

Meeting of Patient Participation Group, Woodstock Medical Centre

The Meeting Room, Woodstock Medical Centre

Wednesday 28 February 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; Colin Angus, PPG Member; Elizabeth Hunter, 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, Lisa Bartkus, Site Manager, Alba Medical Group – Woodstock; Mo Hameed, Pharmacist, Lanark Pharmacy
- **Apologies:** Alistair McInnes, PPG member; Dr Usman Rehman, GP Partner, Alba Medical Group; Dr 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 17 January 2024

Minutes previously approved by those in attendance.

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

Added:

- Audiology
- Health Fayre
- Letter from Mr Noble

4. Review of Terms of Reference including membership of PPG

PPG members reviewed the Terms of Reference at their last scheduled meeting; change agreed and revised TOR to be uploaded to PPG page on Woodstock website.

5. Lanark Pharmacy

Those present were introduced to Mo Hameed, Pharmacist, Lanark Pharmacy - an independent pharmacy that opened in the old Lloyds Pharmacy site on Lanark High Street September 2023.

Operates Pharmacy First service whilst working closely with Woodstock Medical Centre, Nurse Consultant Jennifer Boyd and Urgent Care Team. The Pharmacy will see walk in patients presenting with problems such as sore throats, ear infections, chest infections and urinary tract infections. The Pharmacy team will see and offer treatment, where appropriate in a timely fashion. Prescriptions issued as part of the Pharmacy First service are shared with the practice at the end of each month. If the Pharmacist is unable to manage the patient case in pharmacy, the patient will be actively referred to the practice.

MH discussed the need for development of a more robust mechanism for referral processes i.e. protocol. It was agreed there would be benefit in regular meetings between the practice and pharmacy. LB will make arrangements to take this forward.

MH highlighted areas for improvement around administrative practices; ensuring following up of patients referred by pharmacy; prescriptions being available within appropriate timescales; communication to pharmacies re: schedules; team members not providing names during calls; follow up of patients presenting to Out of Hours.

LB outlined staffing pressures, sickness absences on top of planned leave which can impact on delivery of services, for example, the expected turnaround time for prescriptions.

JB spoke around reporting workload pressures during the cross Lanarkshire daily huddle and communicating delays to the pharmacy.

LJ suggested communication to increase patient understanding around prescription timescales on FB page and website. It was suggested that another point of contact within the practice for MH could be the clinical pharmacist, Sadia.

EH raised online ordering queries and patient information around “processing prescriptions” for example what does “processed” mean – could we put a flow chart and information on FB?.

Are electronic prescriptions possible? Patients are unable to print out their own prescriptions.

LB to consider utilising Social media to post weekly pharmacies turnaround times. Online prescriptions can show as being “in progress”, but can actually be processed.

MH was asked about supply issues – MH advised yes, items can be out of stock, over tariff price, but as an independent pharmacist they can approach other wholesalers – this is something that affects all pharmacies. MH said he thought their prescriptions were going to other pharmacies even though the patient choice is Lanark pharmacy however, LB advised some urgent prescriptions are taken to pharmacy next door rather than Lanark pharmacy. This is due to staff taking initiative around this due to patient choice if they live closer to surgery. Also if a patient collects their prescription they are free to take to any pharmacy.

Jenn B, Lisa B and Sadia will have regular meetings in order to discuss the processing of prescriptions and allocation of workload to keep them processed in a timeous manner.

Mo will be given a contact telephone line so that he could call up to the practice for urgent referrals.

6.

a. **Update on access and practice improvements**

JB talked about access and patient experience from survey update. Around 1900 patients participated in recent survey with 99-100% saying they were satisfied after an appointment was secured. A change had been introduced during this survey whereby there was follow up by phone to complete survey. The overall results on this occasion remained similar with 99-100% satisfaction in relation to quality of care and satisfaction about care received.

However, the results relating to contacting the practice and satisfaction of admin experience would indicate there is more work to do and improvement is required. Overall there were some good comments and a bit more feedback than previously. There were comments about Lanark Action Group raising concerns around clinicians and patient continuity, specifically staffing numbers of GP's and ANP's.

A new question was asked of the patients participating about contacting the practice electronically and over 85% would be in favour of online facilities. There are plans to do the survey on an ongoing quarterly basis.

b. **Electronic Triage - AskMyGP**

An overview of this electronic system was provided. Contact will be encouraged via this platform; however, telephone lines will still remain for those who cannot access services online.

The first planning meeting has taken place and staff training will be underway throughout March and April, firstly for chosen Super users, then reception and admin staff followed by clinical staff. Information gathering, system set up and second planning meeting will take place over the coming weeks with an expected roll out towards the end of April 2024. The AskMyGP team will be on site for the first couple of days from “go live” date to support us in the transition and will attend the next PPG meeting. The system should see a reduction in access via the telephone system by around 70-80%, provide easier mechanism for contact and access and remove the need for appointment queuing at 8am.

c. Communication

The February 2024 dashboard figures, newsletter and survey results will be out in the next few weeks. Feedback around the copy quality and colours used was offered by the PPG. It was noted that just prior to the meeting, the newsletter was amended to white paper with blue background bubbles and a bold print, which was much easier to see and read.

The practice will ensure that future copies being collected for distribution will be a better print quality. The template for the newsletter will change to a version which will have the appearance more akin to a mini newspaper style with columns, text and pictures.

Text messaging is being looked into as an alternative to postage of letters as a way of contact with patients. This will reduce postage costs however letters will continue to be used where the patient has no mobile contact available.

PPG engagement and communication with local community was discussed. Lanark Action Group have commented on how to contact the PPG. It was thought that Facebook and Messenger chat, communication boxes in Tesco, Cargill, Morrison's, The Tollbooth and Boots may help.

A proposal for 10 boxes possibly being created by Men Shed for communication boxes with text “Your Voice Matters”. One could be placed with one in the practice with an A5 feedback form for the practice to print out to enable patients to complete and put in the box. PPG members will review and reflect on common themes and feedback to the practice at meetings. LB will take a photograph of the PPG committee members names from their information board then update this on the newsletter. FT raised thoughts around PPG reaching the wider catchment area and not just Lanark and thought that this would be worth considering.

d. Chronic Disease Monitoring (CTAC)

LB gave update on CDM meeting with the Treatment Room (CTAC) staff from the Health Centre. A few instances where urine sample labels were not available to print, which was reviewed and resolved. 250-300 invites were sent out during February. Those letters had language amended and content tweaked in order to be more specific for patients around what disease the bloods and appointments are for. It was decided to refer to Chronic Disease Management to “Long Term Conditions”. The uptake from letters sent is around 70%. JB advised the “Did Not Attend” follow up is still a work in progress.

e. Care Navigation/Admin

Two more admin team members joined us in February, currently still in training and getting on well with the role. There is still more work to do in specific areas but at the moment they are focussed on reception, prescriptions and admin work. NC asked how staff are feeling. LB advised there are good days and not so good days but varies over the course of the week and we continue to work with them and support them as best we can. There has been improvement in cross cover within the team and LB has a plan regards moving this forward after a period of time to allow the new additions to get settled in first.

AOCB

Health Fayre - EMc is in contact with C Cunningham around the cost of the Health Fayre – hire of hall and publicity. He has emailed colleagues in and around Child Healthy Way and Smoking cessation. St Nicholas Hall has proposal of dates – 7th, 14th or 21st September.

DI will share contractor information with EMc. LJ suggested calling it “Health and Wellbeing Fayre”. Possible communication (video) on FB page, promotion of uptake – GP DACS and online prescriptions.

EMc – Wi-Fi in premises, power? Catering suggestions of Fruits, Healthy eating items. Need to establish capacity in the hall and priority of those in attendance.

Will need a map of the hall, table number and representatives. *Survey monkey or Survey on Facebook* - to capture the interest of patients around what they would like to see there.

Date of next meeting:

6.30pm – Wednesday 24 April 2024, Boardroom, Woodstock Medical Practice.