

Hollies Patients Forum
Steering Group Meeting Hollies Medical Practice
Monday 3 June 2024 6-7.30pm

Attendance:

Ian Hodgson (IH) (Chair)
Lydia Wells (LW) (Notes)
Tom Baker (TB)
Pauline Tryner (PT)
Linda Campbell (LC)
Dr Mike Hogan (MH) (General Practitioner)
Charlie Askew (CA)
Michael Warboys (MW)
Linda Strudwick (LS)
Howard Fry (HF) observing as new member
Eleanor Cumberbatch (General Practitioner, observing as recent practice appointment)

1. Apologies for absence

Apologies were received from Sally Freeman and Andy Smith.

2. Welcome and introductions [including observers and visitors].

IH welcomed the group and introduced HF, attending and observing as a prospective member.

3. Notes from previous meeting and action points [paper 1].

The notes were accepted as correct.

- Action point 1 (recruitment poster): completed and on agenda (item 5). The group was thanked for comments.
- Action point 2: website has been updated
- Action point 3: LS is considering the possibility of taking on the role of deputy chair.
- Action point 4 (training items): IH suggested the possibility of slimming down the large list to the core items. MH commented that he had the contact details for a video production unit to possibly produce videos
- Action point 5 and 7 (newsletter): on agenda (item 8)
- Action point 6 (patient numbers): Hollies currently has around 10500 registered patients, and MH reported an increase of 2000 patients since 2016. Nationwide, there are 10000 less GPs. The government awards more money to practices if:
 - There is an increase in patients.
 - The practice is looking after frail and vulnerable patients.
 - The practice can show progress in improving blood pressure values.

There was general discussion on how the election may influence change for GP practices. The reduction of waiting lists would greatly help in terms of funding. There was generally a move to encouraging more people working in primary care but not necessarily more GPs.

TB raised a question about the seeming change post Covid in accessing GP care, with access appearing more remote. There followed a discussion on IT/telephone access (although the group noted that this creates more work). PT raised the issue of multiple apps which were not helpful to patients and that greater consistency across apps is needed.

Action: this item to be placed on next agenda, focusing more broadly on patient education.

- Action point 8 (which trusts are communicating with which apps): AS was unable to attend this meeting and would update at the next meeting.

Action: this item to be placed on next agenda – in the meantime, all steering group members are encouraged to ‘experiment’ with all the available apps and feedback at the next meeting.

- Action point 9 (NAPP) completed: IH reminded the group that it is a member of NAPP and encouraged members to interact with the website and explore the resources available.

Action: IH will check the date of the next (online) general meeting so that the group can send a representative. IH would also send information about the HPF to NAPP this week, it also being patient group awareness week.

4. Contribution from Falklands House Patient Forum [Margaret Booth].

IH reported that Margaret Booth was unable to join this meeting but will attend the next.

Action: this item to be placed on next agenda.

5. Recruitment Drive for Steering Group and e-group – updates [Ian/all] [please see draft poster for discussion as paper 2].

The group welcomed the poster. Key points raised included:

- That the NHS logo should be removed (MH).
- The use of ‘patient journey’ rather than ‘patient experience’ may be more suitable (LS).
- ‘Working with the practice to ...’ should be included to reflect the collaborative nature of the group.
- The group agreed that printing the poster on yellow paper would improve visibility.

IH also suggested that the minutes of the meeting (for the Hollies notice board) could be shortened into a summary with bullet points.

IH mentioned an article from the US which promoted the use of a storytelling model to reflect patient experience (to be shared with the group).

Action: IH/LW to explore further, with input welcomed from other steering group members.

6. HPF priority issue – further recommendations on website.

To be deferred to the next meeting.

Action: this item to be placed on next agenda.

7. Proposals for strengthening patient engagement and contribution at Hollies [Linda and Ian] [paper3].

LS suggested several measures, including:

- Giving new Hollies staff an induction into HPF, its activities and contribution.

- Giving new members of HPF a short induction, which include a better understanding of the practice, its demographics, and key health issues.

Subsequent discussion covered a range of items:

- There is no explicit and clear route for patients to contact HPF members.
- MW commented that this group is achieving quite a lot compared with groups nationally.
- A suggestion that maybe a HPF member could be present at staff meetings was endorsed by MH. This could be a 'formalising' of the shadowing exercise which has taken place previously and has been mutually beneficial.
- SC said it would be useful for new staff to be educated in what HPF does. CA added that the Hollies staffing structure has been added to the website.
- IH suggested there ought to be a way of assessing our engagement, what is possible, and what learning takes place. IH will share more details of the PFMD initiative.
- CA suggested one way of our engaging with patients could be attendance at the 'flu clinics and LS suggested that it would be beneficial if the group was more diverse across ethnic group and age range.
- LS/MH will work more on these proposals and invited anyone in the group to join them if interested.

Action: This item to be placed on next agenda to discuss in more depth.

8. HPF Newsletter, next edition [Michael/all].

MW said that the next edition was due out in September but was not tied to this and that if there were new initiatives they could be included in an earlier edition. Items for the next edition should be sent to MW. PT mentioned the inclusion of information about apps.

IH suggested that there could be a 'special edition' about patient education.

Action: Ideas can be shared with MW and confirmed by next meeting in August.

9. E- group feedback [Sally – via report].

There are 77 active members in the e-group.

A response was received about repeat prescriptions, and the difficulty in getting a new password. CA stated that at the moment patients need to call the practice for a new password as they are updated frequently. PT mentioned this may be better done by email. CA stated that this was a possibility but some things (e.g., asthma reviews) could not be done via email. In response to MW's question about who accesses the emails and when are they answered, CA stated that this was done by reception and the response was usually within 3 working days.

10. Porter Valley Primary Care Network, new plans for meeting in July 2024 [Ian].

Elaine Atkins (based at Carter Knowle) is the co-ordinator, and 6 practices involved. A previous Porter Valley Network Zoom event has been rescheduled to July 18th, 2024, with contributions from the practices, Age UK (Sheffield), and Healthwatch. Pre-registration will be available shortly, from which a final number of around 30 people will be selected (reflecting the 6 practices). Attendees are not restricted to patient forum members (though could be a way to enhance recruitment). IH will share updates nearer the time and encourage group members to pre-register.

11. NAPP (National Association for Patient Participation) verbal update [Ian].

Already covered under action points above.

12. Hollies and NHS update [Andy, Charlie, and GP].

MH reported on this item:

- 600 invites have been sent for Covid vaccinations, prioritising those who are housebound and/or vulnerable. The 'flu vaccinations will take place in September 2024.
- The new pharmacist is now six months into the role.
- Nothing is yet known about possible strike action.
- New staff members and descriptions of staff roles have now been added to the website.
- At present there are two foundation Doctors. This is usually a 4-month placement during a two-year training course. Hollies is looking into the possibility of them remaining on a placement for a full year to provide continuity.
- MW questioned the function of the One Health facility on Psalter Lane. MH stated that it is a private facility but confirms there are NHS referrals to ease waiting lists for the NHS.
- IH mentioned the 'Patches' tool, which uses AI as a quick way of picking out serious issues. More information will be shared with MH/the group.

13. Dates of 2024 meetings, all Monday evenings at 6pm:

LC stated that she personally preferred face-to-face meetings rather than Zoom, as they tend to be more interactive. Others agreed, and therefore the meeting on 5th August 2024 will now be at Hollies MC rather than Zoom.

Meetings in 2024:

5 August, Hollies MC

7 October, Hollies MC

2 December, Zoom (TBC).

There was no other business. IH thanked members for their attendance and discussions, and the meeting ended at 7.25pm.

[END]

LC/IH

11 June 2024 [FINAL]