

Woodlands Patients Voice Meeting Minutes

Wednesday 12th September 2018

Present : David, Val, Kay, Fiona, Anne, Janet (PPG Members)
Patricia Brown (Practice Admin representative and PPG Secretary)
Dr Ellora Das (Woodlands GP)

Apologies: Don, Mick, Bob, Sylvia, Michael, Mary, Jean and Joanne

1. Welcome and Apologies.

Apologies were recorded.

Trish reported receiving a new member application – advised of meeting via email but no response so far.

2. Speaker: - Susan Holmes. Publicly Elected Governor representing Ashfield and Lead Governor Sherwood Forest Hospitals Trust.

Susan outlined what the role of Governor involved. In order to be elected, you have to be a Trust Member and the Members elect the Governors. Ashfield, Mansfield and Newark have four governors each, whilst Derbyshire have two and the rest of the East Midlands have one elected Governor. The Public Governors carry the oomph. Their statutory duties are to engage with the membership, find out what they are thinking and hold the non- executive directors to account. They can hire and fire the Chairman. They can each hold the post for three, three yeas stints (nine years in total) as a Governor. They are desperate to interest people in applying for governors as many currently in post are due to come to an end next year. They attend compulsory governors' meetings, are involved in unannounced walk-about visits within the hospital with senior hospital staff in different work areas, giving them a chance to speak to anyone they want – open and transparently - whether it is staff or patients. They are able to go in as a lay person/member of the public and view things from a patient's perspective and are then able to feed in to post meeting discussions. Susan reports this is an amazing experience and a real eye opener and has allowed the governors to be involved in steering improvements – they have been instrumental in halting the hospital merger and where it was felt the Reception desk in maternity looked too much like a Premier Inn, this had now been changed.

The Trust has recently achieved a "Good" CQC inspection overall and the input from the Governors to make improvements was acknowledged – they were elected when the Trust was in special measures. The inspection covered all Sherwood Forest Trust, including Kings Mill and Newark

Hospitals and their two wards within Mansfield Community Hospital. They were inspected in 47 areas and were awarded 42 good, 4 outstanding and 1 requiring improvement. The CQC Inspectors did not visit enough areas under this final category and therefore they could only base their award on the last inspection results, for which CQC have apologised. Seems very unfair!

Susan reports that the continuous work towards and resulting improvements and now the CQC results, that staff morale is good, staff turnover and sickness absence at very low levels and staff recruitment very positive. She reports that the Trust has amazing staff who are all working hard to achieve outstanding in all areas. The Trust are high achieving for all treatment targets, though slightly below the national average for cancer treatment waiting times, but this is largely due to the transfer of treatment to NUH which can cause delays.

Discussed the level of commitment for the Governor post - For one week once a month, every governor does two hours in the "main street" for a "meet the governor" event. They are currently working on drafting a specific questionnaire to use in future. Events are put on just for Trust members and monthly newsletters are produced. Can access educational sessions (e.g. CPR/dementia/thyroid). Susan feels it really is worth being a member - very interesting and rewarding. The Lead Governor post is very time consuming – but an absolute eye opener. Most meetings are held at 5.30pm.

Susan strongly recommends and encourages standing for a governor. There are lots of vacancies looming. Susan will drop off application forms.

Questions and answers - Susan will take comments back: -

Colour coding of staff uniforms is confusing some in grey, some in scrubs. No signs in general spaces like main street or A and E to advise patients on how to identify staff.

Multiple concerns re the transfer of information: -

Poor experience of delayed discharges - Susan reports this is now less likely to be about waiting for pharmacy, more likely to be waiting for doctors to sign release paperwork – the trust are organising for consultants to sign paperwork the night before to prevent these delays, streamline discharges and free up beds.

The group report issues with transfer between departments and poor communication of being cared for /transferred between hospitals.

Poor experience of discharges – phoned for follow up and not in the system at all or issues in out-patients with follow up arrangements – consultant wants to see you in six weeks – can't make appointment at desk – will be sent on – why does someone else need to arrange, then post. This is duplication of work and invariably follow up is then several weeks after you should have been seen. ?consultant diaries not available/clinics not organised.

EAU appears well staffed but still feels like a cattle ranch – patients been diagnosed but no comms from doctors/wards sending patients to EAU. Susan reports a new patient chart system detailing the flow of individual patients which is constantly updated has been introduced. This means staff

can track someone's progress. A and E as busy as winter at the moment – recently saw over 500 patients treated in one day. Some concerns that there is no nurse/clinical presence in A and E – all behind doors.

What plans for digital records? Being worked on and linking all GPs and hospitals

Car park charges - these are not the hospitals, though the trust can fix prices in a range only – but they are at the lowest possible now and have not been changed for three years.

The portable scanner outside clinic 10 is taking up half the car park. Only there temporarily to catch up with back log.

Governors have asked about a buggy from the bus stop up the drive to the hospital. Issues with drop off zone – no more space to allocate – may need managing/supervising better. Car parking a thorn in everyone's side. Open visiting has improved car parking marginally. Green issue with number of spaces allocated – greener to get buses in to the hospital site.

Does trust have any non-operational assets. Not really, but in reality, you could say that the 600 volunteers are the best asset to have.

What about the debt? – doing pretty well. 0.2 million worse than planned (as set by NHSE) six months in to the year. Lost a lot of money by cancelling elective operations in January but was necessary for releasing beds for winter pressures – will have picked this work/finding stream up over the following months. The PFI payment includes portage, cleaners and other services. Susan reports it would cost more than the PFI debt to employ these staff independently now. Part of the debt is paid by an interest free loan from the government. Not as bad as it seems operationally. False debt – but we do have a fabulous hospital. The group suggest charging DNAs and inappropriate use of A&E and collect monies owed by foreign nationals Susan reports these are very small figures.

Age statistics of staff – many now of a similar (retirement) age – manpower crisis looming. Susan reports they are fully aware and there are regular updates of staffing levels – at moment doing very well for recruiting staff with more interest from both nurses and doctors.

What can PPGs do? – pass on ideas, criticisms, put forward patient issues to be looked at by the governors. Encourage feedback through a governor. Volunteers are raising 550K for a nuclear scanner. Already raised 120K – any contributions welcome.

Cleanliness - photos produced of toilets in hospital reception – looked like a paper fight. Recent audit of cleanliness show high standards of 98%. Patients need to report when spotted so that a cleaning team can be despatched.

3. Minutes 18th July 18

List of meeting dates - November date should have read 14th November. Otherwise approved.

4. Matters Arising

a) Request for support for the homeless

Trish advised that the practice were still awaiting information from Roundwood re indemnity arrangements/ logistics. However, Kay reports she is no longer associated with the Food Bank following a change of rules for referring in to the service and for those accessing the service regularly. Discussed at length with the group and it was suggested Kay contact Gloria de Piero – MP For Ashfield to discuss her concerns.

b) Dementia Friends

Speaker did not attend for awareness event for PPG members and practice staff on Friday 20th July. Val felt we might be able to arrange training from one of the contributors to the self-help event.

5. Self Help Event

Organised for Saturday 29th September. Setting up from 9am then open to the public 10 to 11.30am. Free raffle for everyone attending – will be drawn on the day. Information is out there – copies of the posters/legend provided for group. Flyers on chairs/posters/ media board/website. Val contacted CHAD/ Mansfield Radio. Group members to spread word please and support on the day if possible. David kindly volunteered. If anyone has a pasting table they can lend this would be helpful. Will be issuing evaluation forms for feedback and suggestions.

6. Flu Clinic

New vaccines manufactured this year – three different vaccines - over 65; under 65s and children.

There is only national manufacturer/supplier for the over 65 vaccine and rather than being able to order all our vaccines to be delivered the start of the campaign, deliveries across the country have been staggered. This means our big Saturday clinic cannot be done this year. Instead we will target the most high risk patients first. May use SMS messaging to invite some patient groups but hope to have some clinics on screen within the week. Issues advertised on media board and website and information leaflet available at reception – leaflet shared with group.

7. Walking for Health

The proposed “buggy walk” has not really progressed as we had hoped. Keith now appears to be setting hurdles – re insurances and providing a walk leader. Group members recall him saying insurance would be through Walking for Health/Marie Cuie and that he could provide a walk leader at the outset, whilst a group member is trained up as walk leader. To ask whether he has a current route that would be suitable for buggies for the applicants to tag along for now. Trish asked if anyone in the group might be interested in becoming a walk leader – suggest an advert on the media screen. Trish had heard from Sure Start that Everyone Active used to support a buggy walking

group from the Lammas and provided a warm up/cool down session. ? anything from there. Ask at Self Help event

8. National Patient Survey

The practice management team have reviewed this year's results and whilst we are no longer top in the area, still pleased with the overall results – the majority of scores are well above national averages with the exception of phone access. Discussed with the group, who on reflection feel this is one negative area balanced against all other positive aspects. Management team and PPG agree that in trying to address this, this would risk success in other areas where patients really value the service. Same day appointments, telephone appointments, worker's appointments all introduced in response to patient feedback – PPG feels we are a responsive practice – and always discuss with the PPG/seek their input. Trish to provide copies of survey results if possible.

9. Practice Update

Building Extension is ahead of schedule – IT quote yet to be approved.

10. PPG Communication

Recent PPG communication from the CRP/PPEC - looked at every practice website in the MACCG area to see how to contact the PPG and nearly all sites did not mention the PPG at all and most of those that did, said ring the practice manager. Woodlands was one of only two had a proper email site for the PPG.

11. SFHT Forum for Public Involvement (meeting overran - not all present at this stage)

Correspondence from Julie Andrews looking for members to join this team to look at shaping and helping advise the local hospital trust. Meeting once a month, the group has so far inputted in to areas such as the Trusts' Quality priorities, advised on the content of the Annual Summary and advised on language used in patient information leaflets. If interested, please email Kerry.beadling-barron@nhs.net for more information and dates of upcoming meetings.

12. Any other business

i) AVA - Offering lifestyle info re FALLS/social isolation. They are seeking a short meeting with the clinical team and can then offer a short term display for the waiting area. Trish to ask the practices Carers Champion Susanna to meet with them so we can access the resources. Ask for a speaker to attend the next meeting.

Next Meeting - Wednesday 14th November 2018 5.30pm to 7pm