

Westgate Surgery

Patient Focus Group Meeting Minutes 27th February 2019

Present:

Mrs Rosalind Morton – Chairperson
Mrs Nicky Macdougald – Practice Manager
Mr Ken Self – Minster PLG Chair
Mrs Heather Gillespie – Practice Secretary
Mrs A Clark
Mrs D Devere
Mrs M Francis
Mrs J Glover
Mrs J Herbert
Mr T Herbert
Mr G Lafford
Mrs M Lafford
Mrs P Lucas
Mrs M Makepeace
Mrs O Orpwood
Mrs P Piggott
Mrs D Sewell
Mrs B Smith
Mrs S Walsh
Mrs A Wells
Mr B Wells
Mrs S Wells
Ms C Whitehead

Apologies:

Mrs C Cleworth
Mr D Cleworth
Mrs E Lambie
Mr F Piggott

Attendance taken from sign in sheet, if your name is missing please let us know.

1. **Welcome & Introductions:**

Ros welcomed everyone to the meeting and explained the purpose of the group was to support the surgery to be the best it can be.

2. **Minutes of Last Meetings:**

Four amendments made.

3. **Matters arising from the meeting:-**

Nicky gave an update on the following items:

a) **Patient Kiosk**

This is now working – There has been a few teething problems but all working now. This takes the patient's blood pressure, height & weight. The surgery now messages patients who need a blood pressure check to use the kiosk when convenient.

b) Social Prescribing

Since the last meeting we have moved forward quite a bit with this. A new collaborative group has been set up with local organisations called Westgate Collaborative. The surgery is working closely with Changing Minds, Westgate Residents Association, Rev George Kalu from United Reform Church and the Church's Youth and Community Worker, Sam Boyce.

This group is looking at what is currently available in Westgate and what can be done to improve the wellbeing of residents who may be isolated, lonely or have limited support mechanisms. A questionnaire has been drafted which we plan to send out to patients by email, but also these can be attached to prescriptions delivered by pharmacies to try and catch the group of patients who are isolated and do not come to the surgery. They will also be available to be completed at an event to mark National Social Prescribing day on 14th March 2019. This is being held at the United Reform Church from 12pm – 3pm. Jack Packman from SEK will be launching a Database of available services at this event.

A further Westgate Collaborative meeting is being held on 5th March to discuss changes to the questionnaire and agree future actions.

4. **Minster Surgery Patient Liaison Group**

Ken Self Chair Person from Minster Surgeries' Patient Liaison Group was welcomed to the meeting. He explained how their group worked and how they work with a committee structure and monthly meetings to which the practice manager of Minster surgery is invited. He said that since it is run by committee attendance at meetings is not as large as ours but that they do get involvement from their communities for events through the year such as a spring fair, a Christmas fair and their Flu day.

Ken explained that the Patient Liaison Group was a buffer between the patients and Minster surgery and they have a notice board in the reception area with all the contact details of their committee members so that patients can contact them with problems, complaint or anything they do not want to discuss directly with the surgery.

The events the community holds have been used to raise funds for additional equipment that the surgery may need and that is not funded by the CCG. For example they have recently brought a state of the art ECG system. Most surgeries have a wish list of items they would like but funds are not necessarily available. They also hold raffles on flu days to raise money.

Ken was thanked very much for coming to the group and discussion took place on how the groups may want to work more closely together as the Primary Care Homes covering our patch develop.

5. **Feedback from Thanet Health Reference Group**

Ros told the group that she had attended a consultation event about the new Urgent Treatment Centres (UTC) across Kent. She said that the UTC's have been mandated by NHS England and despite whatever else happens with other acute services in the locality these UTCs will go ahead. She states that the one for our area would be located on the grounds of QEQM, planned to be in the buildings previously vacated by Mental Health Services. The aim of these UTC's is to take

pressure from A&E and divert things that are not actually an accident or emergency to the UTC's. Part of the process was to survey what was already in place and measure those services against the 27 standards and at present none of the existing services at Estuary View or Herne Bay are compliant with all 27 standards. The new UTC's will be led & staffed by Nurses & GPs.

Generally people think this is a good model which is meant to bridge the gap between GP's and A&E.

One member asked if there was a timescale for this to be set up. Ros informed the group that October 2019 was the planned timescale.

6. Feedback from Communication Group attended by Geoffrey Lafford

Mr Lafford stated that at the previous meeting the members were issued with a copy of the Terms of Reference for the Communication Group and having had time to look through this document and attend the meeting it is clear that the surgery are communicating well within the surgery with a plan. There is a spreadsheet of actions which is monitored.

The purpose of the group is to communicate information to patients and identify the difficulties. There are three groups of patients; one group of patients who are not interested; one group who find the information they need independently; and the last group who would like help or information but don't know where to look and it is this group that the group is trying to offer better communication.

There are several places where patients can obtain the information they need, there are patient leaflets and posters in the waiting rooms, but also this information is available on the surgery website which many patients are not aware of. It was discussed that maybe when utilising the patient text message service that the surgery website address could be added to encourage patients to look on the website for information. What patients want is to be able to find the information they need when they want it and the Surgery website is currently being updated with a new provider.

With regards to the Patient Champion identified at the last meeting, Mr Lafford talked to the group about a positive experience of the use of the Surgery's Patient Champion Michele and he had previously been sceptical about this but after his experience he would encourage anyone to use the service.

Mr Lafford also informed the group of an organisation he found call Kent Coast Volunteering which is very much like social prescribing and there are plenty of things going on. There is a post on the Community Board in the main waiting area for more information.

Nicky stated that all practices will have to have a Social Prescribing Post when the contract for practices changes from April so this work should be better supported.

7. Esther Cafe

Ros informed the group that despite Heather and herself trying to get information the person concerned at the local CCG has not come back to her.

Nicky stated that the person concerned had mentioned that they would be willing to hold an Esther Café at Westgate Surgery if there was a particular topic that the group felt they needed more information on. Ros asked the group to think about this and let her know if they have any items they would like an Esther Café to be held on.

8. Increase of Patient's registering

Nicky informed the group that one of the GP's has requested to work another day and this has allowed us to increase our patient numbers by 500. The surgery will have 10,700 patients once the 500 extra places have been taken. We are currently at 10,400. However the GPs are aware that the patient numbers are bigger than what the surgery was designed for.

The site is pushed to its limit and the GPs are in talks with the CCG regarding plans for the future. The 2000 homes that are planned to be built in Westgate would generate 4500 additional patients which would mean the surgery would need to move to accommodate them.

We have had a move around with Admin staff and there are two new receptionists starting as well as another Nurse Practitioner, Robina who will be joining the team at the end of March.

One member asked Nicky if patients would have to wait longer for appointments to be seen. Nicky stated that this would not be the case as the GP wants to work another day which will provide appointments for these additional patients.

9. Any Other Business

One member wanted to raise a point about making sure you check your prescriptions before you leave the pharmacy as they had encountered a problem of the pharmacy not supplying the correct amount and being told they should have checked this before leaving the pharmacy when collecting their medication.

One member wanted to make the group aware that when using the Thanet Volunteering Bureau that if you wanted a buddy for a relative you may have to wait quite a while as they had been waiting 3 years.

It was mentioned that the Stroke Unit decision has been made on 14/02/2019 and the new acute unit will be at William Harvey Hospital. It was also mentioned that Medway council have gone to a judicial review over the decision.

Nicky informed the group that the surgery has recently created a new emergency trolley, which outlines procedures that are to be followed in a particular emergency.

Meeting was closed at 5.45pm

The new emergency trolley was then viewed and the patients were interested to see the work that the practice had undertaken to support patients in an emergency

Dates for next meetings: - Wednesday 15th May 2019 @ 6pm
Wednesday 24th July 2019 @ time to be confirmed
Thursday 24th October 2019 @ 4pm