### Minutes of the meeting of the

# Saltash Health Centre Patient Participation Group

Thursday 9th June 2022

Present: George Muirhead (GM) (Chair), Peter Clements (PC), Sue Latham (SL),

Sue Mackenzie (SMac), Avril Tozer (AT)

In Attendance: Dr B Morris (DrM)

The Chairman welcomed Dr Morris to the meeting and members briefly introduced themselves.

1. Apologies were received from Stephanie Carter and Mandy Thompson.

# 2. Approval of minutes of the last meeting

Minutes of the meeting held on 12 May 2022 were agreed subject to the following changes: Page 1 Matters arising: amount from closure of PPG account £685.37. AT contacted Saltash Town council regarding councillor interest in **joining**.

Page 2 E-Consult: **PCN** looking at new digital triage system.

# 3. Matters arising

AT confirmed all actions were completed.

Dial phone: If the patient does not press any of the suggested options the call will transfer to a person

Friends and Family test results are being published on the website

PPG minutes are now on the website

Text surveys are sent out after face-to-face appointments

Leaflets photocopied ready for PPG members who are joining town councillors meeting the public on Saturday 11<sup>th</sup> June.

#### Social Prescriber

MT had submitted a report to the Chairman:

Current caseload is over 100 between the two surgeries

Well-being Chat and Natter is attracting around 20 people per session.

Some social prescribing signposting

Visitors attending from Volunteer Cornwall and Positive People plus other support agencies.

Plans for an additional hub, possibly in the library

Support for over 50s to have subsidised access to the Leisure Centre

Support for patients who would like to access their GP services digitally

#### 4. May Fair - Survey results

GM had circulated an overview of the survey results prior to the meeting. He tabled the completed questionnaires including patients' comments.

GM asked for clarification on whether e-consult was still obligatory at SHC in order to get an appointment. AT said yes it was and that the PCN was looking at a digital system for all practices. DrM pointed out that sometimes the system did not work particularly well for staff as well as patients.

GM also asked if the online appointment system was open, as at Port View surgery. AT said it was not, but the practice was considering this approach for certain things such as blood tests.

The survey results showed that the percentage of patients likely or extremely likely to recommend the surgery to others was 56%, compared with 88% for Port View. This was disappointing, but DrM explained that retirement of full time male partners had affected the service over the last five years and continues to do so.

Patients had concerns about the range of medical practitioners and how they co-ordinate information. Does anyone have an overview of a patient?

DrM recognised the problem but a solution had not been found. She gave an example of how this affected both patient care and practice staff.

GM said that this was a system problem and the surgery was not alone with this issue. GM had learned, from the PPG Umbrella Group, that a new Care Co-ordinator had been appointed to liaise with care providers and act as a link between hospitals, GPs and health care generally.

# How can the PPG help the practice to improve some of the negativity?

DrM suggested that the PPG might assist with the following:

**Going green:** DrM said Saltash is 'green' and the surgery would like to be involved. e.g. more recycling. It was agreed that SMac would be the link to progress this, in discussion with AT.

**Complaints:** Analyse patient complaints, identify themes and take actions to improve. It was noted that complaints were usually related to systems.

**Communication:** Patients do not know about LIVI or cannot use it. Could there be a stand in the waiting room with PPG members and the Social Prescriber available to explain its use, particularly to older patients?

**Extended working hours:** Surgeries are being asked to work additional hours, including weekends, to enhance patient access. The PCN are providing funds to surgeries who sign up for this initiative. Saltash Health Centre had sent out a text survey asking patients what enhanced hours/venues/services they would prefer. DrM felt that it would be beneficial if both Saltash surgeries offered the same.

GM reported that the PCN were looking at enhanced LIVI, menopause, virtual clinics, social prescribing hubs and ear wax removal as possibilities for these extra clinics.

**Joint working:** DrM said it was good that both PPGs were meeting and working together. GM asked about the possibility of the surgeries working together which would surely provide better, integrated health care. AT referred to historic issues and current attitudes which made this difficult. DrM said this had been tried. She was very keen on a joint approach using everyone's skills and experience.

**Future planning:** With the development of the new housing estate would there be any additional resources to manage health needs? This was something our MP should be supporting.

GM said that, with this in mind, he and the Chair of Port View PPG were attending a meeting regarding the future use of St Barnabas Hospital.

**Migrants from Ukraine:** Potential patients don't understand the system or how to access a GP. DrM suggested a simple leaflet explaining the process would be helpful. GM was in a position to identify need and agreed to link with the surgery and feedback what is wanted. SMac also suggested the Red Cross as a source of information.

## Saltash Community School and Saltash Family Hub

GM explained that the PPG were keen to get young people involved. He, and a member of Port View PPG, were due to speak to 6<sup>th</sup> form this week but this was cancelled at short notice. GM and SL had a meeting arranged at the Saltash Family Hub. This too was cancelled at short notice but re-arranged for 21<sup>st</sup> June.

### 5. Practice Update

AT reported that:

Masks were no longer required to be worn unless there was a respiratory problem or Covid symptoms.

The Intercom had been switched off and patients could access the surgery and waiting room. Targeted lung check scans had been put back until 1<sup>st</sup> July although preliminary telephone assessments were going ahead.

Enhanced access survey was under way.

Healthwatch Cornwall had reviewed the website with positive results. AT had subsequently added a link to the Healthwatch Cornwall website, as suggested. AT would also feed back to the web site advisor accessibility issues for patients with sensory loss, learning disability etc. mentioned in the report.

PPG minutes would be published in an easily accessible place.

The PPG email address would be added.

PC mentioned the hearing loop at the surgery. AT said that no-one knew how to use the system but there had been no complaints. PC had experience of a hearing loop working well at Wesley Chapel. DrM felt it would be a useful asset. AT would contact the IT provider about using the loop.

DrM gave the group copies of the last two practice meeting notes for information. GM asked about the possibility of a PPG representative attending one of the practice meetings.

#### 6. Feedback from Joint PPG

The groups continue to work closely together. Following the patient satisfaction survey at May Fair they met to analyse the results and agree how to feedback. On Saturday 11<sup>th</sup> June members were joining Saltash town councillors meeting members of the public and completing more questionnaires and on Wednesday 15<sup>th</sup> June both Chairs were visiting St Barnabas Hospital.

#### 7. Feedback from the Umbrella Group

GM had attended the May meeting of the Umbrella Group and reported back:

The PCN were introducing an electronic system linked in to GP surgeries whereby texts could be sent to different groups, or all patients.

Paula Varndell-Dawes from PCN was looking at potential uses for additional clinics created by extended GP working hours.

Quay Lane St Germans were returning to face-to-face or on-line bookings. The future approach to telephone triage was unclear.

Integrated Care Groups were replacing CCGs in July 2022.

GM was encouraging working together for the whole of East Cornwall and this was progressing really well. Paula Varnell-Dawes' co-ordinating role was a good step forward.

GM would be away for the next three Umbrella Group meetings on 14<sup>th</sup> July, 11<sup>th</sup> August and 8<sup>th</sup> September. He will circulate the dates to identify members to attend in his absence.

#### 8. Any Other Business

GM returned to patients' comments in the survey results and said he felt that there was a good news story to tell about the future once the public got over wanting to see a GP. The quality of the initial contact person is critical in their role of triage. DrM said that they need empowering.

There were no further items of business.

GM thanked DrM for her attendance and contribution. It was agreed that she should become a group member with an open invitation to attend future meetings where possible.

9. Date and place of next meeting
Thursday 14<sup>th</sup> July, 6.00 p.m. at Saltash Health Centre.

SL 13.06.2022.