

Meeting of Patient Participation Group, Woodstock Medical Centre

The Meeting Room, Woodstock Medical Centre

Wednesday 17 January 2024; 1830-2000

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

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

Hazel Kay, Vice Chair; Neil Campbell, PPG Member; Liz Forbes, PPG Member; Elaine Young, PPG Member; John Taylor, PPG Member; Ruth McCallum, PPG Member; Alistair McInnes, 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

Introduction to Lisa Bartkus, Site Manager, Alba Medical Group – Woodstock

- **Apologies:** Colin Angus, PPG Member; Elizabeth Hunter, PPG Member; Fiona Thomson, PPG Member; Usman Rehman, GP Partner, Alba Medical Group; Rameshwer Lal, GP Partner, Alba Medical Group; Craig Cunningham, Head of Commissioning & Performance, SL HSCP; Alistair MacKintosh, Primary Care Manager, NHS Lanarkshire.

2. Previous Minutes of: Wednesday 25 October 2023

Minutes approved by those in attendance.

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

Action points from previous minutes;

- Closure of neonatal unit – update provided by DI
- CTAC information – only
- Access results from secondary care requests; lack of result – PPG member to engage with JB to discuss further.

4. Review of Terms of Reference including membership of PPG

Agreement for PPG members to review the Terms of Reference at their next scheduled meeting; consider any amendments in relation to main objectives of the group and feedback to the practice.

Confirmation that the Terms of Reference is as per Health Improvement Scotland paperwork.

5. Practice Update

Those present were introduced to Site Manager, LB who joined the team in Woodstock early December 2023.

Update on access and practice improvements

The practice shared that the Dashboard is now being provided on a monthly basis; shared on Facebook, in practice newsletter and practice website.

Best practice reflects appointment capacity between 72 appointments/1000 patients/week and 5 appointments/patient/per year. Our data collection reflects that we are providing more than best practice.

The practice team moves into a new 4-week cycle of the patient survey and will share feedback once reviewed and reported. First week highlights show positive patient feedback in relation to additional survey questions posed regarding utilising a different way to access care; electronically.

The PPG were provided with an information leaflet regarding electronic access; a different way to access care, reducing the need to access the practice by telephone and in turn allowing those who require to contact us by phone to make this process easier.

DI offered an overview of GP DACS, the platform preferred by NHS Lanarkshire and its benefits for both patient and practice. Widely used across other practices; reduces pressures, patients can get direct access from their phone or device of their choice to make contact with practice and then go about their day without need to wait on the telephone. DI advised of useful video links to demonstrate how the platform is used.



How to use askmyGP.mp4

EF enquired re. utilising GP DACS on behalf of another person. LJ confirmed that additional governance guidance re. third party confidentiality would require to be sought.

The team were pleased to advise that another whole time equivalent ANP has been successfully recruited into post.

A change in culture has started to be seen within the community with reduced negativity, which is welcomed by everyone.

The Lead Pharmacist from Lanark Pharmacy will be invited to attend a future PPG meeting to give an overview of services available in pharmacy and a focused service in relation to the management of chest infections. Nurse Consultant JB will work alongside the Pharmacist in this regard.

LB advised currently recruiting into 3 administrative posts with start dates from end of January to end of February scheduled.

LB outlined plans to review internal aesthetics and utilisation of waiting room for effective sharing of information including televisions.

LB advised of plans for a future Menopause Group event to be co-ordinated by the practice's Mental Health Practitioner. Information will be shared once this becomes available.

Communication strategy

LJ provided an overview of the improvement plan in place and outlined engagement with Healthcare Improvement about upcoming health days/events and stalls in practice.

EM made a request for visual charts to be added as part of the practice newsletter; bar charts to show progress across each month, rather than stand-alone figures.

Consideration in relation to the newsletter's design and colour schemes used to enable ease of reading was put forward by EM also.

Action: review of messages associated with the telephony system and the duration of these; feedback is that messages are quite lengthy and may still offer historical information regarding call in times.

The dedicated prescription enquiry line will be also be reallocated, with all staff able to assist with any queries as they arise.

LJ is keen to have an appropriate mechanism in place to capture positive feedback and share this across our social media platforms as go forward with improvement work.

CA has advised that he will take forward communication; for members of the community to contact the PPG; looking at engagement via email with links via practice website; creation of a dedicated PPG facebook page. Consideration of PPG member visibility in practice at set times. The addition of a strapline to the PPG Board in practice to advise of the PPG members and utilising the board to share information about upcoming health events.

Demographic of patients

LJ confirmed practice has an older population.

Action point: PPG would like information on age cohorts.

The practice team updated the PPG in respect of patients identified as housebound and given the overall population size, the practice would have expected a higher number.

JB is liaising with District Nursing team to assist in the identification of housebound patients for which a marker and alert can be applied to their record to highlight this.

JB advised that housebound status can change for a patient dependent upon their health.

Action point: Practice will look to raise awareness with patients about ensuring if they are housebound to update us of this.

Hospital at Home

LJ confirmed this is not information that we actively record.

JB has reached out to the Hospital at Home team for an overview of patients being referred into the service. A manual log will be retained in practice to monitor referrals into the service over the upcoming 4 week period.

Update to be provided at next PPG.

EM noted that a higher volume being referred in by secondary care.

Chronic Disease Monitoring (CTAC)

LB advised monitoring via local treatment room teams is up and running; started 8 January 2024.

Patients are being recalled by month of birth by letter and staggered over the course of the month and cover a variety of disease areas including, Asthma, COPD, Diabetes, Coronary Heart Disease, Hypertension to list a few.

It is expected that over 3500 patients will be called to attend for monitoring.

LJ expressed that this has been a positive progress for chronic disease monitoring with engagement and uptake being monitored closely by LB.

JT offered praise in respect of what is now being offered in comparison to what had been offered historically.

6. AOCB

PPG have sought a concise minute be issued; agreement for PPG to review minutes and then decide required actions and what from the minutes should be included as part of this.

LJ advised that it is important a full version is also available on the practice website to ensure that there is transparency from the practice regarding their minute.

Future of care homes; public meeting being held on 25 January 2024 6pm – 7pm, there will be attendance from Lanark Community Council, local community groups and a member of the practice team has advised they will also attend in order to obtain and update.

EM offered feedback on a Health Fayre recently attended in Biggar. Attendees included dental practices, opticians, pharmacists, Citizen's Advice Bureau and teams from secondary care with basic health checks being offered i.e. Blood pressure checks.

LJ advised this is something the practice could look to aim towards the end of the year; review the calendar of health events, in the interim.

EM enquired whether the practice would fund the cost of the event; cost of hall.

Consideration of St Nicholas hall for this event, premises is fully accessible.

LJ asked the PPG to engage with local businesses regarding having a presence to facilitate catering stalls.

LJ will speak with Health Improvement Lead.

DI will provide contact details for independent contractors within the locality to allow engagement.

- 7. Date of next meeting: 6.30pm – Wednesday 28 February 2024, Boardroom, Woodstock Medical Practice.**