

Lion Health: PPG Meeting Minutes: Tuesday 13th November 2018 @ 2pm

Attendees: Helen Ashby, Peter Upperdine, Bob Taylor, Linda Bruntwell, Andy Fitzmaurice, Margaret McColgan, Sandra Newall, Nanette Hedley, Les Sheard, Robert Derricott, Kate Wells, Dr Lisa Jones, Nick Jackson (chair), Helen Taplin (minutes)

Apologies: Yvonne Marshall, Chris Hare, Robert Jasper, Veronica Astley, Veronica Catherall, Nigel Haydon, John & Margaret Thompson

	Agenda Item	Summary Of Discussion	Action
1	Introductions	Nick welcomed Andy Fitzmaurice to the group and everyone introduced themselves.	
2	Thrive into Work with Nadia Haywood and Wendy Wheatley	<p>Thrive into Work is a randomised controlled trial to help people with mental and/or physical health conditions back into paid employment, looking at existing employment services available. It is an Individual Placement and Support trial. The long-term aim is to hopefully change the way the Government help people with difficulties get back into the workplace. Patients can self-refer to this trial or be referred by GPs, Nurses and other clinicians via their website. Nadia and Wendy work for Dudley & Walsall Mental Health Trust and cover the whole of the Dudley borough.</p> <p>They work very quickly from the date of referral and try to follow the patient's wants not what the patient is qualified to do. They can already see first-hand that it is successful. There is no bank of available jobs, they engage with potential employers.</p> <p>Wendy and Nadia often come to the Chronic disease clinics at Lion Health, looking for potential patients. The employer is never approached by the workers unless the person wishes.</p>	

		<p>LS asked what level of resistance they have encountered from employers when mental health problems are mentioned and Nadia replied none as yet but there is still some stigma about mental health which is being addressed by this trial. They work with clients on confidence building and find jobs to fit the people's needs. The trial is for a period of twelve months.</p> <p>The panel were asked to let Nick know if they know anyone suitable for the trial and he will share contacts.</p>	
3	Action Points from last meeting	<p>1 The number of patients signed up for Patient Access are: 72% patient population by mobile 39% patient population by email</p> <p>The Practice need to get more email addresses from patients as most patients wish to be contacted in this way. This has come out on top in a wide range of age groups.</p> <p>2 Urine samples are not formally required for all Long Term Condition Clinics but will be required for the CKD clinic. However, the GPs will sometimes request as it can support early detection of conditions.</p> <p>3 Display Screens – these have been changed to the slowest speed setting so are hopefully easier for patients to read. Nick asked for feedback from the panel members when they have seen the screens.</p>	
4	Practice Report from Dr Jones	<p>We have two new GPs, Dr Cathy Ayers and Dr Gemma Plant who are both full-time at present. Dr Nancarrow is taking a six-month career break from December.</p> <p>Dr Wilson had sent her thanks for support for the Great North Run. Nick will put the total raised on Facebook.</p>	Nick to put total on Facebook

		The new Suicide/Bereavement Support Group has started and is successful. It is open to anyone bereaved by suicide. The group is going to train around 25 people who work in the Practice. The group support people through bereavement through suicide.	
5	Flu Campaign	<p>There were pre-booked appointments this year but the GPs can also take the opportunity of vaccinating patients in clinic. A couple of panel members felt the wait between booking their appointment and the actual appointment was too long. Nick apologised for that but explained the different availability for the different vaccines. Nick explained how the Nurses made sure there would be sufficient slots available based on previous years' numbers.</p> <p>LS mentioned that the World Health Authority had published that the vaccine last year failed over 65% of people so a new vaccine was ordered. The manufacturers could not keep up with the orders hence the vaccines being delivered in batches. LS would like the flu phone line to be working at all times during the flu campaign as he had been unable to get through on 3 days.</p>	
6	New Telephone System	A new telephone system will be in place from next week called Babble Voice. Patients will be able to get through easier. Nick has tried to replicate what we have now to make the transition smooth but in the near future will put in an automatic cancellation and booking line. Nick will ask for feedback about the new system and as Lion Health control the new system completely, can change things if needed. Also audits can be done with the new system.	

		<p>RD asked how many incoming lines we have. Nick informed that there are 20 at present. Terra Firma control our telephone system at present.</p> <p>Dr Jones said that there is training ongoing with Receptionists to enable them to prioritise calls. GPs have set slots for telephone consultations which patients can book. Each partner has 6 telephone consultation slots per day, although many do many more. Nick informed that there are over 500 appointments per day in the Practice and they are always looking to tweak things to ensure the day runs smoothly. Patients are encouraged to get to know more than one GP as they may have to wait a while to see only one preferred GP.</p> <p>PU praised Lion Health GPs and the flu line. LS is proud of what we have here at Lion Health.</p> <p>LS wanted to document that he sees the Nurses here 3 times per week and wished to say how good their skills and dedication are. He also added that the mobile phone for flu was a good idea, but should always be ON.</p>	
7	Patient Engagement	<p>There have been meetings with a specific goal of patient communication. The key piece of work has been co-ordinated by HA, YM and CH and is concerning a signposting role in the waiting room. There are many patients queuing and they can be shown how to use the check-in machines or shown to the GPs room, toilet, pharmacy etc. This will relieve pressure on the front desk. It will be a Patient Support Role and advertising for people interested in joining this group will start in before Christmas with interviews in January, training in March and going live in April 2019. They are looking for around 20 people to be involved with this.</p> <p>Nick is going to meet a lady who co-ordinates this at Russells Hall Hospital. The patient Supporters will wear a T shirt with a logo on and there will be 2 people at a time in</p>	

		<p>Reception.</p> <p>The Team are looking at how much information volunteers can have access to.</p>	
8	AOB	<p>HA feels that ID should not be required when asking for NHS number and that Reception need more training on ID issues.</p> <p>MM queried joint injection waiting times as in the past these were often carried out in a general appointment and now there is a 10 week wait. Dr Blow is hoping to go on a course to do joint injections.</p> <p><u>Test Result Process</u> – MM felt patients may worry if not heard anything from the GP. Dr Jones said that Lion Health use the ‘No news is Good News’ policy. Nick wondered if an email account could be set up for non-urgent queries about test results? Dr Jones reassured that if the requesting GP was not in then their buddy checks the blood results.</p> <p><u>Lowndes Road pavement</u> - LS showed his concern for patients who walk down Lowndes Road saying the grass is growing across the pavement and branches are covering the walk way. It is an appalling approach to the Practice. LS would like the council to clear the branches and grass across the pavement.</p> <p>HA mentioned there are no designated parking spaces for parents and children at the surgery.</p> <p>MM was concerned about the warfarin clinic administration. There are very few seats available and lots of elderly patients attend this clinic. There is no booking in system.</p>	<p>Nick to chase up course for Dr Blow</p> <p>Nick will support any correspondence the group makes with the local council.</p> <p>Nick to arrange</p>

		<p>SN would like GPs to call patient's names twice over the tannoy system and be clearer.</p> <p>MM felt there needed to be at least one experienced Receptionist at front desk at all times. RD felt that more training is required for Receptionists.</p> <p>HA commented that some patients are unable to cope with being in a large open plan waiting room and Reception need to be aware that the quiet room or under the stairs may be a better place to wait.</p>	<p>chairs under the stairs and possibly a booking in system</p>

