



Bolton Community Practice CIC



Patient Advisory Group

**MINUTES OF THE MEETING OF THE BCP PATIENT ADVISORY GROUP
WEDNESDAY 4th MAY 2022
VIA ZOOM**

PRESENT

PAG (Patient Advisory Group Members)

Bill Lawley	(Chair)
Kishor Gandhi	(Deputy Chair)
Mary Barrow	
Kathleen Delaney	
Norma Mason	
Sohema Patel	
Liz Williams	

Bolton Community Practice

Penny Parr	(Interim Clinical Director)
Natalie Preece	(Director of Performance and Operations)

BCP Patients (Non-PAG Members)

None



The Chair welcomed Natalie to the Meeting. Natalie was the new appointment to the post of Director of Operations and Performance following the departure of Bernie Gildea. PAG put on record its gratitude for Bernie's support of PAG.

The Chair presented his Annual Report to the Patient Advisory Group 2021 (appendix 1)

It was agreed to note the Chair's Annual Report 2021

It was noted that Karen Worrall had resigned from PAG due to additional work commitments. Karen was thanked for her conscientious work and the importance she had attached to representing the interest of patients.

Liz Williams announced her resignation from PAG. Liz was thanked for her valued contribution to the workings of PAG and which had always been of a high standard.

Dr Parr explained that at the time of her appointment as Interim Clinical Director BCP had known of her proposed retirement. Dr Parr now informed PAG that her intention was to resign from the end of May / early June. The post of Clinical Director had been advertised but no appointment made. Accordingly, other arrangements were being made to cover the situation. Dr Parr explained the proposed arrangements.

PAG expressed its dismay at losing a very well loved and trusted doctor and friend. Dr Parr was very well known and respected for her personal dedication, care and attention to each one of her patients. No effort was too much. Many patients had cause to be grateful to Dr Parr for her expert care.

Dr Parr agreed to forward information about PAG's position in the proposed arrangements.



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The Meeting was chaired by the Chair (Bill Lawley).

Item No.		Action
1.	APOLOGIES Mary Meacher (PAG Member)	
2.	MINUTES OF ZOOM PAG MEETING – 3rd NOVEMBER 2021 Noted.	
3.	MATTERS ARISING NOT OTHERWISE ON THE AGENDA. None.	



Item No.

Action

4.

APPOINTMENTS

BCP

At the September PAG Meeting Dr Parr had recognised that the callback arrangements were unsatisfactory and not working as well as they could, and agreed to consider alternatives, such as callback times and time slots.

It was noted at the September PAG Meeting–

- (1) Dr Parr was to trial giving appointment times which, if successful, could be extended to callback arrangements,
- (2) there was currently a shortage of staff to answer the telephone, leading to further delays, but interviews were to be held shortly,
- (3) BCP agreed to report to the next PAG Meeting on the issue of increasing to a maximum the number of face-to-face appointments with doctors,
- (4) Patients were to be requested to ring for blood test results after 11.00 each day, and
- (5) BCP agreed to report to the next PAG Meeting with a Recovery Plan indicating how the Practice intended to recover its service to the pre-pandemic position.

Accordingly, Dr Parr reported that she had re-designed the Appointment System. The new arrangements dealt with contact times and time slots and increased the proportion of face-to-face appointments with doctors.

However, inconsistent practices as to contact times and time slots continue to be a major source of complaint.

Dr Parr undertook to revisit this issue and send an email to the clinical staff setting out the position.

BCP continued to offer a blend of face-to-face and telephone appointments but with the emergence of more infectious variants of Covid-19, BCP had needed to triage patients by a clinician prior to receiving a face-to-face appointment. This was for the safety of staff and patients, and to reduce the risk of the service being overwhelmed.

BCP had participated in continued access targets for Bolton, and has exceeded the required provision for both numbers of contacts per 1000 patients as well as face-to-face appointments.

Continues.....



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Continued.....

BCP had been working on a list of conditions unsuitable for remote assessment and being used to book straight into face-to-face appointment.

Any complaint about a locum should be referred to BCP to ensure consistent good practice.

There were problems with the Online Patient Consultation Tool

It was agreed to note the position.



Item No.		Action
5.	<p data-bbox="336 387 464 421">IT ISSUES</p> <p data-bbox="336 427 1332 499">The PAG Webpage on the BCP Website and BCP Website itself required some updates.</p> <p data-bbox="336 544 1332 616">BCP continued to have technical problems (An example was the occasional cutting-off of patients' telephone calls to the Practice).</p> <p data-bbox="336 660 1332 732">Dr Parr acknowledged the problems and agreed to ensure a report was made available to the next PAG Meeting.</p> <p data-bbox="336 777 791 808">It was agreed to note the position.</p>	BCP
6.	<p data-bbox="336 853 895 887">HORWICH HEALTH AND WELLBEING HUB</p> <p data-bbox="336 893 651 925">Nothing further to report.</p>	
7.	<p data-bbox="336 969 735 1003">LITTLE LEVER HEALTH CENTRE</p> <p data-bbox="336 1010 1054 1041">The new Little Lever Health Centre was nearing completion.</p>	
8.	<p data-bbox="336 1086 724 1120">VACCINATION PROGRAMME</p> <p data-bbox="336 1126 1190 1198">As reported at the last PAG Meeting, the Programme delivered 38,000 vaccinations..</p> <p data-bbox="336 1234 1299 1301">Weekly Clinics continue to be held on Wednesday afternoon at Waters Meeting Health Centre.</p>	
9.	<p data-bbox="336 1346 831 1379">NATIONAL GP PATIENT SURVEY 2021</p> <p data-bbox="336 1386 1332 1525">The results of the National GP Patient 2021 Survey were, in respect of BCP, somewhat disappointing. However, it had to be borne in mind that the Survey was carried out at a time when BCP were administrating the Vaccination Programme for not only their own patients but also patients from other Practices.</p> <p data-bbox="336 1561 751 1597">It was agreed to note the position.</p>	
10.	<p data-bbox="336 1641 635 1675">ANY OTHER BUSINESS</p> <p data-bbox="336 1682 916 1713">The patient list size at 1st May 2022 was 13,903.</p> <p data-bbox="336 1749 660 1886">ASTLEY DALE - 5074, LADYBRIDGE - 4560, MARKET SURGERY - 2284, LITTLE LEVER – 1985</p>	



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Item No.

Action

11. DATE, TIME AND PLACE OF THE NEXT PAG MEETING

Date: **To be Agreed**

Time: **To be Agreed**

Place: **To be Agreed**

Future Scheduled Dates are

To be Agreed

Minutes Prepared by Bill Lawley

Minutes Formatted by Kishor Gandhi



Appendix 1

ANNUAL REPORT OF THE CHAIR OF THE PATIENT ADVISORY GROUP - 2021

1. APPOINTMENTS

Thanks to all staff for the professional and dedicated manner in which they continue to provide services during the pandemic.

BCP undertook the Vaccination Programme for their own patients and also patients from other Practices and, in total, some 38,000 injections were administered.

BCP introduced a new appointments system, a triage system with an Online Patient Consultation Tool, for the emergency.

PAG asked for clarification on aspects of the triage system, and BCP confirmed:

- 1.1 Face –to- face consultations are regarded as very important.
- 1.2 Arrangements for contact times and time slots must be practical for patients and clinical staffs
- 1.3 The Online Patient Consultation Tool is not compulsory for BCP, but was encouraged by NHS (England) for use in the emergency circumstances.
- 1.4 The use of the triage system with Online Patient Consultation Tool is best for patients in the Covid-19 Emergency; it enables the Practice to be as resilient as is possible.
- 1.5 Staff are aware of the importance of ensuring all information ^{[[SEP]]}is kept confidential.
- 1.6 Arrangements are in place to cater for all ^{[[SEP]]}vulnerable patients and all patients in disadvantaged groups.
- 1.7 The principle of Patient Choice in making appointments is important. The use by patients of the total triage system with Online Patient Consultation Tool is not compulsory for a patient; a patient who for whatever reason is not prepared to give information on line is then dealt with as having ‘phoned the Practice and is referred ^{[[SEP]]}to a member of the clinical staff.
- 1.8 All triage judgments are made by staff with ^{[[SEP]]}clinical knowledge: non-clinical staff deal with procedural ^{[[SEP]]}matters and doctors or nurses deal with clinical matters.
- 1.9 Friends and Family Tests can only be sent to text users.

Following the ending of BCP’s involvement in the Vaccination Programme and the beginning of the process to return to “normal”, the appointment arrangements have been amended to increase the proportion of face-to-face appointments and to take into account more practical contact times and time slots.



2. PAG BOWEL CANCER AMBASSADORS

Before the pandemic PAG had so far contacted 73 patients who had not returned their screening tests encouraging them to take part in the screening,
(This initiative has been put on hold.)

3. CERVICAL SCREENING

Many women are simply unaware of the vital importance of Cervical Screening. Before the pandemic PAG decided to ask the BCP Board to launch an on-going SCREENING CAMPAIGN to increase the number of patients screened.
(This initiative has been put on hold.)

4. YOUNG CARERS

Before the pandemic PAG sent a letter to Bolton Clinical Commissioning Group (the BCCG) and Bolton Council drawing attention to the urgent need to make further resources available to identify and support young carers. We agreed to invite the BCCG's Director of Transformation to attend a PAG Meeting.
(This initiative has been put on hold.)

5. DEALING WITH COMPLAINTS AND COMPLIMENTS

By raising issues with BCP we hope we help to make a difference. We have asked BCP to reduce the delay in making appointments

6. APPOINTMENTS – PHONE WAITING TIMES

BCP have introduced a Call Champion Rota. The Call Champion is responsible for the calls on his/her rota day. The call data will be used as a performance indicator in his/her regular performance reviews and annual appraisals. However, It is too soon to know whether or not this initiative will improve waiting times to make appointments.



7. COMMUNICATION: BCP AND PAG (AND PATIENTS)

PAG has not been given permission by BCP to input non-clinical information direct into the PAG Webpage on BCP's Website or into the BCP Website. This means that PAG is totally dependent on BCP for keeping the PAG Webpage on BCP's Website up to date, for the release of information to PAG (for the Bulletin) and for putting the Bulletin into the patient domain through the BCP Website.

A number of Patient Bulletins have been produced and are available on the PAG Webpage.

Full and prompt communication of information between BCP and its patients is an essential aspect of what must happen for the benefit of patients.

8. PRIMARY CARE NETWORKS

PAG is watching the progress of the Primary Care Networks in Bolton. This is an initiative to achieve more collaborative working between all primary care providers. BCP is already benefitting from additional staffing provided on a network basis.

9. OTHER IT ISSUES

PAG has given its views on BCP's triage system with Online Patient Consultation Tool. These include an acceptance in emergency circumstances of the system to recognising there is a pressing need to ensure that not a single patient is inadvertently excluded.

We press BCP to have put right the problems with its Computer System, particularly the occasional cutting-off of 'phone calls to the Practice.

The Deputy Chair toils away on IT issues for the benefit of PAG and patients and regularly provides BCP with information for the PAG Webpage on BCP's Website.

10. PROPOSED NEW PREMISES AT HORWICH AND LITTLE LEVER

It is hoped that the Horwich Health and Wellbeing Centre will proceed.

The new Surgery at Little Lever is planned to be ready in March 2021. Whilst BCP has offered Little Lever patients more home visits and face-to-face appointments, there has been a lack of openness by BCP about the use of the present Health Centre premises during the pandemic.

11. USE OF SURGERIES

For various reasons and at different times surgeries at BCP have been obliged to close for lengthy periods. We thank all staff and patients for their acceptance and understanding of the difficulties this has created.



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12. POST OF CLINICAL DIRECTOR

This Annual Report gives me an opportunity to express PAG's gratitude to Dr Anne Talbot who retired as Clinical Director, and to thank Dr Penny Parr who took over as Interim Clinical Director pending a final appointment.

Bill Lawley, Chair of Patient Advisory Group

December 2021