

The Family Practice Western College

Patient Participation Group

Resume of the meeting held on 4.10.2022 via Zoom

Present:

Ann Nicholls
David Shelton (Chair)
Dr Baker (GP)
Kathy Turner
Adrian Longstaffe
Keith Dawes
Ian Goodenough

Nick Benson

Apologies:

Jill White
John Plumb
Ann Hannay
Penny Dobson

1. Welcome.

DS welcomed members, Kathy Turner and Dr. Baker to the meeting.

2. Apologies.

Apologies were received from Jill White, Penny Dobson, John Plumb and Ann Hannay

3. Minutes of last meeting (16 March 2022)

Minutes were approved

4. Matters arising:

Clarification on the aim to return to “normal sessions”.

Dr. Baker stated that this is continually under review – in future the hybrid appointment system of face to face and remote consultation will continue as this suits many patients and circumstances and enables the practice to deal with more patients and clinicians. Western College is operating at capacity (particularly consulting rooms) which constrains the practice in what it is able to offer. Remote services provide for greater flexibility as well as being necessary.

Patients are also encouraged to use eConsult for clinical issues and the Contact Us form for non-medical issues – all accessible on the website.

Dr. Baker also explained the use of the text message service which, where appropriate, enables a short dialogue between the practice and patient, or can be “one-way” with the provision of information such as test results. Each Doctor determines how this will be used.

Addition of monthly DNA statistics to the telephone message and addition of telephone line dedicated to cancellations.

KT explained that the addition of monthly DNA statistics to the telephone message could involve additional costs (£72 per change/addition) and that this was not justified. It was also noted that over 90% of patients have mobile phones and receive an appointment reminder which has the simple facility to cancel if necessary.

Updating of website.

Job vacancies section is now up to date. It was noted that the physiotherapy team is provided by an external organisation and is subject to change, hence it is not possible to include this team on the website due to the problem of short notice changes in personnel.

5. Mental Health Services

It was noted that the Mental Health Nurse had left and that the PCN (FP, Whiteladies, Pembroke Road and Student Health Service) has recruited a replacement who is currently working with the Student Health Service, which has a high level of demand for mental health support.

There is a specific stream of funding for these posts along with Social Prescribers, Physiotherapists and others which means that appointments are made by the PCN and not individual practices.

6. Changes to service provision

This refers to a wide range of services (e.g. ear wax removal, wart treatment, varicose vein treatment etc.). Many of these services have been removed or reduced over time. Dr. Baker explained that, in some cases, there were clinical or safety reasons for this whereby treatments had to be undertaken with specialist equipment or techniques not available to the Practice. However, the main reason for withdrawal of services is related directly to the withdrawal of funding by the Integrated Care Board (previously Clinical Commissioning Group) which manages a complex system of funding for an extensive range of services and will be balancing cost with health benefits.

Here is a link to the ICB home page which includes a further link to surveys and consultations:

[Homepage - NHS BNSSG ICB](#)

7. Providing Constructive Feedback to the Practice

PPG members stated that they wanted to work with the Practice to provide feedback in a useful and non-judgemental manner. This was in the context of extremely high levels of demand for GP services and similar extreme levels of resource constraint which can result in a degradation of service.

It was agreed that a simple feedback form be designed and that 2 members of the PPG would meet with KT every 2 to 3 months to discuss feedback and how the practice would be able to respond. AL volunteered to support this initiative.

8. Business and Strategic Manager Report

The practice is currently fully staffed for both GPs and Care Co-ordinators. This is in the context of a very competitive market for both groups with many vacancies across Bristol.

Staff changes are as follows:

- July – Dr Ruth Bowen 5 sessions recruited
- August – Dr Emily Beirne 6 session recruited
- August – Dr Abi Ward returned from Maternity leave. Dr Richard Jefferies was recruited on a permanent contract to cover her maternity leave and he is surplus sessions now
- Reception team now fully staffed but many are on the learning curve. Note that the ICB has reported a 35% vacancy rate for receptionists in the region.

The DNAs for March to August are as follows: (Doctors followed by Nurses)

Report Name: DNAs 2022 (GP) - Flu excluded - Mar-Aug 2022

	Appointment Date	Mar	Apr	May	Jun	Jul	Aug	Total
Patient Age								
0-17		12	7	7	10	7	3	46
18-39		35	19	22	26	14	24	140
40-64		17	15	17	34	11	14	108
65 and over		17	9	12	19	13	9	79
Total		81	50	58	89	45	50	

Report Name: DNAs 2022 (Nurse) - Flu excluded - Mar-Aug 2022

	Appointment Date	Mar	Apr	May	Jun	Jul	Aug	Total
Patient Age								
0-17		19	4	4	10	15	13	65
18-39		39	23	42	19	35	36	194
40-64		16	17	26	19	20	22	120
65 and over		11	7	16	13	13	10	70
Total		85	51	88	61	83	81	

It should be noted that DNAs cover non-attendance for face to face and telephone appointments. It was also noted that the numbers cancelling were far lower than the DNA numbers.

9. GP Report

Dr. Baker stated that the Practice is very aware of the range of issues which concern patients and emphasised that much time is devoted to how services can be best organised and delivered. There are no additional funds for building which means that the premises present an ongoing operational constraint which influences accessibility to services and the mix of service between face to face and remote.

10. AOB

There was a short discussion on telephone access and the resourcing of telephone answering was explained along with the previous acquisition of additional lines. The practice now has 17,500 patients (10,500 in 2008) which demonstrates how demand exceeds supply across the full range of services.

A number of issues were raised about the Website which were deferred to the next meeting.

The requirement for be-friending to be undertaken by RSVP Volunteers was discussed as a recent volunteer had been interviewed and assessed but had not been requested to contact any patients. KT agreed to check if there had been any recent referrals for be-friending.

Actions

- Confirmation of feedback form and related process
- Check be-friending referrals - KT

Date of next meeting

Monday 5 December 2022