

Open Meeting – 24 July 2024, Zoom – Minutes

Text in underscored italic is post meeting information

Present: Jean Alden, Sennen Chiu, Matt Edwards (Practice Manager), Keith Marshall (Chairman), Noreen Marshall, Harsha Mortemore (Vice-Chair), Phiroze Munshi, Ewa Siwiec

Apologies: Lyn Duffus, Purminder Gandhu, Joe Hamilton, Rhiann Ingram

1. Welcome

1. Keith welcomed everyone.

2. Minutes of the Previous Meeting

1. The minutes of the Open Meeting & AGM on 18 May 2024 were agreed and signed.

3. Patient Engagement/Access Initial Report & Discussion

[Slides attached at the end of the minutes.]

1. The November 2023 Open Meeting suggested that we should have a small team to look at what could/should be done to improve patient engagement and access to both the Practice and BPV.
2. Keith presented a summary of the work he, Purminder and Matt had done looking at this and prioritising the tasks.
3. Almost 120 ideas have been noted and then prioritised
4. Priorities (high/medium/low) were assigned to every item, by each team member, for impact, how easy to do, importance and urgency. The scores were then combined to give an overall priority for each idea.
5. As expected the top priorities were addressing the issues with the phones and improving the Practice website.
Responsibility for both of these lies with Matt.
6. There is work going on in the background to improve the phone system (eg. a call-back facility) as well as increasing the reception team (see below).
7. Websites are high priority for the PCN.
They are currently auditing all practice websites with a view to providing an enhanced template.
We have suggested the website could be a first-stop community hub.
The team have agreed to discuss this further when the PCN's audit report is available.
8. Most of the other high priorities revolve around patients' needs, education & feedback.
Keith has already worked to reinstate our management of the waiting area noticeboards.

9. Many of the lowest priority suggestions are to do with engagement (both within and without BPV).
10. Some of the problems we need to overcome are:
 - Matt estimates at least 30% of consultations are for things which patients could treat themselves, or could get treatment from a pharmacy
 - People do not listen
 - Patients are reluctant to use 111, or Pharmacy First, but expect to see a doctor. However 111 are booking too many patients into our appointments, compared with just the odd one or two a day 2-3 years ago.
11. One thought from Keith was that it would help to find “trusted messengers”. These are people within the community, who are seen as believable, relatable and credible. They would consistently provide (drip-feed) information to community members in a quiet way, often through nudges, rather than by being didactic. Where are these people within our community?
12. A number of members volunteered to help with “Meet the Patients” sessions. Keith to follow-up with the volunteers and work on scheduling sessions. **Action: Keith**
13. Keith still has to analyse the list of ideas for things which are not high priority, but which could be done easily and bring quick results. **Action: Keith**

4. GP Patient Survey 2024 Results

[Slides attached at the end of the minutes.]

1. This is what was popularly known as the MORI Survey, which is run for NHS England every year during January to March, with the results being published in the summer.
2. As usual Keith has analysed the results for the Practice and compared them with the local network (PCN), NW London ICB and the National figures.
3. The results do not make good reading. In summary:
 - The Practice has dropped from #1 or #2 in the PCN to almost bottom of the 11 practices
 - 8 (of 13) areas are worse than the national average
 - 7 (of 13) areas are worse than the PCN average
 - Overall good experience of the Practice has fallen to 64% from 71% last year and 87% in 2019
 - Ease of contacting the Practice by phone was the worst in the PCN at just 28%
 - However the clinicians, when you get to them, are very highly rated with 4 (of 6) areas better or equal to the national average. For example 96% had high confidence in the clinician (compared with a national average of 92%)
4. It was agreed that the results on access were not acceptable; the Practice is as unhappy as this group.
5. However Matt did emphasise that the survey is now around 6 months old and was taken at a time when the Practice was having multiple staff problems. Hopefully this is now being turned round, and feedback from those present suggested that this is so.

5. Members Feedback & Issues

1. Keith provided an update on the Covid situation.
 - Covid is not over and is not (yet?) a seasonal infection like flu.
 - Infection rates are once again high, this time due to the new FLiRT variants (KP.3 etc.) which are more infectious.
 - Personal safeguarding (eg. masks) by Practice staff remains wise; as it does for vulnerable patients.
 - The new government has expressed determination to recover (some of the) billions squandered on useless Covid measures (eg. PPE)
 - The report of Phase 1 of the Covid Inquiry (Resilience & Preparedness) has been published. It identified 9 major flaws and made 10 recommendations. Essentially the conclusion was that the government's response was designed to fail.
2. Several members, including Jean and Sennen, praised the efficiency and service provided by the Practice.
3. Matt was asked if the Practice had been affected by the recent CrowdStrike IT issues. In fact the Practice was not affected at all, as the SystmOne clinical system was unaffected, unlike those practices which use EMIS.
4. Keith asked about what is happening with audiology services, as he is seeing confusing messages. Will Specsavers now be the only provider? Or will the Audiology Service at Ealing Hospital continue?
Matt was unaware of this. Keith to send Matt one of the newsletters he's seen this in.
Action: Keith Done
5. Noreen asked whether we could now reinstate the Book Exchange, and received an inconclusive response from Matt.

6. Practice Updates

1. *Staff Updates*
 - The Practice is still two GPs down, and locums are too expensive to fill the complete gap of 12 sessions/week.
One salaried GP has been hired and will start in October (as they have to give 3 months notice to their current employer).
The practice expect to hire a further one or two GPs, who may be able to join sooner than October.
 - The desire is to recruit additional receptionists to bring the team up to 9 or 10. Unfortunately reception are seen as gatekeepers and not as a helper to direct patients to the best clinician etc.
Part of this, and patient demands to see a doctor today, is down to the generally unhappy state of the nation as a whole.
2. *Practice Refurbishments.*
 - There have been problems with the funding for the required refurbishments, which means the Practice will have to apply again next year.

7. Other Group Updates

1. *Barnabas Bulletin*
 - Please let Keith know of any ideas or suggestions for articles. **Action: All**

8. Matters Arising, AOB

1. None.
2. **Next Open Meeting:** Saturday 28 September; 11:00; at the Practice.

Keith C Marshall, Chairman
27 July 2024

Proposed 2024 Meeting Dates

- Saturday 28 September; 11:00; Medical Centre
- Wednesday 20 November; 13:00; Zoom

Dates/times may change depending on the availability of venues (especially the Church facilities). Watch the Members' Monthly Update for confirmation of dates and venues.

Link for all Zoom Meetings

Link: <https://us02web.zoom.us/j/7279594414?pwd=VmYwODdoWGg2eTFvTVJvZyRmhSQT09>
Meeting ID: 727 959 4414
Passcode: 149417

Barnabas Patient Voices

Open Meeting 24 July 2024

Keith Marshall
15/07/2024

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Agenda

1. Introductions & Apologies
2. Approve Minutes of May Meeting (AGM)
3. Patient Engagement/Access Initial Report & Discussion
4. GP Patient Survey 2024 Results
5. Member Feedback
6. Practice Updates
7. PPG Updates
8. Matters Arising, AOB

Patient Engagement/Access Group

1. November 2023 Open Meeting suggested a group of 3-4 to look at what should/could be done to improve patient engagement & access to both the Practice and BPV.
2. Group: Keith, Purminder, Matt
3. So far two meetings to brain dump all our ideas and prioritise them
4. 118 items logged and prioritised
5. Priority was assessed by each of us individually as high / medium / low for each of
 - Impact
 - How easy to do
 - Importance
 - UrgencyIndividual scores were then combined

Patient Engagement/Access : Highest Priorities

Appointments & Prescriptions

Phone queues	72.0
Phone announcements	66.0
Phone number for text/vmail to CANX appt	64.0
Text messaging appointment reminders	60.0
Telephone call back facility	58.7
Patient access to services	46.4
Better "on hold" messaging	34.2
Text messaging Practice & BPV info to patients	25.0

Practice Website

Improve website features (eg. appt booking)	64.0
Coordinate/maintain Practice website	51.3
Influence Practice website design	50.7
Make website the first stop for patient info	49.0
Improve/redesign Practice website	39.1

Practice Real Estate / Waiting Area

Noticeboards ✓	38.0
Refurbish all patient areas	31.7

Patient Needs / Education / Feedback

Design, create, run & analyse patient surveys	32.1
How to engage patients	30.2
Understand Practice's needs	30.2
Patient training/demos on GP online services	26.4
Website access training for patients	26.4
Ask patients what they need	25.3
GP Patient Survey ✓	24.9
Patient Surveys	24.9
Encourage cultural change among patients	24.6
Capacity management	31.8
Demand management	27.4

Patient Engagement/Access : Lowest Priorities

Practice Real Estate / Waiting Area

Water cooler	1.3
Magazines	2.2
Kids drawing sheets	2.3
New facilities	5.0
Leaflets	5.3
Practice stats display	5.6
Better info on timelines (eg. wait/area refurb)	6.7
Better use of screens in reception	7.8

Patient Needs / Education / Feedback

Suggestions box	1.3
Help run other surveys	1.7
Short talk at every open meeting	5.4
Short survey in Reception	5.4
Monthly members update	6.0
Regular straw polls	6.2
PPG Awareness Week (June)	6.2
Self-Care Week (November)	6.2

Patient Engagement

History of the practice	1.3
Coffee morning	4.4
Regular straw polls	7.0

Local Community

Engage with local religious groups	5.3
Engage with local MP	5.3
School outreach	7.0
Local colleges assist to delivering training	7.3
Local Scouts/Guides assist to deliver training	7.3
Have a stall at school fetes over summer	7.8

BPV Website / Social Media / Membership

BPV Webmaster	6.0
Permanent editor for Barnabas Bulletin	6.0
Chairman's monthly members update	6.7
Register of BPV members' skills	7.3

A Key Thought ... ?

Something we should do ...

FIND THE TRUSTED MESSENGERS

who are ...

Part of the community

Refuse to helicopter

Believable – genuine, transparent, clear motives

Relatable – shared skillset with audience

Credible – bring useful knowledge/skills

Who & where are they?

Patient Engagement/Access : Your Thoughts

Views on the priorities

What might we have forgotten?

**Volunteers to help with online training/advice
session or “Meet the Patients”**

GP Patient Survey 2024

Barnabas vs NGP PCN Practices

Practice ==>	Barnabas	Allendale	Doncaster Drive	Elmtree	Greenford Road	Grove	Hillview	Islip Manor	Mandeville	Meadow View	Perivale
Overall Experience	64%	66%	50%	75%	82%	88%	78%	70%	82%	83%	72%
Overall Experience of Contacting	52%	58%	45%	77%	73%	88%	75%	65%	75%	72%	67%
Easy to Contact on Phone	28%	48%	32%	68%	78%	87%	64%	59%	65%	42%	59%
Easy to Contact via Website	49%	62%	30%	40%	57%	56%	59%	38%	54%	42%	56%
Reception/Admin Team Helpful	70%	75%	61%	80%	86%	91%	74%	75%	86%	89%	89%
Knew Next Step after Contacting Practice	60%	77%	73%	83%	89%	79%	81%	70%	81%	83%	76%
Knew Next Step in 2 Days Contact Practice	88%	87%	90%	86%	97%	85%	91%	93%	88%	87%	96%
H/C Prof had all Needed Info on Patient	92%	93%	87%	89%	90%	97%	92%	88%	94%	98%	88%
H/C Professional Good at Listening	83%	79%	75%	80%	89%	93%	80%	80%	91%	88%	87%
H/C Prof Good Treating with Care & Concern	83%	78%	63%	79%	82%	93%	79%	83%	82%	85%	85%
Patient Involved as Much as They Wanted	91%	94%	82%	86%	87%	95%	85%	90%	95%	97%	88%
Patient had Confidence & Trust in H/C Prof	96%	89%	88%	88%	90%	96%	85%	87%	95%	96%	85%
Patient's Needs were Met	90%	91%	80%	84%	93%	96%	84%	86%	94%	98%	85%

GP Patient Survey 2024

Barnabas vs PCN, ICS, National

Practice ==>	Barnabas	NGP PCN	NWL ICS	National
Overall Experience	64%	75%	74%	74%
Overall Experience of Contacting	52%	69%	70%	67%
Easy to Contact on Phone	28%	59%	58%	50%
Easy to Contact via Website	49%	49%	52%	48%
Reception/Admin Team Helpful	70%	79%	81%	83%
Knew Next Step after Contacting Practice	60%	78%	82%	83%
Knew Next Step Within 2 Days of Contacting Practice	88%	90%	91%	93%
H/C Professional had all the Needed about Patient	92%	92%	91%	92%
H/C Professional Good at Listening	83%	85%	85%	87%
H/C Professional Good at Treating with Care & Concern	83%	82%	83%	85%
Patient Involved as Much as They Wanted	91%	90%	89%	91%
Patient had Confidence & Trust in H/C Professional	96%	91%	91%	92%
Patient's Needs were Met	90%	89%	89%	90%