

## Ainsdale Medical Centre

### Patient Participation Group Thursday 26<sup>th</sup> September 2019

#### AGENDA

1. Apologies
2. Minutes of the last meeting
3. Actions arising from the minutes
4. Flu clinics update
5. Primary Care Network update
6. Practice update from Paul Ashby
7. AGM Business
8. AOB

#### **Present**

Chair: Helen Graham

Practice Clinical representative: Apologies from Doctor S K Bennett

Practice Administration: Paul Ashby

Present: Roger Exley, Barbara Jones, Joan Duckworth, Ken Lowe, Jean Washbourne; Ann Rothwell

Apologies: Ian Watson, Roger Grand; John Dixon

#### **1. Welcome and Apologies**

See apologies above.

#### **2. Minutes of the last meeting (9<sup>th</sup> May – no minutes from July LHCH talk)**

Paul read out key sections for matter arising from the meeting on the 9<sup>th</sup> May 2019.

#### **3. Matters arising from the last minutes**

Website update – the website demonstrated in test form at the May meeting has been live for several months now. It has a more news-based feel to the home page. 5 members of staff have been trained on editing content so we should be more effective at keeping it up to date and adding fresh news on a more frequent basis.

We have had some feedback that the 'contact us' page on the PPG site is not linked anywhere so patients that use it do not get a response. **[Action PA to check this with PE]**

JW provided a further update on the new Hartley Hospital. She is part of the patient expert group that advises the project management. The opening of the first part of the hospital has been delayed by approx. four weeks due to issues with Virgin Media.

Helen updated on her attendance at the CCG (Clinical Commissioning Group) meeting in May 19 which was to bring PPGs from Sefton practice together to compare and contrast their groups and help develop PPGs in general across the borough. HG said it was a good meeting and Ainsdale MC is amongst the strongest and most active groups. Formby Village also has a strong group

The next meeting of this kind is on 19th November which will be just for Southport & Formby practices (not South Sefton) but is open to all PPG members. It is at Lord Street West Church in Southport 10am-2pm and there will be a market place and lunch. PA and HG are attending **[Action HG to send details to JW for information if she also wishes to attend]**

#### **4. Flu Update**

The rota for PPG volunteers was discussed. HG will contact members not present who have volunteered to make sure they are still available.

David Waugh has offered to help if needed. PA will contact to say we need him for PM on 16<sup>th</sup> **[Action PA to contact DW]**

PA confirmed that the main role of the volunteers is to help co-ordinate the flow of patients and in particular to 'spot' patients with mobility issues early so we can send the nurse to them and save them having to walk too far. The volunteers will again be issued with volunteer waistcoats to make them easy to identify for patients.

PA confirmed that invites for Over 65 patients had gone out by SMS where possible and by post to others. For the first time patients are not being assigned a day or time slot to make it more convenient for them.

KL updated on the health fair and the exhibitors lined up to attend. PA confirmed that e-Consult would be sending a representative to both days to talk about e-Consult. This would replace social prescribing which was originally planned for the practice's stand.

Dr Sweeney is returning to do pulse checks as part of some research she is doing into identification of Atrial Fibrillation (AF) in general practice.

PA also updated on the Under 65 flu clinic that had taken place the previous afternoon/evening. Just under 400 people had attended which is about 40% of the invited cohort.

#### **5. Update on Primary Care Networks**

PA updated on the work of the Ainsdale and Birkdale Primary Care Network which came into being officially on 1<sup>st</sup> July 2019.

Dr Simon Foster has been appointed to be Clinical Director of the network which comprises our surgery + Ainsdale Village Surgery, The Family Surgery, The Grange Surgery and Lincoln Road Surgery.

In Year 1 there is funding for a pharmacist and a social prescribing link worker.

The PCN has invested the pharmacist funding in a CCG led initiative to provide a medicines management 'hub' – essentially a centralised pool of pharmacists supporting a group of practices with expert advice on medicines management and prescribing. Community pharmacists e.g. Hirshmans/Fishlocks will have direct access to the hub on issues such as 'out of stock' medicines which will save time for GP and patient alike. The practice went live with the hub on Monday 23<sup>rd</sup> September but will take time to become established. The hub is not patient-facing.

The funding for a social prescribing link worker (SPLW) is being paid to a central provider that will coordinate the social prescribing link workers across Sefton. They will use this to appoint and manage a SPLW who will be physically based in each practice – probably one day a week if they are covering all 5 practices in our PCN. PA stressed this integration into the practice teams is in his opinion one of the most important aspects of the scheme. The CCG is leading the process of appointing a single provider. PA will get an update on this from the CCG in the next week or so.

PA proposed that we (AMC PPG) host an evening event in late November (Thursday 28<sup>th</sup>) to promote Social Prescribing to patients and invite patients from all five practices. PA will identify a venue which would be suitable for an event of this nature. PA will chase progress with the CCG on the appointment of lead employer and individual link workers. It is hoped that by 28<sup>th</sup> November the assigned SPLW will be in place and could come to the event in person.

More on [social prescribing](#)

RE asked if it was possible to find an organisation chart of some kind which shows the relationships with all the various organisations. **[PA to chase this up]**

## 6. Practice Update

Paul updated on recent **personnel** changes at the surgery

Dr Quinlan is leaving at the end of November. We have recently appointed two new salaried GPs – Dr Uju Oyolu and Dr Kate Finnesey. Both have been working at the practice recently in a sessional capacity. As both are female GPs it helps redress the balance between male and female GPs which is obviously important for patients.

He introduced our two Doctors who are at different stages of training. Dr Chamaale Dooldeniya (ST3) and Dr Olivia Ford (F2). [See our website for more information and photos.](#) One of the members gave some positive feedback about a recent appointment with Dr Ford.

The practice list remains closed to new patients other than people moving into the same address as family members who are already patients.

The non-GP workforce is very stable and we benefit from the accumulated experience of the nursing and reception teams.

We launched **e-Consult** on 1<sup>st</sup> July and it has been used by 427 patients to submit 577 e-Consults since then. It is a very robust system with extensive clinical risk management designed into it. It covers a wide range of interactions between the practice and our patients from simple admin request such as travel vaccines and sick notes through to detailed requests for clinical advice.

At its core we are trying to use it to enable patients to get advice from a doctor without having to be seen at all if that's safe and appropriate but if they do need to be seen then we aim to offer an appointment slot at a more convenient date/time without the patient having to call at 8:30 and join a long queue.

One of the group offered some feedback based on their own experience which suggested that it is working in this way at least some of the time. PA stressed though that it's a new system and will take time to bed in and for initial wrinkles to be ironed out. The initial uptake has been really good and feedback mainly positive.

The practice has introduced a series of changes to the way we communicate with to patients:

- We have launched a new website
- We have become more active on Facebook and Twitter
- We have smartened up the waiting rooms with a lick of paint in a calming light blue ☺
- We have added extra noticeboards in each waiting room
- We have added extra leaflet racks in each waiting room
- We have introduced information screens in each waiting rooms playing a rolling playlist of health-related information (no soundtrack).
- The information screens also double as call-in screens. We are experimenting with the various settings on the screens but most clinicians are choosing not to use them and to continue calling patients themselves in the waiting rooms. We are aware that not all patients can see the screens.

PA told the group that the practice had its first CQC annual regulatory review call on September 18<sup>th</sup>. This was a 90 minute call with the local inspector based around 17 questions which address the main lines of enquiry (KLOE's) that form the inspection framework. **[We received notification the morning after the meeting that the called had been positive and the inspector had not identified any indications that the quality of service we provide had changed since our last inspection]** This means that we would not expect to receive a routine inspection in the next 12 months and will have another annual call in September 2020.

PA highlighted that it is World Mental Day on 10<sup>th</sup> October and he was working with the reception team to do something in the waiting rooms and on-line to recognise this. JW said she would be happy to provide any support PA needed.

PA reported that he was in touch with the Life Rooms in Southport with a view to improving the link between them and the practice for the benefit of our patients. He also highlighted the need to be ever more aware of the well-being of our staff as the working environment becomes more challenging.

## **7. Formal AGM business**

HG (Chair) [presented her report](#) to the AGM which was received by the members present. She offered to continue as chair for a further two years. No other candidates came forward and HG was duly confirmed in the continuation of her role. All other members of the PPG were re-appointed as representatives in the group.

## **8. AOB**

KL highlighted that nobody from the practice had been attending the Healthwatch monthly steering group meetings. He said this was less important than having a member attended the bi-monthly champions meetings. He will circulate the meeting dates **[Action: anyone who would be interested in attending, could they please let HG/PA know and confirm with Healthwatch]**

JW asked if we could promote the next PPG meeting on 14<sup>th</sup> November which will be a presentation by James Moir from Hirshmans Pharmacy on the role of a community pharmacy. Paul will take care of that. Further suggestion was to have a poster advertising the meeting at the flu clinic. PA will create one. To gauge interest, booking with be required via our e-mail address [ainsdale.patients@gmail.com](mailto:ainsdale.patients@gmail.com)

HG distributed the membership forms for the Liverpool heart and Chest Hospital – these were meant to be given out at the talk in May but transport issues prevented them arriving in time.