

## PPG Meeting 1st Dec 2022

Present: Ian, Dr Chris, Sam, Diane, Gill Clair, Andrew, Emma, Millie,  
Apologies: Lucy, Jo, Cheryl, Keith, Terry,

We reviewed the minutes of the last meeting, the call back system has been looked at and for various reasons it was decided it would not meet the needs of the practice, especially as some patients need to be instructed to ring 999 for their immediate needs to be met appropriately. The web site has a facility where access can be available online. The website is direct and specific in certain areas. The email works for certain circumstances and How to Get the best from Hadwen will be circulated every 6 months. A QR Code may help patients access the website and see the services available from the website. This can go into the village magazines. Hadwen has all the stats on how many are waiting for their call to be answered and Ian can get some data for the next meeting. 16 is the maximum no of calls in a stack at any one time. Hadwen needs to be pushing the positive aspects of their operations so patients know the good news that shows Hadwen is a good light.

Blood requests was looked at, Dr Chris is looking at the system involved, the clinician now raises the blood request form. PPG members can check the patients prospective while out in the community.

Ian & Chris updated us on the improvement programme that the practice has signed up to. It is called "Accelerate" There is support from a consultant, they are now in week 3, looking at how systems work and how they can be improved. It provides protected time for managers to look at improvement of systems of process. It is a 16 week programme, its a NHS England initiative. There is a 3 hour sessions every week. There is a lot of analysis of the challenges the practice is facing. This produces a action list and how easy these are to achieve quickly. Audits of patient advisors of how confident they are in supporting patients to get the right service first time round. The clinical appointments are also audited for appropriateness of that appointment first time round, and was it of the right urgency. It is felt that this is working well but the audits will inform on the actual case.

Staff survey is also underway and feed back for two weeks of patients experience on their appointments, this will be sent out by text to patients. Millie asked if a text box could be included so patients can share a more personalised response of how their appointment went rather than a tick box or score out of 10, this will be looked at by Hadwen.

Staff surveys will be very useful. Patient flow is being looked at, and looking at celebrating positive feedback to boost moral of the team. Accessibility for health inequalities is a key area getting attention.

The first priority is to improve patient flow, which is the journey the patient experiences, the team is also looking at frequent attenders. Hadwen signed up for this improvement program which 1,000.00 practices have engaged with to date. PPG members were very pleased to hear of this improvement programme and we expect the outcome will be very beneficial for Hadwen.

Andrew will email Ian with a positive message regarding this to be shared with the full team. The Health Scrutiny Committee will meet on Tue next and Andrew may mention it there to raise awareness with other providers in the county.

Appointment data is now available online, the no of appointments and the no that are face to face and the comparison per 1,000 patients. Hadwen is providing appointments above the nation average which is good to see. Around 65% of patients are seen face to face. This information is available on Hadwen website and on their Facebook page, another good news item. Video calls are less popular now, but still suit some patients. Hadwen

has a demanding patient population. The NHS formula says although 19K on the books Hadwen gets paid for 17K. Patients always feel they can get to see a Dr at Hadwen, although the process of getting an appointment may be challenging at times.

Millie gave a short report on the Living Well Course for patients which is over half way through now, it will be reviewed at the end.

Diane asked about a report of GPs cutting hours to 9-5 but Ian reassured us that this was not being taken up following a vote at a conference, the contract says 8am-6.30 pm with Saturdays available for working age adults.

Hadwen were asked how staff stress is reduced? They look after each other and have a shared pizza event and Ian does a podcast for staff with links of support available to staff.

A staff suggestion box was mentioned as a way for staff to input their ideas. The appointment time has been increased to 15mins but it does include admin time. Clinicians have a morning meeting and GPs chat together afterwards to support each other.

Telephone appointments has a marked positive effect on waiting times for appointments, a remote working pharmacist doing medication reviews has helped a great deal.

A member shared his personal experience of the pharmacy next door and there opening hours are now back from 8- 10pm so a fantastic service. The initiative to signpost patients to pharmacy is difficult, as its hard to get consistency of staff and service. Prices at pharmacy has gone up. Hadwen has meetings with the pharmacy next door.

Millie shared a patient's journey of trying to organise a hearing test. NHS hearing assessment and access to NHS hearing aids is available to all patients. The standard NHS pathway is a check for wax in the first case and then a referral to the hospital for a hearing test. Hearing tests were provided at Hadwen to rule out those who do not need a more detailed hearing test at the hospital. Hadwen hearing test are currently on hold. Chris will discuss with the partners and update the pathway. Private provider assessments could reduce the no of patients who still have normal hearing but need reassurance. Those who need hearing aids could then be able to come back to Hadwen to organise a referral to the hospital for assessment.

Private providers can also advise on wax removal with drops before a test can be carried out, synergising of ears to remove persistent wax is available at Hadwen for those who need it.

Gill was disappointed not to be called to help with flu vaccinations, two members were contacted and did provide support.

Diabetes eye test were provided in the past at Hadwen and Sam asked if they may be restarted at some stage, Ian will look into this and contact the provider. A dark room is required for that service.

Emma asked about GP recruitment, where are we now? Ian reported that Hadwen is still one GP Short, he has applied for a visa scheme to employ a GP from overseas, GP training is still operating but medical student placement is paused currently.

The muscle skeletal referrals has a delay and Emma was advised to take it up with ICB, Emma is on the patient partnership group and will take this up.

Andrew wished everybody a Happy Christmas and Millie thanked everyone for attending.