

# Latham House Medical Practice

## Patient Reference Group

### MINUTES OF MEETING

<b>Meeting</b>	<b>LHMP PRG</b>	<b>Date</b>	<b>3 February 2022</b>
		<b>Time</b>	<b>10:30hrs</b>
<b>Location</b> Zoom Meetings / Waterford Suite, Sysonby Acres			
<b>Present</b> Jane Horn (JH) (Chair) <span style="float: right;">Debbie Parry (DP)</span> Angie Phillips (AP) (LHMP representative) Mike Kitching (MK) (Secretary) Malise Graham (MG)			

ITEM	DISCUSSION	ACTION
1.	<b>Apologies and Welcome</b> a) Apologies were received from Louise Finn and Sarah Robb.	
2.	<b>Speaker – Debbie Parry – IT and Data Quality Manager – New Phone System</b> a) The new phone system, scheduled to be installed by the 31 <sup>st</sup> March, will allow the practice to look at ways to improve access for patients and includes links to clinical systems. b) The system allows for remote queueing and patient ring backs. c) <b>Q. What will the patient notice when the new system goes live? A.</b> No change, the interface they are used to will remain in place. d) The system is provided by a specialist provider for GP practices. e) The members had a general discussion around communications to patients. a. <b>Q. The current plan is to reduce wait time to five minutes, which is still a long wait. Is there a target wait time? A.</b> A lot of work is being undertaken on target responses for all areas. A lot of data is being worked through. b. <b>Q. Is there a deadline for the completion of this work? A.</b> No, because each change that is implemented raises additional items to investigate. Patient contact is forever evolving. f) DP was thanked for attending and for the information provided.	
3.	<b>Minutes of the Meeting of 2<sup>nd</sup> December 2021</b> a) The minutes of the last meeting were accepted as a true and accurate record of the meeting.	
4.	<b>Matters Arising – Action List</b> a) 4.b - Matters Arising - LHMP was asked if it could please provide a list of services unique to LHMP due to its size with numbers of patients accessing these and any demographic. This is to demonstrate the importance of continuing to invest in LHMP as a key health service, alongside any additional health services planned for the community – completed – see Item 7.a. b) 4.c.b – Matters Arising - It was agreed to add “One thing the PRG can do” to the next meeting agenda – completed.	

	<p>a. 4.d.b - Matters Arising - We will setup a test meeting before the next PRG meeting - completed.</p> <p>c) 6.a.g - Chairs Report – Healthwatch visit - It was agreed to invite Healthwatch to one of our meetings, once the report had been received and reviewed – ongoing.</p> <p>d) 7.d.h - Practice update - Can the hospital be used more? - Although the Hospital comes under Secondary Care and the Practice is Primary Care it was agreed to investigate what services were available at the hospital. AP would email MG to see if information was available at Melton Borough Council – ongoing.</p>	<p><b>JH</b></p> <p><b>AP/MG</b></p>																																																			
<b>5.</b>	<p><b>Items for Any Other Business</b></p> <p>a) Smoothing patient flow – covered in Item 2.</p>																																																				
<b>6.</b>	<p><b>Chairs Report</b></p> <p>a) No-one from the PRG attended the last PPG meeting, partly due to the late notice.</p> <p>b) The PPG meetings seem to be concentrating on vaccination numbers.</p> <p>c) Q. What is the council view on walk in vaccinations at Melton Vale? A. The council doesn't have a view. It was noted that the vaccination centre seems to be incredibly well run with special thanks to the Melton Lions volunteers.</p>																																																				
<b>7.</b>	<p><b>Practice Update</b></p> <p>a) Actions from Previous meeting</p> <p>a. We were asked by our PRG to provide information about the benefits of having a large practice locally as it enables practitioners to expand their services which ultimately benefits pts and saves trips to secondary care. Smaller GP practices have less flexibility to enable these extensive services</p> <p>b. Services LHMP offers due to size (not typical in General Practice)</p> <ul style="list-style-type: none"> <li>• Dermatology including surgical procedures for some cancers</li> <li>• ENT including audiology and minor procedures</li> <li>• Vasectomies</li> <li>• MSK including small joint injections</li> </ul> <p>c. April 20 - March 21 we had 621 referrals across the services</p> <p>d. April 21 - Jan 22 we have already had 952 referrals</p> <table border="1"> <thead> <tr> <th>Attended Appointment Activity</th><th>Attended apts</th><th>Referrals</th></tr> <tr> <th></th><th>Oct-Dec 21</th><th>Oct-Dec 21</th></tr> </thead> <tbody> <tr> <td><b>Dermatology (including procedures)</b></td><td><b>177</b></td><td><b>135</b></td></tr> <tr> <td><i>LHMP GP Patient</i></td><td><i>116</i></td><td><i>72</i></td></tr> <tr> <td><i>Other GP Patient</i></td><td><i>61</i></td><td><i>63</i></td></tr> <tr> <td><b>ENT (including procedures)</b></td><td><b>51</b></td><td><b>33</b></td></tr> <tr> <td><i>LHMP GP Patient</i></td><td><i>32</i></td><td><i>16</i></td></tr> <tr> <td><i>Other GP Patient</i></td><td><i>19</i></td><td><i>17</i></td></tr> <tr> <td><b>Minor Surgery Consultation</b></td><td><b>52</b></td><td></td></tr> <tr> <td><i>LHMP GP Patient</i></td><td><i>29</i></td><td></td></tr> <tr> <td><i>Other GP Patient</i></td><td><i>23</i></td><td></td></tr> <tr> <td><b>Minor Surgery Procedure</b></td><td><b>33</b></td><td><b>74</b></td></tr> <tr> <td><i>LHMP GP Patient</i></td><td><i>16</i></td><td><i>45</i></td></tr> <tr> <td><i>Other GP Patient</i></td><td><i>17</i></td><td><i>29</i></td></tr> <tr> <td><b>MSK Injections</b></td><td><b>43</b></td><td><b>26</b></td></tr> <tr> <td><i>LHMP GP Patient</i></td><td><i>35</i></td><td><i>21</i></td></tr> <tr> <td><i>Other GP Patient</i></td><td><i>8</i></td><td><i>5</i></td></tr> </tbody> </table>	Attended Appointment Activity	Attended apts	Referrals		Oct-Dec 21	Oct-Dec 21	<b>Dermatology (including procedures)</b>	<b>177</b>	<b>135</b>	<i>LHMP GP Patient</i>	<i>116</i>	<i>72</i>	<i>Other GP Patient</i>	<i>61</i>	<i>63</i>	<b>ENT (including procedures)</b>	<b>51</b>	<b>33</b>	<i>LHMP GP Patient</i>	<i>32</i>	<i>16</i>	<i>Other GP Patient</i>	<i>19</i>	<i>17</i>	<b>Minor Surgery Consultation</b>	<b>52</b>		<i>LHMP GP Patient</i>	<i>29</i>		<i>Other GP Patient</i>	<i>23</i>		<b>Minor Surgery Procedure</b>	<b>33</b>	<b>74</b>	<i>LHMP GP Patient</i>	<i>16</i>	<i>45</i>	<i>Other GP Patient</i>	<i>17</i>	<i>29</i>	<b>MSK Injections</b>	<b>43</b>	<b>26</b>	<i>LHMP GP Patient</i>	<i>35</i>	<i>21</i>	<i>Other GP Patient</i>	<i>8</i>	<i>5</i>	
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Vasectomy Consultation	39	
LHMP GP Patient	16	
Other GP Patient	23	
Vasectomy Procedure	30	64
LHMP GP Patient	12	22
Other GP Patient	18	42

- Coils (awaiting numbers)
- CHAT (closed due to pandemic – looking to reinstate)
- Minor Injuries (awaiting numbers)
- Enhanced Diabetes Service including insulin initiation (awaiting numbers)
- Specialist Mental Health Nurse – 64 Appointments per week
- Dedicated Care Home Team - look after 250 care home patients and all our patients at end of life
- Hot Hub facilities for Covid + patients - not easy to quantify
- LHMP are a medical school academy plus we are a training practice

b) Training Summary

a. Registrars

- Year 1 x 3 per year – they stay with us for 4 months and will return in year 3 and stay with us for their final year
- Year 2 – we can accommodate up to 3 a year, these would be with us for 4 months, normally we would not see these again, as their year 1 and 3 are at their main training practice
- Year 3 x 3 final year Doctors who stay with us a year

b. Medical students – Year 5 students x 4

- We take 4 year 5 students who stay with us for 5 weeks.
- We have 4 rotations of students in the year so 20 weeks' worth of training provided
- We also cover early exposure to general practice, this is where we host year 1 medical students for two weeks, to give them a taster session of the GP world.

Extended learning, where medical students can choose to spend a further 5 weeks with us as a specialty training placement.

- We currently have the International GP – Kristztina Virag, who is in her 2nd year of training of a potential three-year course

c. Student Pharmacists - ad hoc placements

- Pharmacy Pre-registration training, - pre reg pharmacist stays with us for 6 months

d. Student Nurses- ad hoc placements

c) Smoothing Patient Flow

a. From this work we have clear focus areas which we believe will improve the patient experience when contacting services within LHMP; the actions are:

- Reception work assessment and job standards
  - Phones access and monitoring – new system will help but current numbers show we are working well with avg waiting time of 12 minutes and <20% lost calls (this is people hanging up in Q)
  - Workforce planning
  - Emails
- Maximising appointments – target DNA's, appropriate triage etc
- Team building and engagement in the work

d) January Performance



**We're working hard to look after you.**

**In January 2022 we delivered & received....**

- **11,435 (545 calls per day)**  
**Incoming phone calls**
- **2,559 (122 contacts per day)**  
**Engage Consult contacts**
- **18,200 (867 per day)**  
**Total appointments**
- **5,380 (256 per day)**  
**GP appointments**
- **592 (135 hours wasted)**  
**Patients did NOT attend their appointment**
- **15**  
**Complaints**



e) HEALTHWATCH

- There is an early summary of their report attached with these minutes.
- It was felt that the feedback at the time of the visit was more positive than the interim report findings.

f) Section 106 financial breakdown.

- Most of the funding will be on the distributor road and the majority of the 106 funding will go towards education.
- It is believed that they will be funding remaining for health.


g) Other items

- There was a general discussion regarding the town centre and local transport issues.
- It was noted that there was a poor understanding of the facilities in the borough for 13-17 year olds.

h) January communication to patients

- we recently emailed patients on our mailing list, our local cllrs and MP with an update on our performance. This was a really positive piece and was also shared on our website at <https://www.lhmp.co.uk/2022/01/20/latham-house-medical-practice-community-update-january-2022/>.





The Melton Times also covered this news and a selection of feedback from the online story is below.

 **Denise Meadwell** Must say I recently had wonderful service from telephone receptionists and repeat prescriptions  
Thankyou  
Jan 26 • Reply Message

**Gary 2609** There has been a definite improvement in the quality of the service provided, let's hope that waiting lists to see specialists at hospitals improve and the old, 'there are huge backlogs because of covid' excuses are sorted soon, doesn't wash anymore. Well done Latham House.

 **Gary Preston** Denise, so did I, excellent service. 👍  
Jan 26 • Reply Message

**Helen Wilson** Great news

	<div> <div>Ronan Browne I agree it's improving 👍</div> <div> <div>  <b>Gwenne Mamos</b> Denise Meadwell me too, cheerful and helpful.  Jan 26 • Reply Message </div> <div>  <b>Julia Hawley</b> Thank you for all that you do. The improvements have been noticeable at a very difficult time for all those on the coal face of healthcare. </div> </div> <div> <div>  <b>Gary Preston</b> Can i say how much the service from Latham House has improved recently and so much for the better. Well done 🍌🍌🍌 </div> <div>  <b>Gary 2609</b> There has been a definite improvement in the quality of the service provided, let's hope that waiting lists to see specialists at hospitals improve and the old, 'there are huge backlogs because of covid' excuses are sorted soon, doesn't wash anymore. Well done Latham House. </div> </div> </div>	
8.	<b>Standing Items (if not already covered)</b> <ol style="list-style-type: none"> <li>Healthwatch report <ol style="list-style-type: none"> <li>Covered in Item 7.e</li> </ol> </li> <li>Smoothing Patient Flow <ol style="list-style-type: none"> <li>Covered in Item 7.c</li> </ol> </li> <li>Optimisation of Space <ol style="list-style-type: none"> <li>The practice is making use of the meeting room for the prescription team.</li> <li>They are moving managers into the same areas as their teams, which is working well, taking into account the covid rules.</li> </ol> </li> </ol>	
9.	<b>Secretary's Report</b> <ol style="list-style-type: none"> <li>A letter of thanks has been received from Age UK for the work done by the social prescriber to signpost their services.</li> <li>The social prescriber wishes to speak to the PRG about their services. Add to the next meeting agenda.</li> </ol>	<b>MK</b>
10	<b>Any Other Business</b> <ol style="list-style-type: none"> <li>There is a need to get a full committee as personal circumstances and Covid have reduce the number of attendees. <ol style="list-style-type: none"> <li>AP, JH and MK to have a meeting with a view to presenting a way forward to a future PRG meeting.</li> <li>The secretary to send out placeholder meeting invites.</li> </ol> </li> <li>Coffee mornings. <ol style="list-style-type: none"> <li>Would members think about locations within the town centre that we could use to run a coffee morning, such as the Market. Ideas welcome.</li> </ol> </li> </ol>	<b>JH/AP/ MK MK</b>  <b>ALL</b>

11	<p><b>Date, Time &amp; Location of Next Meeting</b></p> <p>Next PRG meeting, 7<sup>th</sup> April 2022, 10:30.</p> <p>ZOOM meetings / Waterford Suite, Sysonby Acres.</p> <p>Meetings 2022 – Venue to be decided on a meeting by meeting basis</p> <p>7th April</p> <p>9th June     Please note change of date – postponed by one week</p> <p>4th August</p> <p>6th October</p> <p>1st December</p>	
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