain uses a more sophisticated safer suction system, but at a cost of £50 per ear for patients complaining of hearing loss possibly due to ear wax. Not all practices offer an ear irrigation service, and those patients would have to seek private treatment. The ear irrigation contract for Practices is one that they can opt in or out of, and the Practice currently opts in to provide this service to our patients, but this is dependant on working equipment (purchased by the Practice) and Practice staff being trained in the procedure.

# Agenda Item 10:

#### Winter Resilience Plans 2023/24:-

DH reminded members that the ICS is not providing any extra money to support Practices through the much busier winter period. Members were reminded of the NHS' 'Think which Service' campaign urging patients to 'Think' before contacting their GP or attending A&E and look at what other health services there are available. Full details are available on: <a href="https://www.thinkwhichservice.co.uk">www.thinkwhichservice.co.uk</a>



Think Which Service LeafletDec 2023.jpg

# Agenda Item 11:

# Hospital Transformation Scheme- HTP (formerly Future Fit) update:-

LP outlined some of the work she, as a volunteer and member of Patient and Carer Experience panel (PACE) had been doing at Shropshire, Telford & Wrekin Hospital Trust SaTH which involved .

PS/LP updated the group on the new Community Diagnostic Centre, now open at Hollinswood House on Stafford Park, where new services including x-rays, scans and phlebotomy are now available. There is ample free parking available. Phlebotomy services are still available at PRH for non-urgent, warfarin and other types of blood tests. Patients are, however, being urged to use the CDC if possible.

As the Community Engagement Facilitator for SaTH PS asked new member KB if she would give members an update on all the changes taking place at PRH and RSH as part of the HTP. She explained to the group that the changes taking place, especially

relating to A&E services, with now new much clearer titles within SaTH, were not always as had incorrectly been presented in the media and by local officials. Details about changes to the refurbished and expanded main entrance to PRH were given as were details about the different services to be situated on the PRH and RSH sites. KB explained the Academy scheme which involved members being invited to take part in tours round different departments of the hospital. NC asked if such a tour could be arranged for the PF members at some time later in the year.PS suggested this could possibly be arranged as an' Extraordinary Meeting' of the PF. KB suggested too that it could be very useful and informative for the group to invite Dr Ed Rysdale, Consultant in Emergency Medicine at SaTH and supporter of the current HTP, to come and talk to members of the Practice and the PF.

Action: PS has shared :Independent Reconfiguration Panel Report: Shrewsbury and Telford Hospitals Transformation Programme - GOV.UK (www.gov.uk)

# Agenda Item 12: AOB

DH shared with the group that the Practice had received lots of compliments about now being able to get appointments on the day, staff caring attitude and going above & beyond (transporting sick patients to hospital when extremely long ambulance delays) and also lots of compliments from new patients and for end-of-life care.

DH reported that the Practice had been approached by Healthwatch Telford & Wrekin to send out an MJOG with the Health Watch GP Survey link as responses from Dawley patients are below those compared with other Practices, and this had been sent out by the Practice on the same day.

DH informed the group that the Practice with be taking part in the Medical Examiner Pilot scheme. This will become mandatory in April 2024 for all Practices. The ME service will be overseeing all non-coroner deaths in the community. This means that the Practice would be required to notify the ME service of all deaths at home/care home that are not being referred to coroner (currently the Practice notifies the Registrar). The ME will contact the patients next of kin to explain the cause of death, discuss the patient's care and treatment and answer any questions they may have. PF members were asked to feedback any comments to the Practice, as these will then be taken back to the relevant committee for further discussion.

MH raised a question about the procedure for obtaining emergency antibiotics out of normal hours. DH explained that the patient would have to contact NHS111 who would then direct the patient's request to the appropriate service – NHS111, GP Practice or pharmacy. DH stressed that it was imperative that patients should order any medication at least 7 days before they ran out to ensure they had sufficient to cover weekends and bank holidays.

There being no further business, the meeting closed at 11.25 am.

Notification of the next meeting in March/April 2024 to be shared with members once date agreed.

Patient Forum Meeting 9 December 2023 Minutes