# UPTON SURGERY PATIENT PARTICIPATION GROUP Monday 21 May 2018 MINUTES

Present: Patient Representative Members: Chair: Rebecca Maund (RM), Jo

Daniell (JD), Dawn Patterson (DP), David Smallwood (DS), Lizzy

Hughes (LH), Marie Griffiths (MG), Ruth Wain (RW),

Surgery representatives: Dr G Wetmore (GW), Ben Kent (BK) and

Lysa Ball (LB) note taker

1	Analogies: Janny McGowran, Janet Pactick, Chric Milno							
<u> </u>	Apologies: Jenny McGowran, Janet Bastick, Chris Milne							
	Rebecca Maund our New Chair thanked everyone to attending today's meeting.							
2	Minutes of previous meeting 5 March 2017: These have been agreed	LB						
_	and will be published on the website.							
3	Matters Arising:							
	Hanley Castle High School Art Award – This took place on Monday 9 <sup>th</sup> April 2018, a photograph of the event was emailed with the Agenda. JD							
	will be liaising with LH for this year's pre-selection date. JD gave a brief update on how this award came about and how it has helped strengthen							
	our links with the community.							
	<b>Communication</b> – Discussion took place regarding developing an action plan which will be a large piece of work and MG has agreed to do this. The							
	purpose of this is to make patients more of aware of surgery services. It							
	was agreed that the communication is consistent as it is an important							
	representation of the surgery. LB confirmed she had made contact with							
	Upton News on behalf of Jo Dodd and they were going to publish							
	information about our new Age UK service.							
	Access Screens – Egton will update us shortly with the usage of the new							
	screens that were installed back in February.							
	Dispensary Bell – Confirmed this has broken and been removed.							
4	Riverboats Centre – being well used and still run by the school.							
4	<b>EVIE:</b> This new system will enable more information sharing as at the moment different clinical systems are being used throughout the County in							
	GP surgeries (all on the same system) and the health and care trust							
	(District nurses/Physios/Occ therapists). This has been installed on Dr							
	Havercroft's computer as a test. It does work but no information to see at							
	the moment.							
5	Care Navigator: Both GW and BK attended a Best Practice							
	Conference in 2017 which gave different ideas from around the							
	Country on this topic. Our main thoughts were "how patients can							
	get what they want quickly and easily without necessarily involving a							
	GP". Worcestershire have decided to go with Health Care							
	Navigation and are in the process of training all our receptionists,							
	admin team and dispensary staff in this. There will be face-to-face							
	training and on-line training. Philippa White is leading on the training							
	of all GP practice staff across the County. The training for our staff							
	will take place in June and we are going to launch in July 2018.							
	There will be a template available for staff to use when speaking to							
	patients which we will continue to audit. To start with there will be no							
	alteration to the Triage system between 8am and 9am.							
	anoration to the mage system between ball and ball.							

We will promote this via a big launch using our newsletter, website, surgery notice boards and have flyers available. JPB will be recording a welcome message to greet patients when they ring the Surgery and inform them of the phone options. We are already doing a lot of care navigation here at the surgery and would like to develop this role further. We would like to stop unnecessary interruptions to GP consultations and some items/requests can be dealt with by the reception team and does not need GP input for example giving of normal test results, information regarding "red eye" symptoms. It is felt that this new way of working could stop 15% of unnecessary GP appointments. Concerns from the group were raised concerning how our patients would welcome this new venture. DS felt that some of the language/jargon used will be confusing for our patients. The group asked for clarification as to the difference between a pharmacy and a dispensary. When patients advised to speak to a pharmacist for advice they would need to make it clear that it would be the pharmacist at the local chemist and not BK here at the surgery. It was suggested by the group that we consider using facebook as a way of promoting the Health Care Navigator and also would reach the younger generation. If anyone has further questions please email them to LB and GW/BK will be happy to reply. Tea and Talk: Postponed until July meeting SWPPG Network Meetings: The SWPPG has been disbanded and the CCG is proposing some county wide replacement, but not in the same format. This is to fall in to line with the effective merger of the CCGs. CM will try to establish what the replacement looks like and then the PPG can review whether we should be part of it, perhaps at the July meeting. Upton Surgery update and Friends and Family Test Report for February 2018 to April 2018 (emailed with Agenda) - BK expanded on the PCE contract. We are now entering year four, there is a big emphasis on quality referrals for first out patient appointments and follow up care provided by the acute trust. This will have to be carried out at a neighbourhood level (Upton, Pershore and Abbottswood) and will involve GPs attending review meetings at all three sites. The lead GP for Upton is Dr Havercroft. Compliments/Complaints/Suggestions: A total of 19 compliments have been received (13 written, 2 via the website and 4 verbal). A suggestion had been received regarding practice nurse telephone appointments which we are introducing. Patient issues and complaints totalled 13. The first complaint was regarding the recent television coverage of prostate cancer and our PSA protocol. Since this we have made PSA leaflets available for patient enquiries. The second complaint was regarding a patient who felt the wrong course of treatment had been taken by another GP and was disappointed that the wait to see preferred doctor was too long. 10 AOB: Compliment received from one member of PPG regarding our Recorded LB prescription delivery service. • DS – feels "Mr" is misleading as to BK's qualification and would like

•	BK asked for confirmation on number of GP's to attend each meeting – small discussion took place regarding Terms of Reference. Agreed that 1 GP and a manager would suffice. Agreed JM should stay as a member of the group although she has been unable to attend all four meetings this year. LB to send out ToR for everyone to review.  Breast Screening – Following recent events BK confirmed that we had not received an influx of telephone calls and our reception team have the direct national helpline to give to any concerned patients.  New Hanley Castle High School members – they will join us at our July meeting.  CQC - RM congratulated the surgery team on behalf of the PPG for an excellent CQC visit and our letter from Jeremy Hunt.	LB to send
Date ar	nd Time of Next Meeting – 16 July 2018 at 6.30pm	

#### **PRACTICE UPDATE MAY 2018**

# **CQC Inspection February 2018**

We have been mentioned in some of the CCG updates for our Outstanding CQC rating and there have been two write up's in the local papers (Worcester Evening News and Malvern Gazette). Again something we have all worked hard for and make us immensely proud of the Upton team.

We have also had a personally signed letter from Jeremy Hunt to congratulate us. **UMST** 

The surgery is very grateful to the friends for their continued support. For the period March/April 2018 a total of £1325.97 has been received. In 2018 we have been able to purchase an ECG Machine, Coagucheck machines, new arrival screens and our New Age UK service.

# **Operational Issues:**

- Unfortunately the GPAF rota contract ended on February 5<sup>th</sup>. A new model
  was required by NHS England. Our patients now will need to attend Evesham
  or Malvern for the addition evening or Saturday service. It's a double blow for
  us strategically as it means less local appointments from this site and an
  income loss.
- We managed to get all our QOF target points, it is only extremely hard work over the year that gets that result. Not many practices manage to achieve this and CQC were impressed with our previous year's full house so it is really good to report we have achieved it again this year.
- We have a new surgery van. The old blue Polo who has served us well over the years but it met with an unfortunate entanglement with a reversing lorry before xmas so has been replaced with a shiny new white van.
- PCE contract: This is a contract the CCG offer to practices with funding that is a way of earning back some of the income that was withdrawn in our change from PMS contract to basic GMS. The new contract will for 2 years but require a lot of additional work for GPs. The schemes to participate in and deliver on need tracking and performance reporting and meetings with other practices. The focus is on referral management, medication savings, reducing emergency admissions and OPA follow ups. The plans have been submitted which take a lot of time to work up with our neighbouring 2 Pershore practices. Only plans that work 'at scale' are being considered by the CCG from now on. Due to the time we lose travelling to one another for meetings (especially at the moment with the on-going road works across the bridge to Pershore) we are going to bid for some 'virtual meeting' technology that works like face time to help save valuable clinicians time.

# Care navigation update:

Dates for our staff training here at the surgery are scheduled for June 20<sup>th,</sup> 21<sup>st</sup> 28th. We are aiming for a soft and steady go live July 1<sup>st</sup>. The FAQs below are going on our web site shortly.

**Patient Frequently Asked Questions** 

Why does the Healthcare Navigator ask me what's wrong?

#### It is not a case of the Healthcare Navigators being nosy!

The Healthcare Navigator staff are members of the practice team and it has been agreed they should ask patients 'why they need to be seen'. The team are trained to ask certain questions in order to ensure that you receive:

- The most appropriate care
- From the most appropriate person
- At the most appropriate time.

# Healthcare Navigators are asked by the Doctors at the practice to collect brief information from patients

- To ensure that all patients receive the appropriate level of care
- To direct patients to see the most appropriate person to meet their needs.

### Why does the Healthcare Navigator need to know why I want an appointment?

This is because they have a number of alternative types of appointments available to them, and they need to offer you the most appropriate appointment to deal with your problem. The most appropriate appointment may be with the GP for example, or perhaps with another member of the practice team.

Sometimes a longer appointment is needed for certain lengthy procedures, and also some clinics are only held on certain days due to practice staff availability.

# Why are we asked to make an appointment to see a doctor for certain repeat medications?

Regular and careful monitoring of all prescribed medicines is essential, for example, antidepressants, blood pressure medications, hormone replacement therapy and oral contraception.

# Healthcare Navigation staff, like all members of the team are bound by confidentiality rules;

- Any information given by you is treated in the strictest confidence
- The practice takes any breach of confidentiality very seriously and will deal with it accordingly
- However if you feel an issue is very private and do not wish to say what this is then we will respect your decision.
- We are encouraging our staff to take time to look at the displays in the waiting room. The start of the journey is knowing what we have on site and where to guide patients right here in the surgery. There are displays on local activity opportunities, cares information and support services, information on pregnancy/breast feeding/domestic violence and child health. There are very good Cancer leaflets displayed on the wall by dispensary and a varied collection of leaflets on the carousel near to reception. There are various information boards as well as the one in nurse wait area.
- To support the self-care and care navigation work a staff newsletter will be produced. Again all staff are being encouraged to pay a visit to the groups that attend the site to see what they offer and what support is available to our patients so that you can direct patients to them.

**Worcestershire Telecare Event:** This took place in the surgery from 9.30am to 2.30pm on Tuesday 27<sup>th</sup> March 2018. The event was good and several patients went over to have a chat about different possibilities of assistive tech. Smarter technologies can help patients to live independently; and provide reassurance when living at home with support.

- Mobility, dexterity and fear of falls
- Reassurance whilst out and about
- Forgetfulness or confusion
- Supporting those living with dementia
- Supporting learning disabilities
- · Anxiety from being alone
- Epilepsy or seizures
- Home security
- Declining hearing and vision

**Age UK service from site update:** This new service started on 9<sup>th</sup> April 2018; and is being very well received by our patients.

To confirm the service:

- 8 hours per week x 52 weeks/2 sessions per week
- Confirmed Monday and Thursday morning sessions Hanley Room
- For April drop in sessions only
- From May appointment system for one session
- A referral diary is available in Reception so that we can keep a list of patients who would like to be contacted for an appointment

#### Staffing update

- Natasha Morris will be joining our team filling the new ANP post from 18<sup>th</sup> June 2018.
- Big welcome back to Tracey Brunsdon in dispensary who returned in April as
  Dispensary Assistant and Dot Smith retired as Dispenser at the end of March,
  she was with us for 11 years. We hope she enjoys some 'me time' and time
  to relax a bit.
- Sadly Louise Tweney has resigned to support her growing retail business with her husband, we wish her well but will really miss her growing expertise with her role here at Upton. Her last working day will be 6<sup>th</sup> June 2018. Kira Mortelmans will join us as Assistant Practice Manager in late June/early July from her current role as Directorate Support Manager at Worcestershire Royal Hospital.
- Sarah Edwards joined our reception team.

### **GP** update

 Dr Barrell will be reducing his sessions from the beginning of July and will stop working on a Wednesday morning. After Christmas he will reduce again by which time we hope to have employed a clinical pharmacist to help with the increasing number of medication queries and hopefully bring some other skills to the team.

#### General:

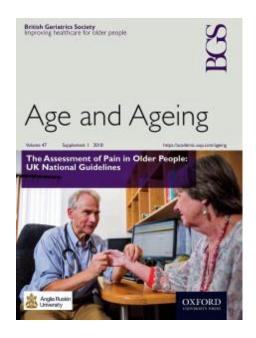
- Prescription charges went up to £8.80 per item from April 1st.
- **E-referrals**: well done to everyone, Upton Surgery is in the top 6 in the County for our e-referrals.

### **GDPR: Data Protection Act:**

- The Data Protection Act 1998 will be replaced by The General Data Protection Regulations (GDPR) from 25<sup>th</sup> May 2018. Louise and Ben are working through what this will mean and what will be different going forward. This means reviewing all of our Data Protection policies and reviewing what data we hold as an organisation and how we process this data. Each department has been asked to review the patient and staff data held in the department so that we can ensure this is appropriate. A power point presentation will be sent to all staff via email very soon to familiarise themselves with the upcoming changes.
- The new principles are mainly the same, with the addition of the underlined descriptions:
- Lawful, fair and <u>transparent</u> processing
- Collected for specified, explicit and legitimate purposes
- Adequate, relevant and limited to what is necessary
- Accurate and up to date <u>every reasonable step taken to ensure inaccurate</u> personal data is erased or rectified
- As has always been the case, data protection is everyone's responsibility and we need to protect this data and ensure that it is accurate and up to date.
- The surgery needs to be GDPR compliant by 25<sup>th</sup> May 2018. This means reviewing all of our Data Protection policies and reviewing what data we hold as an organisation and how we process this data.
- Each department has been asked to review the patient and staff data held in the department so that we can ensure this is appropriate.

**Upton Walkers:** This vibrant group led by Gail celebrate their 10th Anniversary on 12<sup>th</sup> August 2018. It's a great testament that the group has gone from strength to strength and still a very valued – well done Gail. We hope there can be an event on the lawn to celebrate this and tie in with our self-care work.

**And finally:** See below our very own Dr Barrell and one of our patients are front page 'poster people' for the British Geriatric Society new publication booklet on Age and Ageing.



# TRAINING and CONFERENCES 1.3.18 - 30.4.18

Access 2 Education - Non Medical Prescribing

24 delegates

Xpert Diabetes

20 delegates

20 delegates

AMSPAR Medical Terminology Workshop 20 delegates

SWCCG Locality Meeting 33 delegates

Event Mobility 13 delegates

Self Care Forum 15 delegates

Access 2 Education – Respirarty Day (asthma and COPD) 29 delegates

HR Update x 2 sessions 22 delegates
Appraisal Training x 2 sessions 24 delegates

# FRIENDS AND FAMILY TEST RESULTS February/March/April 2018

#### DATE

How likely are you to recommend our GP Practice to friends and family if they needed similar care or treatment?

Extremely Likely	Likely	Neither Likely nor unlikely	Unlikely	Extremely unlikely	Don't know
Total 154	Total 17	Total 5	Total 1	Total	Total

### What are we doing well?

- Good practice, appointments reasonably readily available, confident in practice doctors
- Care, help, easy access for appointments, home visits available
- Friendly, helpful staff
- Best practice in Country
- Efficient, kind, caring service, brilliant doctors and pharmacist, great online service
- Take time to listen, treat patients with courtesy, very prompt to respond
- Everything literally, my diabetic control is excellent, thanks to brilliant doctors in charge of meds, other problems dealt with in line .........
- Quite quick
- Upgrade of computer system/sign in was good
- The level of care is very good
- Very good survey, always very helpful, excellent
- Everything, all good
- The nurse was very nice and explained everything to me
- Turned up late but still fitted me in, thank you
- Appointment system, helpful and friendly doctors, receptionists and staff
- All aspects
- Everything, friendly, prompt
- Informative waiting room, quality patient focussed doctors
- My experience, brilliant each time so well looked after
- Always on the ball
- Good treatment fast and efficient
- · Very quick and efficient health check
- Good service
- Everything
- Very efficient, friendly service
- Most things brilliantly
- Efficient, friendly, accommodating and knowledgeable all members of the team (nurses, HCA's, Receptionists, doctors)
- Everything
- Almost everything
- Everything! Always listens, have time, do best to help with appointments
- Friendly, lots of advice
- Friendly and welcoming with all staff and doctors
- everything
- took time, explained everything, very happy
- everything
- punctual, friendly, very thorough, no rush

- everything is done well at this surgery
- everything, a brilliant practice, we are very lucky
- all good
- All things
- Polite staff, clean facilities
- Mostly everything
- Text reminders, systematic annual blood test/asthma nurse etc reminders; Dr Miller
- Dr Miller in particular is very caring, I would always go to her with any problem
- Everything
- Excellent service
- Care/treatment/responsive
- Having time to talk
- Everything
- Don't feel rushed with appointments
- Staff are all friendly and caring
- Taking the time and not rushing appointments
- Very professional easy to arrange appointment
- Attentive and caring doctors, nurses and ancillary staff. Feeling of confidence
- Everything excellent service

# How can we improve?

- More regular comprehensive checks
- Keep on as you are
- There is nothing
- Difficult to say an excellent practice
- Get more help from Gov.uk(ie money via NI contributions) and Gov not any other way, save the NHS!
- Only visit in 5 years, can't tell
- Online consultation
- Can't think of any ways
- Move nearer to where I live
- No improvement necessary
- More reception staff better magazine choice whilst waiting
- ??
- Pharmacy not achieving 48 hour turn around. Why not increase to 72 hours ? for standard repeats?
- New appointment announcer system needs a loud ping!! Hard to know if you have been called
- It would be hard to find an answer
- Nothing
- Longer hours after 6pm
- The service from A Z was excellent
- You can't
- All ok
- Not sure
- Booking appointments more than a month in the future
- It seems to take longer for repeat prescriptions to be ready but still good service
- Don't think you could do better
- Easier to make appointments out of Monday Friday 9 5
- Appointment process, I have to book the day off just to make an appointment

@ 8am

- Lengthy prescription queues?
  You do a wonderful job, I wouldn't change anything