Aston Healthcare

Minutes of Patient Participation Group Meeting

25th February 2020

Knowsley Medical Centre

Present

On behalf of Aston:

LP (Director of Aston Healthcare since 12th February 2020)

BO'M (Communications Lead)

KB (Practice Manager)

PPG Members:

RS (chair)

JB (secretary)

TM

MR

JS

JS

LT

CM

Apologies

No apologies, all present

Introduction From Aston

L.P. gave his credentials and the background as to why he is now running Aston Healthcare with Dr Maassarani and a well-qualified team including EH - Governance and Compliance, JD - Transformational Matters, BO'M - Communications Lead

Minutes and Matters Arising

Telephone System/Triaging, Doctor Appointments and Prescribing Problems: L.P. There are many issues within these areas, as well as with digital access. Solutions need to be based on patient experiences/issues. To this end, all of the PPGs in the Aston/Maassarani groups are involved in four project teams to address the issues and other solutions. Patient Education also forms an important project team.

C.M. Timescale for proposed changes to the telephone system?

L.P. Approximately 3 months before it is resourced and staffed well.

Minutes and Matters Arising (cont'd)

Doctor Appointments: L.P. outlined changes and the reasons for these throughout Aston. A full Patient Briefing can be found on <u>astonhealth.com</u> website. C.M. How long will changes last? L.P. The changes are temporary, up to 6 months.

Patient Experience Appointment/PPG Page on Website: No Patient Experience Co-ordinator ever appointed by Aston, despite repeated promises. The communications lead, who will liaise with the PPG is Brittany O'Mahoney. New team now has access to the website. PPG needs to discuss/decide upon what to put on the page. Content will be overseen by coms team.

Triaging: L.P. A necessary tool in rationalising resources and putting the right processes in place. 7 in 10 patients do not need a G.P. appointment; they can be seen by other staff. Triage Team is to be resourced with: a doctor from 8.00am-6.30pm, supported by an A.N.P. and 4 Physician Associates who operate at a doctor level but, until registered with the G.M.C. in 6 months, cannot prescribe

L.P. asked for it to be noted that, on behalf of Aston Health, he apologised unreservedly for the experiences received by patients but that this was not for the want or desire of trying by a fantastic team.

J.B. asked re. changing the name from Aston because patients have negative view. L.P. Not considering it currently, but may in future if patients raise the issue.

Collaboration with the Maassarani Group

L.P. This began with a request from Maassarani to Aston re. collaborating backroom services in Halewood. Aston then requested help and after assessing the situation, Maassarani felt that the risk was too high without taking control, which happened at the end of January.

Plan is to identify risks/issues and fix processes and then to engage with the patients to see what a future model of healthcare might look like. This will be not just for appointments but other services to be provided and where patients want to access them.

M.R. Promises were made in April last year, little happened, apart from services deteriorating. L.P. made no promises but stated Maassarani provides services across Knowsley and has received an outstanding C.Q.C. inspection. It is the only GP funded social prescribing charity in the U.K. through Care Merseyside. It aims to bring in the Aston practices to this so that mental health patients can receive the support they need.

M.R. is concerned re. lack of continuity with G.P.s. L.P. stated that this is a nationwide problem to be addressed but Aston is aiming for better continuity.

Reception Staff

J.S. Permanent staff are required. L.P. stated that agency staff have been released as they lack necessary competencies. Same rotational staff will be kept in Knowsley. Management will see what can be put back out to the surgery; staff will be trained, up-skilled, challenged and, hopefully, motivated.

Perception of PPG

L.T. feels that, whilst willing to be active in the group, with guidance, she has not achieved anything. J.S. is concerned re. the patients' perception of what the group does and how they represent the patients views. Could statement be put on K.V.Forum? L.P. key messages on K.V. Forum will be done through the PPG. Aston will actively engage with PPG to achieve this via the Communications team. PPG members are asked to join focus groups developing patient informed services.

<u>A.O.B.</u>

Patient Safety: C.M. concerned patients only using telephone access will continue with problems for next few months as answering system is unreliable. L.P. stated that new team only recently aware of problems with answering system which is being switched off. A safe callback system is being designed. S.O.P.s will remain the same re. triaging but a process will be put in place to support vulnerable patients through this. Unfortunately all patients will have to use current system until changes are implemented.

L.P. stressed importance of patient driven changes through focus groups in PPGs.

Communicating changes: J.B. concerned re. keeping patients informed re. changes over next 6 months to avoid misinformation and rumours.

L.P. Expert coms team first communication to go out as a letter to all heads of households with clear messages about changes. Website being up-dated, posters in surgery, twitter, email and PPG will be used to keep patients informed throughout changes.

Date Of Next Meeting

Need them monthly whilst changes taking place

Tuesday 31st March 4.00pm