

Patient Participation Group (PPG) of Watership Down Health (WDH)

Minutes of the WDH PPG Meeting held from 5pm to 6.30pm on
Monday 30th October 2023, by teleconference

Susie Altmeyer-Ennis	Practice Business Manager of Watership Down	“SAE”
Abigail Compton-Burnett	Patient Representative, based in Oakley	“ACB”
Brian Elkins	Patient Representative, based in Overton	“BE”
Lisette Kay	Patient Representative, based in Oakley	“LK”
Ian Pryce	Patient Representative, based in Oakley	“IP”
Lucy Richards	Patient Representative, based in Kingsclere	“LR”
Nicky Tufnell	Patient Representative, based in Kingsclere	“NT”
Dr Judy Lindsay	GP Practice Partner	“JL”
Faye Collins	Advance Nurse Practitioner	“FC”
Jess Harrison-Crowley	First Contact Practitioner	“JHC”

Apologies: Sarah Arnold

1 Actions from the last meeting

Put posters in the notice boards when they have been installed	ACB – notice boards to be hung on 14 th Nov
Draft posters outlining the benefits of the PPG (IP) and listing the PPG Committee members	Completed
Suggest the topic, date and venue for the next health education event	WDH
Comment on the protocol by 30th November	All PPG members
Discuss PPG involvement when the dates of the review of end of life care have been announced – on hold for the current time	WDH
Decide whether to ask the Friends of Watership Down Health or another organisation to buy baby scales	WDH and PPG
Send the Whitewater Health Pharmacy Project report to the PPG and WDH	Completed
Establish a group to work on pharmacy-related issues	1 Clinical Pharmacist has come forward – Shervin Bahader

2 Minutes of the last meeting

Agreed

3 The role of the First Contact Practitioner (FCP)

The FCP assesses, diagnoses and plans the management of patients with Musculo-skeletal (MSK) problems. All MSK appointments should come through the FCP, so the GP does not need to be involved.

JHC is concerned that patients don't understand the role of the FCP, so they are often disappointed when they receive a diagnosis, advice and a plan for the management of their condition, rather than treatment at the consultation.

IP agreed that many patients don't understand the role of an FCP and still think that they always need to see a GP.

LR suggested that the key was to manage expectations.

BE suggested that the FCP should take the patient through the suggested exercises once, in order to help the patient to understand and remember them. JHC noted that FCPs would be able to run through the exercises with patients during a 20 minute appointment.

JL suggested that JHC should write a "this is me" note, which patients can be given prior to their appointment, in order to manage their expectations.

IP suggested that the role of the FCP should be explained when a patient is triaged and the patient should be asked "if I sent you a message to explain a bit more about your FCP appointment, where would be the best place to send it, e.g. text, email". SAE suggested that ACCURX could then we used to send the note to patients a week prior to their FCP appointment.

JHC asked whether patients would find it helpful to receive soft tissue injections from an FCP, rather than waiting for a GP to give the injection.

PPG members agreed that it would be helpful for FCPs to give injections, in order to reduce waiting and the burden on GPs. It was important to minimise confusion about MSK giving injections, but not providing other treatment.

BE suggested that MSKs should provide feedback on x-rays. JHC responded that only GPs could request x-rays, so she rarely saw the x-ray, because it was sent directly to the GP.

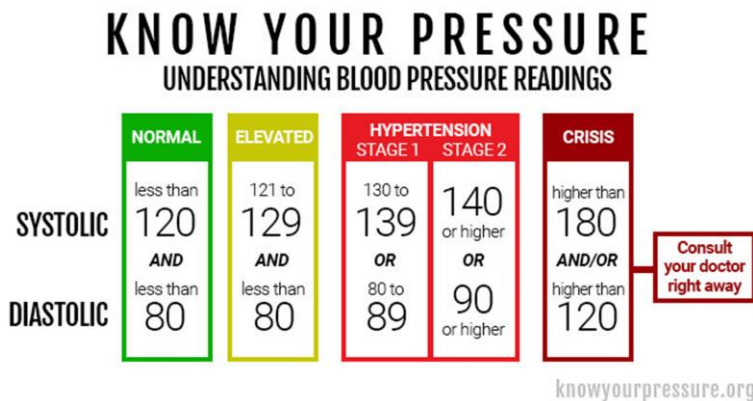
Actions:

- **Write a "this is me note" for Practice Staff, waiting room notice boards, website and newsletter (JHC).**
- **Check that all Practice Staff understand the FCP role by attending a Practice Nurse and Reception staff meetings and sending a "this is me" note to GPs (JHC).**
- **Ask Practice Staff to explain the FCP role to patients when they book an FCP appointment and ask the patient where they can send a message with more information, e.g. text, email (JHC).**
- **Arrange for a message explaining what to expect from the FCP appointment to be sent to patients prior to the appointment (FCP).**
- **Give feedback to patients on x-rays for which she has requested GP referrals (JHC).**

4 Improving services for patients who haven't had their BP taken for over 5 years

FC described a recent patient story which illustrated the importance of a regular BP check. FC explained that she was working with clinicians and patients to find out how best to help patients to understand the importance of BP checks.

FC said that the patients that WDH most wanted to reach were those who didn't think that their BP was an issue and who rarely, if ever, contacted WDH. FC presented a poster encouraging patients to check their BP that the NHS has recently released (please see below).



The following suggestions were made:

- Include additional information on the Know Your Pressure poster:
 - Locations where patients can check their blood pressure to the bottom of the Know Your Pressure poster, eg GP surgeries, pharmacies.
 - Take your blood pressure again if it's in the red box, in case the first reading was inaccurate.
- The practice is contacting patients whose blood pressure had not been checked for over 5 years
- Place the Know Your Pressure poster in every surgery waiting room and include it in the PPG newsletter.
- Post Know Your Pressure posters on the back of loos in pubs and on village notice boards.
- Ask pharmacies to put up a Know Your Pressure poster.
- Ask local schools to send out information to parents through Parent Mail.
- Ask local community facebook groups and email distribution lists to send out Know Your Pressure posters.
- Ask the Coops in Oakley and Overton whether they can install a blood pressure monitor and a Know Your Pressure poster. It was noted that static monitors are very expensive and need to be regularly checked and sent for servicing.

- PPG members to take blood pressure monitors to pubs, so patients could check their blood pressure. It is much easier for people who are not health professionals to take monitors to locations outside the practice. Concern was raised that this approach carries risks, eg how the PPG member should respond if a high BP is recorded.
- WDH to consider whether they can invite patients to BP check evenings, when the new health pod has been installed.

Action: Review ideas for encouraging patients to take their blood pressures and ask PPG members to help, where required (FC).

5 Practice update

- New GP Retainer: Dr Emily Kaye will start on 6th Nov 2023 for 4 sessions a week and 1 as a GP Fellow
- New GP: Dr Miranda Gough will start between now and Christmas for a fixed period.
- Data and Digital Transformation Manager: Ben Sinclair started 30 Oct 2023
- Andover MIND posts to start shortly: Carissa Pugsley Mental Health Peer Practitioner and another MH Well-being Practitioner will start in January 2024.
- Cancer Care Coordinator interviews will be held on Wed 01 Nov 2023.
- Overton Surgery Car Park: Hampshire Highways notified further works on Station Road – 30 Oct 2023 for 2 weeks. Practice to put up a fence between the gully and the car park.
- Health Pod for Overton Surgery as a trial
- Tadley has implemented a new NHSE model, in which all patients go through a triage system, so that they can be referred to the appropriate practice team member. Some practices believe that the model provides a good service, but some practices and patients are worried that it might put a barrier between the patient and GP.

6 GP workforce data

SAE shared the following information with the PPG members. The latest GP Workforce data has been published showing that the number of fully qualified GPs continue to decline and in August 2023, the NHS in England had the equivalent of 27,246 fully qualified full-time GPs, 2,118 fewer than in September 2015.

The longer-term trend is that the NHS continues to lose GPs at an alarming rate: over the past year the NHS has lost the equivalent of 269 fully qualified full-time GPs. The number of practices in England has also decreased by 110 over the past year – and as of August 2023, there was another record high of almost 63 million patients registered in England, with another record-high average of 9,872 patients registered per practice (WDH is now just under 19,000 with an additional 8,000 homes due to be built within our boundary area over the next 10 years). This is an increase of 363 patients per GP, or almost 20% since 2015, demonstrating the ever-mounting workload in general practice.

7 PPG projects

- Recruit new PPG members. The new notice boards will include information about the work of the PPG and an invitation for patients to join.
- The new notice boards for PPG messaging to patients will be installed on Tuesday 14th November.
- Offer some health education events. It was suggested that a Health Education event focusing on hypertension could be held in January. JL observed that around 20 patients had attended pre-COVID health education events, but many patients might now find on-line events to be more accessible.

Action: Confirm with PPG members whether an in-person or virtual health education event focusing on hypertension will take place in January (FC).

8 Flu and Covid vaccinations

Covid Vaccination Update: Programme started on 11th September 2023.

72% of “at risk” patients, including over 65s, Care Home Residents/Housebound have been given vaccine – most within our surgeries.

Flu Vaccination Update:

- Over 65s – 48% given
- 18 – 64 at risk – 35% given
- Under 18 – 8% given
- 2 -3 yr olds – 33% given

The next Flu and Covid clinic will be held on 11th November 2023. It is already filling up well.

9 Local pharmacy services

PPG members reported that there were still problems with local availability of medication. ACB suggested that it might be helpful for the practice pharmacist and hospital pharmacist to discuss ways in which they can work together to minimise the impact of the supply problems. JL noted that the problems with prescription and medication dispensing were complex.

10 Newsletters

IP suggested that it might be helpful for PPG Newsletters to focus on two key topics, eg the importance of checking BP and the role of the FCP.

Suggestions for the December newsletter included:

- The Know Your Numbers poster, with additional information regarding locations of BP monitors and importance of retesting blood pressure if the reading is red.
- Role of the First Contact Practitioner

Christmas opening times for the surgeries. It was suggested that the times might be an additional note in local magazines, so that the newsletter could focus on hypertension and FCPs.

11 North Hampshire PPG

IP has resigned from the North Hampshire PPG. He invited other members of the PPG to take his place.

Action: Tell ACB if you want to be part of the North Hampshire PPG (all PPG Members).

12 Any other business

Preferred method of contact

IP noted that many people have given their phone numbers to WDH, but they don't turn on their phones. It would be helpful for WDH staff to ask patients how to contact them, eg text, email or phone, whenever possible.

SAE noted that WDH asks patients to confirm their preferred method of contact when they register with the practice and when they request an appointment. The preferred method of contact is recorded on EMIS.

In addition, SAE sends a letter to patients who appear to have no digital means of communication, asking them to reconfirm their contact details.

Virtual group consultation pilot

WDH has run a virtual group consultation regarding the menopause for a pilot group of 20-25 patients. The consultations are held in the evenings, because that time works best for the patients. Patients discuss the condition as a group, having agreed to respect the confidentiality of the discussion. They then have 1-1 consultations with a GP as required. It is hoped to offer more.

The pilot will be evaluated in order to decide whether to hold further group consultations, the size of group and suitable conditions for the consultations. The significant work involved in running the group consultation will be included in the evaluation. LR suggested that non-clinical staff or volunteers might be able to help with the workload.

Action: Ask Dr Robinson whether it is possible to put the Video of the Menopause information on the Web Site/FaceBook (SAE).

IP suggested that men's health would be an ideal focus for virtual group consultations.

SAE clarified that the Hypertension Protocol that had been circulated to PPG members is for practice staff and it is written in language which the clinicians need to understand.

Action: Submit comments on the hypertension protocol to SAE by 30th November (all PPG members).

13 Next meetings

8th January

28th February