**The Hollies Patient Forum (HPF)**

**Steering Group Meeting via Zoom**

**1st August 2022**

**Notes from the meeting**

**Present**: Diane Davies (Chair), Sarah Bowler (Co-ordinator of e-Group), Tom Baker, Andy Smith (Patient services manager), John Harding, Michael Worboys (Newsletter lead), Liz Friend (Vice chair), Dr Niki Bramwell (Partner at Hollies), Ian Hodgson (Observer), Chris Armes, Sally Freeman (Secretary) notes

**Apologies for absence** Linda Strudwick

**Introductions, welcome to new members and observer**

1. **Notes from previous meeting and action points – paper 1**

All actions completed or addressed within meeting

1. **Pen portraits – paper 2**

All current patient members have provided brief pen portraits to help members get to know each other

1. **New appointments system update – Andy Smith/ Dr Bramwell – paper 3**

**Feedback from practice team** given by Andy Smith and Dr Bramwell. Very positive feedback received to date. More opportunities for patients to contact the surgery. Well structured times for contact including Accurx, and triage by duty GP. Reception contact is still busy but less intense and less pressure on telephone lines at 8.30am. GP’s can now dial out from 8.30am so can work more effectively. Very positive all round.

**Feedback from Patient Forum** - Query around patients calling at the GP surgery as opposed to ringing the surgery to request an appointment. AS said they will currently be given an appointment if available and if none are available, then they will be asked to contact the next day. Making appointments remotely is better eg for reducing the risk of spreading infection. The GP-led triage system will ensure that patients are given appropriate appointments (routine or urgent, on the day).

MW asked about the wording of Accurx stating “the system is temporarily unavailable” which implies a technical error, when the system is simply out of hours. AS said it’s not currently possible to change the Accurx text/ messaging, but this problem has been reported.

1. **E- Group feedback on new appointments system - Sarah Bowler**

There have been more responses from the e-group than ever before and improvements to the appointments system have been made as a result. The e-group appear more involved now, which is positive. Two responses regarding the patient survey have also been forwarded. There was a further enquiry regarding developments in Adult Mental Health Services, which includes a greater involvement of GP’s. They wanted to know if The Hollies was involved in this initiative. Thank you to everyone who has provided feedback.

Action – Dr Bramwell to clarify if The Hollies are involved in the mental health services initiative.

1. **Hollies Patient Survey – Liz Friend - paper 4**

Many patient forums seek opinion from patients to provide feedback for the practice and to encourage good practice. The Hollies patient survey will seek opinion from as many patients as possible. Previous planned patient surveys were interrupted by Covid. Then a decision was made to focus the next patient survey on the new appointment system. This will include the quality of people’s experience, and availability of appointments. Liz asked if any further changes were required to the draft, before this is disseminated. Once finalised, patients will be sent a text link to the website, so they can complete the survey. 90% of patients can be contacted via mobile phone and text, but 10% of patients will require a paper copy of the survey. These can be made available in the practice.

**Feedback from patient forum** – SB received one comment from the e-group, regarding the differentiation between urgent and routine appointments. Also one person felt the survey was ‘defensive’ and ‘authoritarian’. LF responded to say the survey does explain its purpose. CA asked if we should clarify to say the issues outlined affect all GP surgeries nationwide and not just The Hollies. JH said there should be as few questions as possible. MW suggested asking what the system does well, to address issues of defensiveness. IH said a pilot of the survey may be useful. Also the terminology of ‘gypsy’ may be outdated, and he will provide LF with an alternative list of demographic groups. Also do people understand the term ‘triage’? AS said that the reception staff do not triage patients, but they ask questions based on an algorithm to ensure patients receive the most appropriate appointment and advice. DD said that she feels that the survey needs to state clearly that this is from the Patient Forum, and not from the Hollies Practice, but it will inform the Practice’s future planning.

**Action** – Steering Group members to send Liz any further comments on the draft and the resulting survey to be piloted with the Steering Group initially

1. **HPF publicity and newsletter – Michael Worboys – paper 5**

MW is keen to take the HPF newsletter forward. MW is happy to provide the content, and a suggested format. This would be a two-sided newsletter, providing information about how the HPF supports and can influence change within the practice. SB completely endorsed the proposal to take this forward. JH agreed that this should be a maximum of two sides.

**Action** – MW to develop HPF newsletter, with help from willing volunteers, for distribution in September

1. **Updating the HPF web page**

DD feels this may require a ‘fresh-eyes’ approach. SF agreed to look at the HPF web page. AS says that he will update the webpage if the content is easily transferable. MW wondered if there may be a patient who is an expert in web page authoring who could help?

**Action** – SF to look at content of webpage and provide comment. Other volunteers welcome.

1. **Patient reference/ advisory group proposal – Diane Davies - paper 6**

DD explained that the purpose of this group would be to provide some expert advice, skills or perspective at key times, for those that do not perhaps want the ongoing commitment to a Steering Group. MW thought specifying the type of experience that is required this may be beneficial. LF suggested that if specific roles or experience were made known, this may be more inviting. JH supported the idea of a pool of people with skills and expertise to work with the HPF when needed. SF reminded people that the current Steering Group does not reflect the practice population and that this needs to be a consideration when forming future patient groups.

**Action** – DD to develop a list of desirable perspectives, attributes and skills for publication on the website and for inclusion in a newsletter article later in the year.

1. **Practice and NHS update – Dr Bramwell/ Andy Smith**

AS explained that planning for autumn covid and flu vaccination clinics is underway. The plan is for both vaccines to be given at the same time. Winter planning is the main focus at present. Trainee doctors (two F2s and one F3) are joining the practice soon. Images of Hollies GPs and staff will be made available on the website, but not all people may wish to share their image. AS is keen for patients to have an insight into the human side of the GPs and staff.

1. **Workshop invite to progress Porter Valley Network PPG (Patient Participation Group)**

Elaine Atkins is trying to establish a Porter Valley network PPG. DD is to represent The Hollies at the first planning workshop on 04.08.22.

**Action** – DD to feed back following the initial meeting.

1. **Any other business (please notify the Chair before the meeting)**

No other business was discussed or tabled.

1. **Dates of 2022 meetings:**

* **Monday 3 October, 6.15pm, Shirley House**
* **Monday 5 December, 6pm, via Zoom**