

Chairman's Annual Report 2023 (1 April 2022 to 31 March 2023)

I am pleased to present the 2023 Chairman's Annual Report of [Barnabas Patient Voices](#), the Patient Group for Barnabas Medical Centre.

Summary

1. This has been another abnormal and frustrating year due to the Covid-19 pandemic. Activity has continued, but despite things gradually opening up Covid-19 has not gone away and the year has felt very much like marking time.
2. We continued to execute our 2021-23 Plan as best allowed by Covid-19, restrictions the Practice felt necessary, and the available volunteers. In that light plans had to remain flexible.
3. Meanwhile regular meetings, the website and Facebook activity have continued.

Activities & Achievements

1. Again this year, due to the Covid-19 pandemic, and the consequent restrictions, much of the group's desired activity has remained curtailed.
2. Current group membership stands at 87 patients – 50 directly joined plus 45 members of the Facebook group; including an overlap of 8 members who belong to both. The increased membership (up 18 from last year) is in large part due to the invitation text which the Practice sent to all patients in May 2022.
3. Use of the Facebook group remains relatively light, although the group is an important channel for members to feed back their concerns. We continue to add relevant group documents and healthcare articles to the group. Thanks especially to Jacqui Piper and Ewa Siwiec for their contributions to the group.
4. One place where the Facebook group has been important is in continuing to highlight issues with long queue times on the phone system. We continue to discuss this with the Practice.
5. The 2-monthly Open Meetings continued using Zoom. Eleven patients attended the 6 meetings at least once. The relatively low attendance is due to (a) a number of members being unable or unwilling to use Zoom and (b) the timing of meetings during the working day. All meetings remain open to all Barnabas patients, carers and staff.
6. Every formal meeting has been supported by either the Practice Manager or Office Manager. However despite our continued efforts to find a meeting time and day to suit the Practice, only one meeting enjoyed the presence of a clinician: Dr Carey talked about end of life care at the July 2022 meeting.
7. We have continued to run informal, 30 minute, Zoom calls every month. Despite varying the day and time, these calls have not been well attended, but they have enabled a small number of members to keep in irregular social contact and share important news and ideas. These calls will continue for the time being.
8. During the year we have also had six update meetings with the Practice Manager.
9. The plan for the two years beginning 1 April 2023 was finalised towards the end of the reporting year. Members were asked to express their views on where we should be focussing over the next two years, and the responses were used as the basis for the plan. While it is important

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there is a plan, it does need to be flexible in order to accommodate both the ongoing Covid-19 situation and the small number of available volunteers.

10. In the middle of the year we ran, for the Practice, a short survey of patients on their preferred options for extended access hours. This was valuable in helping the Practice negotiate their support for extended access with the Primary Care Network.
11. The BPV's website contains all the group's documentation and leaflets, useful information items, and links to key (local) resources. It is also a weblog of items of topical interest, group announcements and events. Some of the website material is copied to the Facebook group. Suggestions and contributions of content are always welcome.
12. The *Local Facilities List*, aimed essentially at anyone new to the area but also useful to longer term residents, has been updated twice during the year. This is generally felt to be a valuable resource. Contributions and updates are always welcome.
13. Our series of articles of patient *Treatment Experiences* provides hints, tips and reassurance for others awaiting or considering such treatments. Articles (which are always anonymous) are slowly being added to this series as members volunteer them. Again, contributions are always welcome.
14. During the year we have edited and published four issues of *Barnabas Bulletin*, the Practice's quarterly newsletter. However *Barnabas Bulletin* continues to need a permanent Editor. Once more, contributions of articles (or just ideas for topics to include) are always welcome.
15. The *Members' Monthly Update* has continued. This contains summaries of recent, potentially interesting, healthcare news etc. In it I have continued to attempt to provide balanced scientific and patient-orientated information on the current Covid-19 situation, although with increasingly little official testing and reporting this is becoming ever more difficult.
16. We have proposed to the Practice that there should be a QR Info Pod as the nucleus of the waiting area noticeboards – an idea which many practices are beginning to adopt as a way of using new technology. This will provide, by scanning the QR codes on a smartphone, links to online information items. The Practice has accepted the idea and it is with them to be implemented.
17. We also proposed a set of questions for revived, but online, quarterly Practice Patient Surveys. While we have offered to run the surveys for the Practice, it is likely they will be driven instead by the Practice using the clinical system. However we stand by to assist with the data analysis.
18. I was also involved in the establishment of NHS England's PPG Champions group and helped develop that group's terms of reference.
19. I must again express my thanks to Harsha Mortemore for volunteering as Vice-Chairman despite ongoing significant personal and family challenges. Two brains have again been much better than one!

Looking Forward

1. The plan for activity during 2023-25 must be flexible as again many of the desired activities depend critically on both the Covid-19 situation and the available volunteers. It should be assumed that realistically Covid-19 is with us for some time to come and that we will need to adjust accordingly. However this will be regularly reviewed.
2. As always, to continue to be an effective patient voice to the Practice, we need to keep growing our membership (especially active members) and extending our diversity. Hopefully this will be assisted by our clinicians identifying and encouraging potential members, and by the Practice sending a text invitation to all patients a couple of times a year.
3. Our 2-monthly Open Meetings, and monthly informal calls will continue mostly on Zoom although the AGM in May is planned as a face-to-face meeting on a Saturday morning, to coincide with a planned Practice coffee morning and extended access opening. The AGM has to elect our officers for the next two years.
4. Unfortunately the reliance on Zoom means a small number of members will continue to be left out, something which is far from ideal. We should continue to look for ways out of this dilemma.
5. This year we are varying our meeting days and times (as expressed by members) to try to make it possible for more to attend at least sometimes.

6. The Practice continues to value the in-person patient surveys (which have not been possible for the last three years). Nonetheless in the coming year the Practice's plan is for quarterly online surveys. We stand ready to manage the surveys and assist with the data analysis, if required.
7. We look forward to working with the Practice on new initiatives and helping to ensure patient needs and expectations are met.
8. We should remain open to running and/or attending relevant (virtual or face-to-face) events as the need arises. The new plan includes a suggestion to develop training for patients on the use of the various online services.
9. As well as championing patient concerns and needs, as a critical friend of the Practice we must continue to push the boundaries on behalf of patients in order to make a difference to overall healthcare, and supporting the Practice with large projects and smaller pieces of work.
10. We also look forward to meeting with the Practice Partners with a view to setting up a "Joint Working Group" to help drive forward all joint aspirations.
11. Ultimately our overall goal must be to continue working with the Practice to achieve OUTSTANDING ratings at future CQC inspections.

Concluding Remarks

1. Although many believe Covid-19 has gone away, it hasn't and some restrictions seem likely to continue during the coming year. This will inevitably continue to impact some activity, although this will be kept under regular review. Nevertheless we remain committed to working with the Practice to continue to identify and address patient needs and concerns.
2. Finally I must express thanks to all our members, and others, who have given time to the group during the year and to all our doctors, nurses and practice staff for continuing to look after us so well in especially trying circumstances. Both my experience, and the feedback I receive, continue to indicate that we really do have one of the best, most helpful and friendliest teams in the area – although we know they have struggled recently due to both the pandemic and the increasing level of demand.

Keith Marshall

Chairman, Barnabas Patient Voices

3 April 2023