Hollies Patient Forum Notes Steering Group Meeting Hollies Medical Practice Monday 5th August 2024 6-7.40pm

In attendance

Ian Hodgson (IH) (Chair) Sally Freeman (SF) (Secretary) Lydia Wells (LW) Margaret Booth (MB) (Chair of Falkland House PPG) Linda Strudwick (LS) (Acting Vice Chair) Michael Worboys (MW) (Editor of the newsletter) Richard Harvey (RH) (GP) joined meeting at 18.15 Myrtle Pritchard (Observer) Charlie Askew (CA) (Senior Patient Services Manager) Howard Fry (HF)

1. Apologies for absence.

Apologies were received from Pauline Tryner, Tom Baker, Linda Campbell, and Andy Smith.

2. Welcome and Introductions (for observers and visitors).

Introductions made by all attendees. Margaret Booth (Chair, Falkland House patient participation group), and Myrtle Pritchard (observer, member of e-group).

3. Notes from previous meeting and action points.

All Actions discussed – all items resolved or on the agenda for this meeting.

4. Contribution from Margaret Booth (Chair, Falkland House PPG).

The patient participation group started in 2015, when it became a national requirement. Margaret shared several points of interest to Hollies, and there was a rich discussion, which included the following topics:

- There are several key priorities and topics that HPF and Falklands House PPG (FHPPG) can collaborate on. There are many common issues affecting both groups.
- FHPPG utilises different subgroups for specific issues.
- FHPPG publishes an annual report each year, summarising activities and achievements, and outlines priorities for the coming year.
- There are currently 17 active members but only 7 on the virtual group.
- MB explained why FHPPG requires a treasurer. This is to manage revenue from the annual Christmas quiz. The money raised has provided screens in the surgery, a defibrillator, and a phlebotomy chair. For the quiz, a core theme is selected, and the questions are based on general knowledge. Local charities are also supported from the revenue.
- The FHPPG, in collaboration with Falkland House practice, is producing a series of guides. Topics will include the components of primary care, what happens after a patient contacts the practice and how appointments are managed, and the various apps available for patients.

- In 2020, FHPPG conducted a large survey in 2020 (before the first COVID-19 lockdown) asking for three positive aspects of the practice, and three things that could be improved. 170 people were interviewed face-to-face. There is a possibility that the next survey could be undertaken in collaboration with Hollies Patient Forum (using the same data collection tool).
- Several issues facing patients, especially signposting to services, face patients at both Hollies and Falkland House surgeries. This could be something about which the Porter Valley Network can share more information.
- **DISCUSSION**: there was discussion about what Margaret shared, and areas for further collaboration between HPF and FHPPG. These could include Hollies contributing to the 2025 quiz, reviewing the guides being produced by FHPPG, and exploring further ways to improve the patient experience in primary care (e.g., consulting with patients, or 'brightening up' waiting rooms).

5. Recruitment drive for steering group and e-group – updates.

IH reported that the HPF notice board has been updated, including with a new recruitment notice and summary version of notes from the most recent meeting. HF suggested that the magazine of the Nether Edge Neighbourhood Group (NENG), EDGE, distributed to NENG members and other outlets in the area, could include material from the HPF. This can be explored further.

RH suggested that the Hollies Facebook page might be an appropriate place for the forum to also have a page.

ACTION: HF and IH to explore HPF output in EDGE, and IH will follow up on raising the profile of HPF on the practice's Facebook page.

6. Final proposal for strengthening patient engagement at Hollies.

- LS suggested that 'nothing about us without us' is a principal that should be followed at Hollies (that patients should be involved in how services are planned and delivered).
- Collaborative working between the forum, clinical staff, and admin team is our priority.
- LS suggested that perhaps the practice does not make the most of the forum.
- A key question is: does the forum represent the patient population **or** 'just' themselves? RH suggested that he considers the forum to represent the opinions of the whole patient population.
- IH suggested that we need to consider how the HPF can work more closely with other practices, and MB suggested that other practices are also keen to develop patient forums. LW is keen to be involved in developing training packages.

ACTION: Production of training packages for HPF and staff at the Hollies [LW, IH and LS]

7. HPF Newsletter finalising next edition and content.

The next edition is due in October 2024. Michael will finalise content at the next meeting, which will ensure that it is contemporary. He is also participating in one of the 'Friday walks', and this can be included in the next newsletter.

ACTION: MW to attend the practice's Friday Walk.

8. e-Group feedback.

SF reported 76 active current members. The following points had been made by e-Group members:

- Concern about grammar, spelling and information in text messages This may be due to the rapidity which the GPs triage patients, or that different information is kept on different databases. Apologies given for this error.
- Blank walls in waiting areas (in basement) all agreed with this, and the patient forum will try to address this for the future.
- Distracting pictures for children as above. The HPF agreed and will work to address this. The HPF agreed that this should not be a priority for the practice, but that the HPF can support the practice with such initiatives.

ACTION: HPF to consider ways to brighten the walls in waiting areas and include images to entertain and distract young children.

Two further issues were discussed:

- Impact of the recent global IT outage (caused by the CrowdStrike software) on GP practice. RH reported that, as the practice uses *SystemOne*, the practice was only minimally affected. This was the case for most practices in Sheffield.
- For patients arranging their annual review, there can be some delay in finalising an appointment (which means it could be more than a year since their previous review). This was acknowledged and there was some discussion around the timing of texts to ask patients to make appointment, which could be altered.

ACTION: AS (Practice Manager) to respond

9. Porter Valley Primary Care Network (PVPCN): feedback from meeting 24th July 2024.

The meeting was a success, and IH will circulate a summary report shortly.

ACTION: IH will share the report from the PVPCN.

10. NAPP National Association for Patient Participation (NAPP) – verbal feedback.

Regular reports are received from NAPP about the activities of other PPGs/patient forums in the UK. During June 2024, IH shared on the NAPP message board a summary of HPF's activities 2023-2024, plans for 2024-2025. Here is a link to the post: https://members.napp.org.uk/newsfeed?item=66858da684f60b0008a05b15

11. Patient Survey – postponed until next meeting.

To be discussed at the next meeting in October 2024.

12. Hollies and NHS update.

• **RSV vaccine:** The respiratory syncytial virus (RSV) vaccine is to be provided for patients over 75 years of age. More information about the RSV vaccine is available here:

https://www.gov.uk/government/publications/respiratory-syncytial-virus-rsvvaccination-for-older-adults/your-guide-to-the-rsv-vaccine-for-older-adults

- **COVID-19/'flu vaccine:** For later in 2025, as COVID-19 and 'flu vaccines cannot be given at the same time, cohorts who will be offered the vaccines are yet to be confirmed.
- Planned GP industrial action:
 - The British Medical Association (BMA) has produced posters regarding GP funding and balloted members on industrial action. GPs were initially offered a 1.9% uplift in funding, which has been increased to 6% to allow an increase in salary for staff.
 - A PowerPoint summary is available with further information about core issues and options for action. This, and the posters, will be available to the HPF.
 - **No decision** has yet been made by Hollies about what actions may be taken.
 - Currently, 10-minute appointments are still offered, and consideration may be given to either lengthen or shorten these appointments.
 - At present, no patient-facing services have been affected. Further discussions will take place depending on the ballot results and other factors.
 - HPF will be informed of any updates, and relevant information will also be shared with all Hollies patients.

ACTION: RH to forward BMA PowerPoint slide deck and other materials to HPF. The situation is changing rapidly, but this article provides some background: https://www.theguardian.com/society/article/2024/aug/01/english-gps-to-stageindustrial-action-over-19-budget-increase

• CA is leaving the practice in September. HPF would like to thank her for the excellent support she has provided for HPF during her time at Hollies and wish her best wishes for the future. CA's work will be passed to Mamen Vincente, though there will need to be further clarification about what support to HPF is still needed.

13. Do we need a long-term strategy?

To be discussed at the next meeting in October 2024.

14. Planning for meetings in 2025.

To be discussed at the next meeting in October 2024.

15. Dates of remaining 2024 meetings.

- Monday 7th October 2024 Hollies MC [MP confirmed she would like to join the forum and gave her apologies.]
- Monday 2nd December 2024 Hollies MC (Xmas event?)

16. Any other business.

None.

[END]

SF/IH 19 August 2024 [FINAL]