

Meeting of Patient Participation Group, Woodstock Medical Centre

The Meeting Room, Woodstock Medical Centre

Wednesday 25 October 2023; 1830-2000

1. Welcome, introductions and apologies noted by the Chair and below:

- **Present:** David Inglis, Primary Care Team, NHS Lanarkshire, Eleanor McLean, Chair;

Colin Angus, PPG Member; Hazel Kay, Vice Chair; Neil Campbell, PPG Member; Liz Forbes, PPG Member; Elaine Young, PPG Member; John Taylor, PPG Member; Elizabeth Hunter, PPG Member; Ruth McCallum, PPG Member; Alistair McInnes, PPG member; Fiona Thomson, PPG member

Lisa Johnston, Group Ops Director, Alba Medical Group; Leanne Wales, Regional Manager, Alba Medical Group – Lanarkshire; Jennifer Boyd, Nurse Consultant, Alba Medical Group – Lanarkshire

- **Apologies:** Leonard Gray, PPG Member; Clare Baxter, Site Manager, Woodstock; Usman Rehman, GP Partner, Alba Medical Group; Rameshwer Lal, GP Partner, Alba Medical Group; Craig Cunningham, Head of Commissioning & Performance, SL HSCP

2. Previous Minutes of 30 August 2023: HK advised lack of practice attendees on minutes and apologies.

No other matters arising

3. Approval of agenda items and matters arising not on the agenda:

EMcL: Enquiry re. closure of neo-natal unit at Wishaw General Hospital.

4. Review of Terms of Reference including membership of PPG

No matters arising

5. Practice Update

i. Presentation: Key Performance Indicators

LJ talked to the findings of the September Statistics;

16703 Telephone calls received; 8207 calls were abandoned, on further review of these, over 4000 calls were made outside normal practice opening hours.

As an outcome from this, the practice will follow up with patients who engaged repeatedly during this time to ensure that they are aware of the opening times.

21194 prescriptions were issued during September. These included acute, repeat and serial prescriptions.

4354 appointments were provided by GPs, Nursing, Multidisciplinary and Urgent Care Team either face to face, by telephone or at home.

GPs worked 113 sessions over the course of the month. GP workload is allocated by session and combines patient contact (appointments) and also clinical admin (Inc. prescriptions and management of letters and documents).

7787 letters and documents were received into the practice and subsequently clinically checked to ensure all information, diagnosis and requests are being actioned.

Management of Urgent Care

LJ advised from 6 November 2023, a GP will be joining the Urgent Care Team, 3 days a week. The Urgent Care Team will be staffed by 3 clinicians working through a triage list, removing the need for patients to call between 8am and 10am for on the day, acute care.

Feedback from the administrative team has indicated the incoming call queue has been cleared of a morning between 9am and 9.30am, and on occasion before 8.30am.

LJ reflected upon the utilisation of the prescription enquiry line. Whilst having reduced operating hours, the line continues to have an impact upon productivity of the team who process all incoming prescription requests due to a high volume of calls to confirm the progress and location of prescriptions issued. The practice will engage with local pharmacies to confirm turnaround time of dispensing prescriptions to help ensure that patients are aware of this when re-ordering medication.

Feedback was offered from NC in relation to a telephone results call. LJ advised that a GP had been recruited by the organisation to provide dedicated calls to patients regarding test results. This will work towards freeing up clinical time and more effective results pathway.

JT enquired who reviewed clinical mail. LJ confirmed that clinical staff are responsible for this. The practice also utilises iGPR in relation to Non NHS requests, which releases time back to GPs to focus on patient care.

Clarification was offered in relation to the ability for patients to be seen after 10am each day. LJ and JB confirmed that either a pre-bookable in advance appointment could be offered, where available (up to 2 weeks in advance) or if an acute problem, could be managed by the Urgent Care Team that same day.

Pre-bookable in advance appointments are being released through better utilisation of the Urgent Care Team following on from additional training of the administrative team and the implementation of a new triage flowchart.

HK shared her positive experience of the Urgent Care Team.

Members of the PPG expressed that further to attendance at the Treatment Room, advice had been offered to contact the practice early morning for results. The practice will reach out to the Team Leader for the CTAC team to ask that advice offered is changed to after 10am.

DI enquired how we can best communicate this to the wider patient population. LJ suggested an open day to meet the practice team. NC suggested utilising the Lanark Gazette to offer positive new story and changes going on in practice. EMcL to share her contacts detail for the Lanark Gazette with LJ.

Other forms of communication including text messaging were discussed, however considerations require to be made to ensure that methods of communication are inclusive to the wider patient demographic. CA also suggested the right hand side of prescriptions to share information.

LJ confirmed with HK that the October Newsletter was in its final stages and will update her once available for collection and onward distribution.

Patient Feedback Survey

The practice was concerned to hear that patients were unhappy with the level of service being provided.

From 25 September 2023, when calling the practice, patients were signposted in a different way than they had been previously. The introduction of a revised triage flowchart utilised by the admin team and the positioning of an Urgent Care Team clinician to work alongside them helped ensure that patients were provided with the right care, in the right place, at the right time.

At the same time, and over a 4-week period, the practice decided to undertake a patient feedback survey to hear how satisfied or not patients were with their current contact with the practice. A total of 1557 patients took part in the survey. This included patients who received routine, urgent care, those in care homes and those who were cared for at home.

This audit was initially carried out by the clinicians within the Urgent Care Team only and in following weeks was extended to the whole practice. This was to gather evidence whether it be good or bad.

The findings reported that our patients are very satisfied with our clinical staff and the quality of their consultations. This averages between 97%-99%.

The practice recognises that there are still some challenges about how patients get in touch with the practice and this is something that the practice are looking into, however, over the same period of the survey, 70% of patients providing feedback advised that they were very satisfied with how easy it was to get through.

The practice is working to improve a number of areas including increasing pre-bookable appointments and “on the day” availability and are continuing to recruit additional clinicians over the coming weeks.

Additional information was collected about the purpose of why patients were calling the practice. This demonstrated patients were calling at peak times, between 8am and 10am for information about results and prescriptions that could have been dealt with out with our busiest period. As a result, the practice will look to make changes over the coming weeks about how patients can get this information.

The practice will continue with this quality improvement work, looking at both the good and bad as we move into the next review period.

CA shared his involvement with a recent GMS research study which showed a change in patient preference towards other practitioners, once they had the opportunity to engage with an Advanced Nurse Practitioner.

ii. Access w.ef 6 November 2023

As the practice is aware of patients queueing as early as 7am in order to make appointments and given that the winter season is approaching, to ensure the wellbeing of our patients, the practice has changed how appointments can be booked.

It will no longer be possible to make appointments face to face at reception until after 10am.

For urgent on the day need, patients can all the practice at any time of day between 8am and 6pm. The Urgent Care team can deal with acute problems such as chest infection, breathing problems, sinusitis, ear pain/infections, skin infections, chest pain, stomach pain, dizziness, headaches and constipation. The practice will re-align its administrative team to ensure there are additional team members managing incoming calls as a result of this change.

iii. Chronic Disease Monitoring (CTAC)

The practice is engaging with NHS Lanarkshire’s move to chronic disease monitoring being undertaken within local community treatment and care centres (CTAC).

Communication will go out to patients who have long term conditions at the end of November 2023 with a view to starting in December 2023.

Patients will receive a letter inviting them to arrange an appointment with the CTAC team. The patient will contact the practice to book an appointment for monitoring. Once the results of the monitoring have been received, our Nursing Team will then contact the patient to advise of next steps.

The practice admin team are undergoing training to support them with this change to ensure that they can book appointments in Vision 360 and raise test requests via Order Comms.

EH enquired with regards to how to access blood tests requested by secondary care consultants due to the new laboratory test system. The practice advised that secondary care would require to be contacted and a request made for these to be added onto the system.

DI would take this feedback to the relevant person(s).

PPG members advised that as processes have changed in the past in relation to chronic disease monitoring that it would be helpful for clarity on the new process to be shared with patients.

The use of social media in order to communicate this with patients was also raised. LJ advised that the practice is considering use of social media in general.

iv. Care Home Provision

EMcL enquired regarding the provision of care to patients who reside in care homes.

LJ confirmed the practice was responsible for the provision of care into 4 care homes and was recently advised of the closure of Orchard House and aware of a public meeting that evening regarding the future of McClymont House as well.

v. Complaint handling process

The PPG members wished to highlight that patients can also be supported through the Patient Advice and Support Service via Citizens Advice Scotland in relation to making a complaint.

LJ will also issue the practice's policy with the minutes.



AMG Complaints
Procedure 2023.doc

vi. Recruitment

LW confirmed the successful recruitment into the Office Supervisors position in Woodstock.

LJ advised that interviews were scheduled in relation to the General Manager's post also advertised.

JB advised of the addition of an Advanced Nurse Practitioner and a Trainee Advanced Nurse Practitioner to the team in Woodstock.

6. AOCB

EF reflected upon JT comment in previous minutes relating to whole time equivalent (WTE) and what WTE was there across each discipline in practice. LJ advised 113 GP sessions delivered in September 2023. A session equates to 4 hours, 10 minutes, therefore an average of 5.65 sessions offered across the 19 working days that month.

Comparisons were made against the offering of practices in NHS England. LJ advised regarding the utilisation of multidisciplinary team (MDT) in practices, the additional support of GPs for clinical administrative work, which in turn releases capacity for GPs to focus on complex cases: polypharmacy, palliation and patients with multiple co-morbidities.

Recent guidance from Scottish Government in relation to General Practice Access and the utilisation of MDT to help ensure, right care, in the right place and the right time.

JT enquired regarding the qualification of reception staff to advise who a patient should be appointed to. JB outlined the use of Training Needs Analysis across the multi-disciplinary team to outline what clinicians can see, their scope of practice and the appropriate pathway for escalation of queries to the Urgent Care Team.

Clarification was provided to JT around how a session is split between patient facing time and other clinical admin tasks; acute and repeat prescribing, referrals, provision of fit notes to provide some examples.

The PPG advised the practice of the upcoming Lanark Action Group public meeting being held on 17 November 2023.

CA sought feedback from the breast screening event in practice. LW advised that Barbara Harding, Health Improvement had a successful afternoon in the waiting area. Subsequently, the practice has had a stall in place for World Mental Health Day and will work with Health Improvement to have regular displays and patient information sessions over the course of the year.

LW updated CA further to the GP Locality Forum in October, that speakers from both Physical Activity on Prescription and Community Link Worker service on had been scheduled to meet with the practice team on 2 November 2023.

EMcL asked whether there were plans to close the neo-natal unit at Wishaw General Hospital. DI advised that he was not aware of this, but would check and feedback to EMcL.

LJ offered feedback in relation to a mental health incident that occurred in practice. The appropriate escalation pathway had been followed, however, it would have been helpful for the practice's Mental Health Nurse to have been involved to offer reassurances to the patient regarding the advice that had been offered.

Proposed date of next meeting: 10 January 2024 rescheduled to 17 January 2024 to allow PPG members to meet following festive period.

7. Date of next meeting: Rescheduled to 17 January 2024, Boardroom, Woodstock Medical Centre