

Kingsmead Healthcare



KINGSMEAD HEALTHCARE PATIENT PARTICIPATION GROUP Minutes Wednesday, 18 May @ 13:00

Agenda

1. Present & Apologies For Absence
2. Updates on Ongoing Work Strands
3. New Work Strands – Patient Driven Initiatives / Patient Suggestions
4. News from the Practice
Primary Care Network News
5. Staff Updates
6. Pharmacy Updates
7. Any Other Business
8. Date of Next Meeting

Minutes

1. **Present:** Dr JA
DS (PM)
MGM (DPM)
Mrs SH (HCA)
Miss SK (Reception)
Mrs BM (Pharmacist)
Ms CM (Patient)
Mr SJ (Patient)
- Chair:** CM

Apologies for Absence:

The chairperson welcomed all members of the Kingsmead PPG Meeting.

2. Updates on Ongoing Work Strands

Patient satisfaction Survey – Some suggestions have been made which we will add to the next set of minutes once we have gone through all of them.

Practice is now open for face to face and telephone consultations.

E-Consult is the preferred method for any administrative functions; sick notes, reports, requests for letters and so forth.

3. New Work Strands – Patient Driven Initiatives / Patient Suggestions

AKI, Asthma and COPD packs are complete. Cancer packs to be completed.

4. News from the Practice

We are in the process to update Kingsmead Healthcare to being a Dementia Friendly practice. We have the materials and are in the process of on-boarding staff.

5. Staff Updates

Dr Annu Vilvanathan, (Female GP) started with us on 5 May. She works a full day Thursday and Friday.

New PCN Physiotherapist, Will Stephens will be starting at Kingsmead 20 May. Will work half day Friday during May and All day Thursday from June 2022.

Teresa Buckland, Social Prescriber, has some availability on Wednesdays. She can help those who are socially isolated, have social problems / issues, mild-moderate mental health problems and want to get involved in local community activities. Contact reception for further details.

Emma Borthwick, Vocational Rehab Occupational Therapy, will be running sessions at Kingsmead on Wednesdays and Thursdays. Offers return to work support in respect of physical and mental health problems enabling patients to self-manage conditions and reduce sick leave.

Aniqa Tahsin, PCN pharmacist, has joined the surgery and works every Friday.

Silvana Nicholls, Health & Well-being coach joining Kingsmead soon. More details to follow.

6. Pharmacy Updates

- Recent staffing issue have been resolved.
- When patient comes in and ask for a mask, pharmacy have to charge. Can they be handed out to patients from the surgery? (MM to speak to DS and update Bharti).

7. Extended Access Review

Extended access is the offer, to registered patients of a practice, of pre-bookable appointments outside of core contractual hours, either in the early morning, evening or at weekends.

Currently, the extended hours at Kingsmead are:

| | |
|-----------|----------------|
| Monday | 6.30 PM – 8 PM |
| Tuesday | 6.30 PM – 8 PM |
| Wednesday | 6.30 PM – 8 PM |
| Thursday | Nil |
| Friday | 6.30 PM – 8 PM |

Additionally, they also have access to Hub appointments at other Practices over the week, the weekends and including bank holidays and across the Easter, Christmas and New Year periods.

Good access is not just about getting an appointment when patients need it. It is also about access to the right person, providing the right care, in the right place at the right time. Hence, there is a diverse choice not only of time over the whole week but of different types of appointments, the latter mostly by the Hub, which includes GP,

Nurse and HCA slots. Kingsmead only provides GP appointments during extended hours.

Currently, PCNs advise their constituent Practices as to the total time they should provide extended access every week in their own Practice, based on the formula of 45 minutes for every 1000 population.

How can we improve extended access?

- a. Improving matching capacity to times of high demand
- b. Ensure services are advertised to patients, including notification on practice website, notices in newsletter and general publicity in the community, so that it is clear to patients how they can access these appointments and associated service,
- c. Ensure ease of access for patients including:
all practice receptionists able to direct patients to the service and offer appointments to extended hours service on the same basis as appointments to non-extended hours services; patients should be offered a choice of evening or weekend appointments on an equal footing to core hours appointments.
- d. Use new digital tools – online consultations (eConsult), video consultations and easy access to information on self-managing minor ailments
- e. Ensure GP records are accessible for Hub appointments
- f. Address issues of inequalities in patients' experience of accessing general practice as identified by local evidence and actions to resolve in place.
- g. Effective connection to other system services enabling patients to receive the right care from the right professional, including access from and to other primary care and general practice services such as urgent care services.
- h. Maintenance and monitoring – Patient access, including extended access, should be part of all patient surveys. This is the best way to assess - who is using the service, equitable access, is it adding value, benefits, evaluation?
- i. Any PCN – regional support, including guidance, documentation, utilisation data - should be used to enhance and improve this access
- j. Access, assess, share and implement learning

Recommendations:

1. Ensure receptionists offer access to extended hours as normal part of making appointment for patients
2. Ensure the offer is part of the greeting message on telephone
3. Ensure the information leaflet on extended access is given to all newly registered patients and the service advertised as posters in prominent patient areas of the Practice
4. Ensure information on extended access remains in every edition of the quarterly newsletter
5. As capacity is fixed at this time, reception staff should ensure that all slots are utilised for every session on offer
6. Ensure that all modes of access generally available to patients are on offer (except online consultation) for extended access appointments
7. The extended access system should be subject to an annual patient satisfaction review (monitoring)
8. Access any learning material and discuss at Practice meetings in order to adapt and implement best practice

8. Any Other Business

- Recruitment for PPG – Steve Jones is a new member of the PPG who was recruited by Bharti via the flyer.
- Brought forward from February - Should the Newsletter go out as a PPG product? CM updated that she is not in a position to take this on at the moment but to hold on to this and revisit in 1 year. This should contain contact names and would need approval from CM.
- PPG members (External) should review the website. Constructive ideas for improvement needed. Have any reviews been carried out?
- Practice policy on opening up the practice via F2F.
- Any proposed service changes (ARRS – Additional Roles Reimbursement Scheme)
- Brought forward from February - What topics can we do group consultations on? PPG to organise - ? F2F, virtual or both. Chronic diseases, lifestyle choices advice etc. Any further progress on this? Meeting in September to have a follow on forum on Invisible Disabilities which CM will lead. MM to do minutes and flyers for CM and Bharti to distribute.
- SJ would like to see tropical fish tank back in Reception area as it was a nice, therapeutic focal point.
- CCTV suggested by CM for staff security and the fact that groups congregate in the doorway at night.
- CM suggested mural for Reception area to represent the local community. CM knows a local artist and will discuss price and design for consideration.

9. Proposed Plans 2022-23

The Practice has carried out the patient survey and are waiting for the results to be tabulated. They provide some of the agenda items, which may need to be addressed - redressed.

The quarterly newsletter - 'The Kingsmead Beat' – will continue to be published in May, September, December and February.

The main theme this year is Patient Education as health literacy continues to be poor in our catchment area, indeed the whole of East London. The work, encouraging active participation, is to be reflected via:

Increase the uptake of NHS health checks

Increase the uptake of Bowel Screening Programme

Increase the uptake of Child Vaccinations

Increase access by encouraging higher use of the eConsult Service

Sending AKI, Asthma, COPD and cancer education packs to all patients with these diagnoses

Become a Dementia Friendly Practice as per Age UK guidance

The PPG will work with the Practice team to ensure that each education pack gets to every relevant patient. Information on proposed changes and seeking new ideas is disseminated via the quarterly newsletter.

The scope of Patient Engagement Framework is wide, complex, and the work, challenging. In our long experience, effective engagement requires above all, persistence, not to mention considerable skill and motivation, as well-intended initiatives often appear to fall short of collective aspirations to build up a sustainable system responsive to the needs of patients

and families. So, we have limited the exposure or engagement to short, effective bites which not only engage patients positively but also gives them a sense of personal ownership of the process.

The Practice therefore, on a small scale, is trying to engage patients at the "Patient activation" stage (a patient's knowledge, skills, ability, and willingness to manage his or her own health and care) as well as the higher step of "Patient engagement", which combines patient activation with interventions designed to increase activation and promote positive patient behaviour, such as obtaining preventative care or exercising regularly. This way, the Kingsmead PPG, in real terms, becomes an integrated General Practice tool in trying to achieve improved health outcomes, better patient care, with more effective use of very limited resources.

Our PPG also provides vital suggestions and support on the state of the premises and working on non-clinical projects. Some of the suggestions on the review list are having murals by a local artist in the waiting area , converting a part of the rear of the surgery into a garden, improving access (appropriately) via patient education and finding speakers on issues such as 'invisible disabilities'. In this post-COVID day and age, podcasts and short notes on health issues, written in easy-to-understand language(s) and easily accessible via the website, is also being considered as part of Group Education.

10. Date of Next Meeting

Planned for Wednesday, 14 September 2022 at 1pm, so please put this date in your diaries.