

# **Minutes of the Wellington Patient Participation Group (PPG) joint meeting with the Practice**

**Held on the 14<sup>th</sup> of March 2023 (17.00 – 18.00 Hrs on zoom)**

**In attendance- Tania Burrows (practice patient engagement and compliance lead), patient representatives –Lisa Topple, Ros & Gerald Clift, Kate Ballinger, Deb Cachia (Vice Chair) and Dave Morgan ( Chair)**

- Minutes of the last meeting held on the 10<sup>th</sup> of January 2023 were approved and there were no matters arising from those that would not be covered on the agenda.

## **PCN appointments performance chart and related discussion**

The Chair had previously circulated the performance charts created by Telford Patient First from accessible downloadable statistics. The performance charts circulated explained the different parameters of performance between Telford & Wrekin Primary Care Networks (PCN's) and a PCN in Taunton Vale, Somerset.

This was deemed even more appropriate because some of the performance issues had been raised with members of Telford Patient First (TPF) on their attendance at a Telford & Wrekin Health Scrutiny Committee (HOSC).

HOSC members had been given information regarding what was seen as better performing and different patient telephone system within that PCN and wanted to discuss what was possible in our networks.

All the issues were talked through and questioned regarding performances but overall there needs to be a better understanding generally of the contractual obligations within the network. Not all PCN contractual requirements are the same, dependent on the areas within the UK, the demographics and needs of the population, and the setting of the requirements by area Integrated Care boards. Additionally, not all the telephone systems are of the same type with the same number of lines and in many instances they are not compatible with each other, even within their own networks (PCNs) which adds to patient confusion.

Face to face (F2F) - Telephone appointments, seeing doctors and other qualified medical staff, Wellington Medical Practice compares favourably with other practices locally, each with its own difficulties.

Tania found the shared charts very useful and enquired if these can be shared and used more often as together, we are able to verify performance against actions.

The Chair explained that he would forward any information on when it was possible.

Members considered this particularly useful for them; it provided information on which it showed the differences for each practice with its performance.

## Call waiting and telephone systems

Tania explained that Wellington practice already does have an 80-line system which deals with incoming and outgoing calls.

That it about to be further enhanced by the recent procurement of a '**call back system**.' This will stop the need for the Wellington patients to continue to hang onto their live call into the practice. Once they have secured a queue number, the system will then advise patients that a call back will take place once their logged call reaches the front of the queue.

This will reduce the costs to patients and hopefully reduce the stress induced by having to hang on (sit on the telephone) for varying periods while their enquiry is dealt with.

All members considered this a great step forward and the Chair asked that this information be shared with the local press and on the practice website once it is installed; it's positive news for patients and should be shouted about. The fact that the practice has more than one line in and out during the day and up to double figures in operators' numbers taking calls during busy periods is also very positive.

## Practice concerns and updates

Tania explained that it was mainly recruitment for call handlers that takes time and uses their resources on repeated occasions. On the more recent recruitment drives; there have been seven periods of these in the last twelve months, the number of applications received recently was **211**, this was sifted down **130** and further detailed down to those with suitable qualifications and experience to **37** people.

**37** people were asked in for interview, out of those only **11** attended, one person was offered the job. The practice has to be open, honest and realistic about these roles and the responsibilities required within that grade. The individuals, once offered the job, are shown the call dashboard, the systems, and have their prospective roles fully explained. On employment each individual has be-spoke training depending on their requirements and strengths. They will have all Human Resource (HR) explained, including abuse and what action they should take. All of this is worked through over numerous days. They will then shadow other practice employees, gain personal experience whilst being supervised before being asked to work fully alongside their colleagues in their specific roles.

Members asked whether these roles are full and or part-time and has the practice ever considered sharing these roles with other practices?

Tania explained that all avenues had been explored to date, this is often talked through with counterparts in the network practices who face the same situation. It would also be difficult to work across the practices as they work in different ways. The practice has part-time as well as full-time call handlers.

A question was asked regarding apprenticeships, and can this be shared between key local partners within the region? For example, between Health Care, Telford & Wrekin, the Hospital and the Practice?

Have the Integrated Care Board (ICB) been informed about all these difficulties?

Tania explained that the ICB have been fully informed on these problems which are not new but continue causing pressure. No additional advice has been received back from them as far as she is aware. On apprenticeships, yes these have been tried previously and the roles probably need life experience so may not be suitable for school leavers but the practice did previously have two apprentices which lasted about five months.

The pressures seem too great for some younger people, perhaps it's life experience, perhaps it's pay, but pay is confined to the banding grade.

PCN updates: two GP assistants to be recruited. These GP assistants will help and prepare patients e.g., take blood pressure, temperature and other pre-checks prior to their appointment with the GP or other clinician. It is a different role to that of a nurse. They will have had six months training prior to being appointed. This should help patients feel more comfortable and speed up the process.

Members then asked if we still did patient satisfaction surveys. If so, could one be done now and again in six months to give feedback on this new service?

### **Patient information and its communication**

MJOG: can we make sure that all patients receive texts, where applicable, as some patient members are no longer receiving them. This may be reflected throughout the patient population.

The lack of display monitor and PPG minutes was brought up. Tania informed us that it needs constant updating, taking valuable time. They are looking for a cleaner, fresher look. All relevant information is on the website. PPG minutes will be put on the website once approved. A copy may be obtained from the surgery.

The Chair also mentioned that growing a PPG is not just a problem for Wellington. After recently attending a Dawley PPG meeting, he was informed that they had the same issues and were changing times and dates to facilitate potential new members.

### **Hospital Transformation Programme (HTP)**

The Chair, supported by Kate, stressed the importance of getting involved with the transformation programme of the Shrewsbury and Telford & Wrekin hospitals (SaTH). All information has previously been forwarded to the PPG members regarding the focus groups which are:

- **Medicine and Emergency**
- **Clinical Support Services**
- **Women's and Children's**
- **Planned Care**

There are also 2 focus groups which are:

- **Travel and transport**
- **The new front entrance to PRH**

For the new hospital entrance and other changes please go to [Significant investment for the future of PRH in Telford \(shropshirelive.com\)](https://www.shropshirelive.com/news/health/significant-investment-for-the-future-of-prh-in-telford)

**AOB:** At the next full joint meeting Tania will introduce two staff members.

**Next meeting – 4<sup>th</sup> April 2023 at 5pm (Group members meeting only)**

Please indicate to the Chair and Vice Chair whether or not you are attending the meeting.