# **Minutes**

Date of Meeting: Monday 18 September 2023

Time: 6:30pm

Location: Gosforth Valley Medical Practice

In attendance: Glyn Jones - Chair Apologies: Ryan Bond

Margaret Askham Sarah Bond
Pat Boyle Shelly Hinson
Adrian Hubbard Helen Lane

Wendy Jones Andrew Loughran

Evelyn Kirby Mary Milner

Mike Kirby John Needham

Dr Vikas Gupta - GP Partner

Carole Mason - Practice Manager (CMA)

## 1. Chairman's welcome and apologies received

The Chair welcomed everyone to the meeting and noted apologies (recorded above). Introductions were invited from each member for the benefit of those present.

## 2. Minutes of previous meetings

Due to family illness, there had been a delay with the minutes from the previous meeting which meant that not all those in attendance had potentially had the opportunity to review these. It was also noted that the minutes provided an overview of discussion, rather than full notes. Members agreed the minutes as a general record of what was discussed at the PPG Meeting on 20 July.

## 3. Matters arising from previous minutes

No matters arising.

### 4. Practice update

CMA shared the following Practice Update with members.

Members asked for clarification about terminology and acronyms:

Patient Administrator = Receptionist

PCN = Primary Care Network

ANP = Advanced Nurse Practitioner

# **Practice Update**

#### **New Starters**

Sue Bloomfield Patient Administrator at Moss Valley (18 hours per

<u>Changes</u> Dr Martin is now married!

#### Leavers

Emma Harris – Nurse (Moss Valley and Gosforth Valley) Zoe Thorpe - Patient Administrator (Moss Valley)

#### Vacancies

Patient Administrator - 29 hrs per week at Moss Valley Patient Administrator (Mat Cover) – 24.5 hrs per week at Moss Valley (from Christmas) Practice Nurse - 30 hrs per week at MV

THE VALLEYS MEDICAL PARTNERSHIP 1. I am very caring and love helping people. 2. I will work hard to pick things up as quickly as possible so I can help. I like to greet people with a smile!

#### New Services

Cathy Freeman - PCN ANP (Advanced Clinical Practitioner) working across both sites from October.

#### **New Initiatives**

Trialling a change to Asthma and Diabetic Annual Reviews

#### **Events**

Flu/Covid Clinics taking place on Tuesday 26 September and Tuesday 17 October 2023. In addition to Flu and Covid vaccinations, eligible patients will also be able to have their Shingles and Pneumo vaccines

#### Challenges

Staff absence at Moss Valley Changes to funding

CMA shared additional details to supplement the information provided:

- Sue Bloomfield: Would be working Tuesdays and Wednesdays while training but would move to Wednesdays and Fridays eventually.
- Practice Nurse: As shared at the July meeting, this vacancy had been advertised previously but the Partnership did not appoint. The vacancy had now been readvertised with an emphasis on the Partnership's willingness to train the someone who potentially hadn't worked in general practice previously. The closing date for applications was 18 September. In the interim, nurses from Gosforth Valley were providing additional support at Moss Valley.
- Trialling change to Asthma and Diabetic Annual Reviews: Confirmed that, to ensure all patients received the right level of care for their chronic conditions, the Partnership had introduced a triaging system. For asthmatic patients, this meant that they would complete a questionnaire that would then be reviewed by a Practice Nurse. If the results indicated that the condition was well managed and no additional intervention was required, the review would be completed remotely without the patient needing to attend the Practice. If the results indicated that there needed to be some additional intervention, the patient would be invited in for an appointment with a member of the nursing team.
  - The diabetic reviews worked very similar, but the first part of the review would be completed by a Health Care Assistant, rather than remotely via a questionnaire.
  - Initial feedback was that this was working well particularly in terms of asthma reviews for those patients who had previously not engaged with the process.
- Flu/Covid Clinics: Thanks were expressed to those members of the PPG who were supporting with the upcoming clinics on 26 September and 17 October. Members were advised that further clinics would be added on Thursday evenings throughout October.
  - Members asked if they were able to have their flu on one date and come back for their Covid vaccine at another time due to worries about having vaccinations simultaneously. Members were advised that it was safe to have both vaccines together, and that it was a better option for them, as it reduced the number of times they needed to come to the Practice. It also benefitted all other patients as it meant more appointments were available. It was recommended that any member who has concerns about covaccination had a chat with their clinician when attending for the appointment.
- Changes to funding: The model for funding into general practice was changing, with a significant proportion of monies being diverted through PCNs. There were advantages to this, as Practices across a PCN could benefit from additional roles that would not be viable for individual Practices to appoint to. It did; however, also present challenges.

Members made the following points and/or asked questions:

Moss Valley and Gosforth Valley Patient Administration Teams: Members commented that both teams had a different feel when you contacted each of the Practices. CMA noted the comments and agreed that there is a different approach by both teams. CMA also referenced the different challenges at each Practice, including the different demographics of each patient population, the different size of each Practice, and the staffing challenges at Moss Valley currently, which may impact upon patient experience.

CMA said that both teams are very good at what they do and deliver a good service to patients, but it was a work in progress to ensure that the approach by both teams was more aligned to offer a more consistent experience for patients. Members reflected on the experiences of their friends and relatives and commented that they felt what they had at The Valleys was "really good".

- **Diabetic Reviews:** Clarification was sought in terms of whether reauthorisation for medication upon completion of a diabetic review was always 12-months, or if there were instances when this may only be done for 6-months.

**ACTION:** CMA to check 6-month/12-month process and report back to the PPG.

- Changes to funding: Members asked if the redirection of funding through the PCN had made life at Practice level more challenging. CMA confirmed that it had; as the allocation to PCN was a redirection of funding from general practice, rather than new money into the PCN, it left an ever-decreasing 'pot' that was within the control of the Partnership.

## 5. Q&A Session with Dr V Gupta (GP Partner – Gosforth Valley)

The Chair thanked Dr Gupta for attending the meeting and opened the floor to questions from members.

- Q: Over the duration of your career and the 15-years you have been at Gosforth Valley, the Practice has undergone lots of transformation, from the merger to new premises. What is your view of where the Practice is now, and where it might be in the future?
- A: The Government's choice to introduce PCNs has removed some aspects of personalised care from General Practice, and that means that the traditional GP service that once was, no longer exists, and I can't see that ever returning. If you want care quickly, that can be achieved, but you won't necessarily be able to specify who that care is provided by. If you want to see a specific doctor, it's likely that you will have to wait.

The merger of Gosforth Valley and Moss Valley has been a positive thing as it gave both Practices a bigger voice. We are a large Partnership, and an innovative one, demonstrated amongst other things, through our appointment of a Pharmacist Partner. All the Partners are very committed and vocal about good quality healthcare. The Partners are keen to be innovative and continuing to drive healthcare forward.

The covid pandemic forced an increase of technology in healthcare and there have been positive changes across the Partnership because of this. As a Partnership, we also have the added benefit of Dr Martin, who is incredibly innovative in this field, specifically in relation to how the Partnership uses technology for the benefit of its patients and as a result we're at the forefront of this area.

- Q: Has the patient population changed much in terms of size?
- A: The patient population has remained quite static; Dronfield is an area well served in terms of general practice and we have retained our patients.
- Q: What are your views of being part of a 4 Practice PCN, rather than being part of a bigger PCN?
- A: If the Practices within a larger PCN are all geographically close than a larger PCN can work, but the risk is that you become swamped by bigger Practices. If the relationships within a PCN break down, it can take years to unpick. Regardless of the size of a PCN, a good Clinical Lead can bring everyone together.
- Q: What would you estimate to be the percentage time taken up by doctors completing referrals at The Valleys? The JUCD have estimated that this could be as much as 40%.
- A: Just creating the referral doesn't take that long for a GP and the systems are relatively straightforward so its far less than the figure quoted. If you were to consider the additional work surrounding referrals, including acting on recommendations etc, then it's likely this will be closer to the percentage quoted.
- Q: There is already a self-referral option for services such as physiotherapy, and there has been talk of there being a shortcut route into hospitals are you aware of this?
- A: This isn't something that I'm aware of and I would be concerned in terms of impact on a system, which is already stretched. Currently, although you can specify which hospital you want to be referred to, you cannot indicate a specific consultant, only give a preference.

The Chair invited Dr Gupta to ask any questions he may have of members. Dr Gupta said that with the effectiveness of the PPG, and the introduction of social media, it was now possible to get the Partnership's messages out to its patient population in a bigger and better way. He acknowledged the valuable role that the PPG played as the voice of the patient body and encouraged them to provide feedback to the Partnership whenever they were able to. Particularly in the case where the Partnership had launched a new initiative, as it wasn't always easy to see this from the perspective of patients, so the feedback was important.

Members of the PPG said that they felt positive about the role they played in working with the Partnership. They said that over recent months they had become one, cohesive group working well together, rather than representatives from two different Practices. They felt that the atmosphere at meetings was productive and positive and that their suggestions and input were listened to and taken seriously.

#### 6. Mission, Vision and Values – PPG Feedback

CMA outlined to the PPG the work the Partnership had been undertaking around revisiting its mission, vision and values. The previous vision statement had not been adopted in its truest sense and the Partners had reflected on the need to create something that was truly representative of what The Valleys stood for, its ambitions for the future, and the behaviours that would underpin the journey to get there. They also wanted to ensure that this was relevant for staff and patients alike.

CMA shared slides with members that demonstrated the process that had taken place in arriving at the proposed mission statement, values statement, and core values. This had included seeking feedback from all members of staff in terms of what they felt the strengths and areas for development of the Partnership were, together with their aspirations for the future. The Partners had then taken the information and worked together to create the following:

Mission: "Working together to live well"

**Vision:** "To deliver quality care for our community, in an innovative, sustainable and rewarding environment" **Values:** Welcoming; respectful; working collaboratively; learning and innovating; celebrating success.

Members were invited to provide initial thoughts:

- It was suggested as being necessary to qualify what was meant by "quality care", and it was recommended that this was pre-fixed with "good" or "high".
- It was suggested that the Partnership might want to elaborate on the values and potentially add an addendum to include examples of what each of these meant in practice.
- Discussion took place about whether the Partnership intended to invite comments and feedback from the wider patient population. Agreed that, once the PPG have had opportunity to comment, the information could be added to the website with a link to a feedback form for patients to complete. It was recognised as being important that the rationale for having these statements, and how the Partnership had arrived at them, was included, so that patients had the benefit of context. It was agreed that this would also be a good opportunity to promote the work of the PPG, and their input/influence in decision-making.

<u>ACTION</u>: Each member of the PPG to reflect on the proposed mission, vision and values, and bring at least one comment or suggestion back to the November meeting.

ACTION: CMA to add to website and invite feedback from wider patient population following PPG input.

## 7. Feedback from the JUCD PPG Network Meeting

CMA shared slides with the PPG that provided an overview of the purpose of the JUCD PPG Network Meetings, and focused on the feedback from the PPG survey that was undertaken between January and March of 2023. The slides are provided below for information:

# Feedback from the JUCD PPG Network Meeting

What is the Joined Up Care Derbyshire (JUCD) Patient Participation Group (PPG) Network?

In Derby and Derbyshire, there is a JUCD PPG Network that meets bi-monthly for 1.5 hours via Microsoft Teams and it is facilitated by the Integrated Care Board (ICB) Engagement Team. It was originally set up to:

- Bring together PPG Chairs and their members to understand what support is needed to help them
  engage and communicate with their Practice population.
- Be a place for PPGs to learn and keep updated on the developments within the system.

However, over the last 12 months the Network has undergone developments to ensure it is also a place where members can share learning and best practice. There are approximately three items on the agenda at each meeting which usually cover:

- 1) An update around system changes or transformation projects (members of the Network are encouraged to share topics
- 2) Update from the Primary Care Quality Team
- 3) Sharing learning and best practice

#### Agenda for the July meeting covered:

- Importance v Performance Survey
- Primary Care Update
- PPG Network sharing resources and best practice (Recruiting to your PPG and PPG Contact List).



# Feedback from the JUCD PPG Network Meeting

Importance vs Performance Survey

PPG Survey was carried out between 30 January and 6 March 2023.

Purpose of the survey was to:

- Understand what support is needed to help PPGs meaningfully communicate and engage with their Practice population.
- 2. Provide an assessment/baseline of the status of patient engagement in a GP Practice/PPG.
- 3. Identify where good practice engagement might be found.
- 4. To provide the JUCD Public Partnership Committee with an assessment of engagement in PPGs. (The Public Partnership Committee site below the ICB and the Integrated Care Partnership (ICP). It is designed to assess risk and seek assurance in relation to the delivery of statutory duties to inform, involve and consult patients and members of the public).

It is the intention of JUCD that the survey will be repeated regularly, at 12 to 18 month intervals.



# Feedback from the JUCD PPG Network Meeting

Importance vs Performance Survey

- 113 GP Practices in Derby and Derbyshire; 107 active PPGs.
- 70 responses were received representing 41 different Practices and PPGs.
- 34% of respondents were from PPG Chair, 33% from PPG members and 20% 'other'.
- Numbers of members in each PPG varied; on average PPGs had between 6 and 10 members with 57% of respondents saying that all those that attended contributed to the meetings (active).
- Majority of PPGs met either between 2 to 5 times per year, or 6 to 11 times per year with 12% stating that
  they did not meet.
- In terms of seeking the views of their PPG, 34% of respondents said that their Practices reached out between 1 and 3 times during the year, with 18% saying that their Practices never reached out.
- In terms of challenges faced by the PPG, 78% cited "recruiting to their PPG" as being the biggest, closely followed by "engaging with their Practice populations i.e. through events, questionnaires etc" at 72%, and "promoting their PPG" as being third (58%). Also cited in terms of "other" challenges were "lack of support and engagement from the Practice" and "membership not being diverse and note accurately reflecting the Practice population".



## Feedback from the JUCD PPG Network Meeting

#### Importance vs Performance Survey

- Things that worked well within PPGs were:
  - 1. Positive relationship and support from the practice
  - 2. Attendance from Practice Managers, Doctors and Practice staff at PPG meetings
  - 3. Involvement in decision making within the Practice
  - Motivated Chair and members within a PPG
  - 5. Clear roles and duties within a PPG
  - 6. Gathering insight from the Practice population to feed into, and inform work of the PPG

#### **Practice Engagement**

- 50% of respondents rated their Practice as "good" in terms of encouraging the existence of a PPG, compared to 23% who rated their Practice as "outstanding".
- In terms of seeking views and opinions of the Practice population 43% rated their Practice as "good", but 25% of people rated their Practice as "requires improvement".
- However, when it came to ensuring patient's opinions influencing decision-making, 49% rated their Practice as either "requires improvement" or "inadequate".



The following points/areas of discussion were covered based on the information shared:

- In terms of average size, The Valleys' PPG is above average.
- The number of meetings of the PPG is in line with most PPGs.
- Members said that the biggest challenge they felt that The Valleys PPG is faced with is the diversity of representation and that members does not accurately reflect the Practice population. This was because most members were of retirement age.

There had been attempts to recruit from Dronfield Henry Fanshaw school previously, which had been unsuccessful.

It was felt contribution from a younger demographic may potentially be something that the PPG may want to consider and the barriers to this were discussed.

It was suggested that there may be value in approaching Post-16 (Sixth Form) age students, particularly those with an interest in pursuing a career in medicine, at both Eckington and Dronfield schools.

ACTION: PPG to consider whether this is a priority for them, and if so AHU and CMA to follow this up.

- Previously, a long time ago, a former Partner used to organise public meetings where external speakers would be invited to come and cover an area of health promotion. These were well attended and positively received.
  - Discussion took place about potential venues for an event of this nature, which included Dronfield Barn or The Snug, which was due to reopen this week. Previous events had also been held at St Andrews. It was recognised that there weren't the funds necessarily available to hire venues so goodwill would be needed if this were to be pursued.
- The next JUCD PPG Network Meeting took place on 18 September although the Chair had other commitments and had been unable to attend this, he would endeavour to summarise what was covered for the November meeting of the PPG.

**ACTION:** Chair to complete a summary of most recent Network Meeting for November meeting of the PPG.

#### 8. Future Agendas and Meeting Dates

There was only one date remaining for meetings for the current calendar year.

Based on the frequency and placement of meetings for 2023, a draft schedule of meeting dates for 2024 was presented for consideration by members.

Brief discussion took place about the preferred day of the week for meetings, and members were asked to indicate their preference.

The following meeting dates for 2024 were agreed:

Thursday 22 February 2024 at Moss Valley

- Thursday 16 May 2024 at Gosforth Valley
- Thursday 25 July 2024 at Moss Valley
- Thursday 19 September 2024 at Gosforth Valley
- Thursday 21 November 2024 at Moss Valley

**ACTION**: CMA to add the dates to the PPG page on the website.

Members were invited to think about any items or guest speakers (include members of The Valleys staff body) that they would like to come along to future meetings, so that we could schedule these into the meeting calendar.

**ACTION**: All members to provide items for 2024 future agendas to the Chair.

The Chair advised that for the next meeting, Rhonda Pickering, Deputy Director of DHU had offered to attend to talk to members and discuss the work of DHU. If members had any other items for the agenda, they should contact the Chair if it was before 6 October, and CMA after due to the Chair being out of the Country on holiday.

## 9. Any other business

Members asked that the phone message be reviewed as it was felt there was too much information to listen to before you could get to where you needed to be.

Members also felt the 'on hold' message was irritating and could be approved (constant repetition of "thank you for your call, we are sorry to keep you waiting" unnecessary).

**ACTION:** CMA to review message.

## 10. Date of next meetings

The Chair thanked everyone for attending, and for their contributions. The next meeting will be held on **Thursday 23 November 2023** at **Gosforth Valley** (due to the previous two meetings taking place at Moss Valley).