# Hollies Patients Forum Notes from Steering Group Meeting Monday 7 August 6pm to 7.30pm, via Zoom

Attendance Diane Davies (DD) (Chair), Sally Freeman (SF) (notes), Michael Worboys MW (Newsletter Editor), Andy Smith (AS) (Deputy Practice Manager), Linda Strudwick (LS), Charlie Askew (CA) (Patient Services, Hollies), Ian Hodgson (IH), Dr Mike Lyons (ML) (GP), Tom Baker (TB), Linda Campbell (LC), Lydia Wells (LW)

Apologies for absence – Chris Arms, Pauline Tryner

1. Welcome and introductions No new members present.

## 2. Notes from previous meeting and action points – paper 1

- Date arranged, Monday August 14th, for observation/shadowing of Hollies staff for Pauline and LS. ML will meet them on the day and they will both prepare short reports.
- AS reported that some videos around support for people using appointment systems are available, and work is ongoing to make these available.
- AS is looking at ways to communicate self-referral pathways to patients CA to undertake this work when time allows.
- Some statistics on use of the appointment systems are now available for distribution. AS feels this will probably be best disseminated on social media.

## 3. Membership update and voting for Vice Chair

Ian Hodgson is now the new Vice Chair following successful election. Proposed by SF and seconded by LS. Thank you to Ian for volunteering.

4. HPF Constitution and Terms of Reference, updated for approval – paper 2 Two amendments were requested LC asked for clarification of what GDPR stands for (General Data Protection Regulations). LS requested "if possible" to be added to the sentence around a GP attending each Steering Group meeting. **Action** - DD will make the amendments and pass to AS to replace the 2021 version of the Constitution on the HPF webpage.

#### 5. **2023 Annual NHS GP Survey** – Hollies MC results

300 surveys were sent out to Hollies patients by IPSOS. 133 surveys were returned so this is a random sample of around 1% of the practice population - far fewer than the HPF survey which achieved over 750 returns. AS and ML explained the results were considered alongside all other forms of feedback eg the NHS reviews and HPF survey.

AS reported the NHS GP survey reported patient satisfaction at 83% - this was 10% above other similar practices and a pleasing result. 92% of people reported that the reception staff were helpful. Patient choice of appointments was below the national/ ICS (South Yorkshire Integrated Care System) average, but there is not always choice available due to physical restrictions of the practice. ML and AS said the Hollies is always striving to improve, for example the telephone system has recently been updated. ML said that the survey identified some things they already knew and was it possible to draw conclusions from such a small sample? It may help identify trends and some information is useful as a baseline.

LS asked how feedback is considered by the practice and how patients are prompted to give feedback. AS reported that after attending appointments patients are sent texts to prompt them to leave feedback on the NHS review site. All positive feedback is forwarded to the relevant staff. Negative feedback is investigated. If it's anonymous then no feedback can be given to the patient, otherwise it's followed up with the individual complainant. ML spoke as complaints lead and explained the Hollies didn't receive many complaints but the team regularly discussed complaints received - why the problem happened eg was it a system failure or human error? Then discuss how to stop it happening again.

SF said that a reminder for staff to introduce themselves would be useful. DD asked if statistics were available for how many people give feedback.

Action – AS to provide statistics around feedback numbers, possibly for the newsletter

6. HPF priority issue – update from Working Group – "Clarifying and simplifying the patient journey when navigating the appointment system for different reasons".
IH reported that IH and MW had worked on stripping back the text on the website around making appointments to a much shorter and clearer version and had passed this on to AS. AS welcomed the revised text. He and CA are going to work on this to update the website, but the functionality of the website makes it difficult to change.
E-Group to have the opportunity to give rapid feedback

**Action** AS and CA to update the webpage with the simplified text and let Steering Group members know when this is done so people can review it. E-group members will also be asked to comment.

7. E- group feedback - Sally Freeman

One comment was a question - do we have representation on the Steering Group from people with a disability. LS felt it might be useful to have a lead/leads for disability, or contact point. Discussion around all members having a responsibility to raise issues regarding disability.

There are 74 members of the e-group currently, with 4 email addresses inactive. Agreed to remove these members.

**Action** SF to remove inactive member email addresses

**Action** DD asked for all of the Steering Group to become members of the e-Group

8. **HPF Newsletter update** – verbal report - Michael Worboys

Next newsletter to be compiled in October, following the next Steering Group meeting. Could be 2 sides of A4 or longer, depending on agreed content.

## Options for content could be:

- Feedback/ short reports from the shadowing exercise.
- MB has asked for some information from TB regarding a historical view of the practice.
- Information about the PCN services from Elaine Atkin.
- The new simplified appointments info on the website
- A patient's view of the autumn vaccination programme

# Action – ideas for future content to be forwarded to MW

# 9. Porter Valley Primary Care Network (PV PCN) - Patient Voice developments

ML is the Clinical Director of the PV PCN. It covers a population of approx 40,000 patients from 6 GP practices. Resources eg staff can be allocated across the Network to benefit this population. ML explained there are plans to have a large event to showcase the work of the Network later in the year.

The Hollies and Falkland House practices have active Patient Forums/ Patient
Participation Groups (PPG). The chairs (DD and Margaret Booth at Falkland House)
have been involved in exploring strengthening patient voice work across the PV PCN
as the PPGs at the other 4 practices are not functioning atm for various reasons. Age
UK have been involved in the PV PCN and have run events and meetings for staff and
volunteers involved in health and wellbeing initiatives in the Porter Valley area - they
are keen to be involved in further Network work. HealthWatch Sheffield is also
interested in finding models of good practice around patient voice in General
Practice to share with other PCNs. DD asked if we thought it would be useful to
strengthen the patient voice across the PCN. Members agreed this was a good idea,
especially sharing good practice, having a unified voice and allowing patients across
the PCN to have their say in how their GP services are provided.

Action - DD will attend a planning meeting around strengthening the patient voice across the PV PCN with Margaret Booth (Falkland House PPG), Elaine Atkin (PV PCN),

Lucy Davies (CEO Healthwatch Sheffield) and Jo Woodward (Age UK/ People Keeping Well Sheffield) and will report back.

# 10.NAPP (National Association for Patient Participation) membership

The Hollies subscribes to this organization on behalf of the HPF and previously the chair received emails from NAPP, forwarded by the Hollies Practice Manager, but these have stopped. DD asked if AS could chase this up so we can find out what is happening nationally. IH agreed to be the lead for this work.

#### **Actions**

- AS to chase up NAPP membership and communications to the practice
- IH to find out what's happening nationally via NAPP

## 11. Hollies and NHS update – Andy Smith and Dr Lyons

Two new members of staff in reception. New vaccination programme including flu and covid phase 7 vaccinations - decisions to be made about whether they should be given together. There is no joint vaccine available at present. Waiting times for hospital referrals are increasing, so managing patients waiting to be seen is a large part of the workload at present. DD asked for our thanks to be given to all the staff.

#### 12. Dates and format of future meetings

Vote confirmed that we will continue the alternative Zoom and face to face format, to be reviewed in 2024.

Already confirmed for 2023, both Monday evenings:

- 2 October, 6.15pm at Shirley House
- 4 December, 6pm via Zoom

MG offered to host future Zoom meetings

2024 dates for diaries, all Monday evenings:

5 February (AGM), 1 April, 3 June, 5 August, 7 Oct, 2 December

Action Meeting rooms to be booked for 5 Feb, 3 June and 7 Oct 2024

13. No AOB