

South & Central Community Champion Network Meeting

Thursday 25th November 2021

Zoom meeting themed:

GP Access

Chair

Barbara Rouse (BR)

Bootle YMCA / Bootle Action group

Attendees

Maurice Byrne (MB)	Maghull Locality Representative
Louise Heritage (LH)	Sefton CVS Community Connector Maghull & Lydiate
Justine Shenton (JS)	Sefton Advocacy / Older Person's forum
Bob Wilkinson (BW)	The Samaritans
Simon Walker (SW)	People First Merseyside
Jan Comer (JC)	People First Merseyside
Peter Davies (PD)	Liverpool & Sefton Age Concern
Sandra Bell (SB)	The Reach Men's Centre
Joan McArdle (JMc)	The Swan Women's Centre
Rosemary Hart (RH)	Kindhearts Café
Debbie Rogers (DR)	Sean's Place
Nikki Thomas (NT)	The Venus Centre

Healthwatch staff member(s)

Wendy Andersen (WA)	Engagement & Participation Manager
Amanda Williams (AW)	Signposting & Information Officer

Guest Speaker (s)

Jan Leonard (JL)	NHS Southport & Formby and South Sefton CCG
Lyn Cook (LC)	NHS South Sefton CCG

Apologies

Helen Roberts (HR)	Seaforth & Litherland Locality Representative (also covering Hightown & Ince)
Kevin Halewood (KH)	Crosby Locality Representative
Debbie Kelly (DK)	The May Logan Centre
Vikki Martlow (VM)	Sefton Opera
Mandy Lewtas (ML)	Kindfullness Café
Caroline Hesketh (CH)	Sefton Carers
Lesley Curran (LC)	People First Merseyside
Nicola Hall (NH)	People First Merseyside
Chris Dale (CD)	Crosby Age Concern
Helene Santamera (HS)	British Red Cross Refugee Support

1. Introductions & Housekeeping

BR welcomed all members and guest speakers to our Community Champion network zoom meeting.

BR started the meeting with a tribute to Jennie Meehan, Bootle Locality Rep who has sadly passed away. BR asked members to observe a silence and to remember Jennie.

Guest speakers and topics planned for today's meeting:

- Jan Leonard & Lyn Cook – GP Access survey

The last south and central Community Champion network meeting was held September 2021 themed on:

- Amber Hirshman – GP Website survey
- Lindsey Smith – Community Dermatology
- Dave Marteau – NHS 111 service

Housekeeping was covered and BR introduced the guest speakers and welcomed new Community Champion network members.

2. Code of Conduct / Declarations of Interest

BR informed everyone that the Healthwatch Sefton Code of Conduct had been circulated and all members should have signed and returned this. Members were asked if they are yet to do this to complete this asap. During this meeting all members were informed that they were to abide by the Code of Conduct and Kindness and Respect Guidelines.

BR asked if there were any declarations of interest.

No declarations of interest were declared.

3. GP Access – Jan Leonard & Lyn Cook

JL and LC introduced themselves to members.

A presentation was shared with the group re: General Practice Access and the GP Access survey. A video was also shown to members on 'A day in the life of a GP'.

The presentation included areas:

- The challenge – in still keeping patients safe in-line with national guidance and coping with the rising demand.
- GP activity between January 21 – June 21
- A day in the life of GP DR Rob Caudwell
- GP Access Survey
- Next Steps
- Questions

JL informed members that there was a national piece of work to look at GP practices telephony systems as upgrades were needed.

The GP Access survey – The survey will start to be rolled out firstly across Southport & Formby with South & Central Sefton following a couple of weeks later. An email will be sent to Healthwatch Sefton with information to share with the network prior to patients receiving the survey.

Following the presentation, a number of comments and feedback were put forward by members:

BR commented on the video and asked when the GP would have time to eat or drink with the long hours worked. BR went on to say that in her experience all medical practice staff are trained to deal with conditions and that she had always been impressed.

Question / Comments: BR, Bootle YMCA, asked what the size of the practice was the GP on the video was from? Answer: The practice has approx. 3,000 – 4,000 patients and that the GP was also responsible for an additional practice.

Question / Comments: BR asked if LC or JL knew how many PPG's (Patient Participation Group's) were active across Sefton GP practices? Answer: LC stated that this had been mapped and would be presented at the PPG meeting being held on 1st December that BR will be attending.

Question / Comments: JS, Sefton Advocacy and Sefton Older Person's forum stated that in her experience working with members people are having terrible problems mainly with getting through on the phone lines. JS stated that she felt the video was saying 'not to complain as GP's are working hard'. Three members echoed their agreement with this comment.

Answer: JL said that she understood this and that they took on the feedback that phone lines are hard to get through on, in addition patients used to be able to walk in to book appointments. The video was made and promoted in relation to adverse media saying that 'GP Practices were closed'. The purpose of the video was to let patients know that they are open and working hard on behalf of patients.

JL went on to explain that access issues had been long term and that the pandemic and made this issue worse. There is no uniformity on the telephone systems across the GP practices as they are small businesses. There is no contractual over sight. The new national steer will help improve the systems across Sefton. In addition, it was pointed out new telephony systems will also need additional staff to support and the impact of this is being evaluated. GP access is something the CCG are working to improve.

Question / Comments: JS stated that they are trying to encourage their older members not to give up when trying to see practice staff and that messaging / communication is needed on this. JL said that they are looking at where GP's have to refer patients and can access be elsewhere for patients.

Question / Comments: MB, Maghull Locality Rep stated that other professions within the GP practices need to be communicated better to patients e.g. physician associates. The public do not know who they are therefore there is no confidence in the service. Communication is the problem with this. Also, culture is an issue as patients used to see a named GP and some still think this is how it should work. MB gave an example of front desk staff sometimes not having accurate information to be able to inform patients. The 7-day access service needs to be better communicated. There are vulnerable people with no IT and this can lead to people giving up. In response LC thanked MB and stated that they realise communicating is key and that the 'Day in the life of a GP' was just one video and that they will be producing more comms information to provide necessary information and education to patients. The CCG are working to communicate and raise awareness of the roles in practice and that more videos will follow. This will include: What the roles are and how they can refer and triage. A culture change is also needed. LC stated that the video today will not be on its own and that the message is that GP practices are open to see patients.

Question / Comments: AW, Healthwatch Sefton Signposting Officer stated that she felt it was really good to hear that telephony is being looked at and reviewed. Many of the calls to Healthwatch Sefton are about this issue and that this is a welcomed piece of work. AW asked if a patient has tried to call a practice e.g. for 3 days in a row and each day told no appointments call tomorrow will there be a process to identify this patient as being a priority as they had tried each day? As this often happens patients they can be anxious and distressed and kindness and respect needs to be two ways. Patients are sometimes not getting the empathy they need. MB stated that front line staff maybe not receiving the training or resources that they need to deal with patients.

JL stated that they had been in talks with practices and as they each work differently there is not currently a system to deal with patients who have been ringing each day but that this was a good point and would be taken back to the team. Funding is available for training and this can be captured in the on-going work. [**Action: JL to take the issue raised back to the team.**](#)

Question / Comments: DR from Sean's Place thanked JL & LC and said that she felt the video was useful to see. DR went on to say that a lot of issues causing concern for their members are the prescribing of medication and lack of communication re: side effects. DR stated that a lot of their members are not told when prescribed medication such as anti-depressants that suicidal thoughts can increase during the first 2-week period of taking the medication. DR stated that she has known people

who have committed suicide during this period. DR said that she has already written to the CCG and asked if they would have a conversation about the Ollie Foundation and how this system could benefit patients in Sefton. This is within the NICE guidelines. JL said it would be good to have a conversation on this and the best person to speak with would be Susanne Lynch, Head of Medicines Management.

Action: WA to share contacts for this to be arranged.

The Ollie Foundation web link <https://theolliefoundation.org/>

Question / Comments: RH said that she represented Kindhearts Café and also visited elderly people in their homes. RH said that she agreed with DR comments about prescribing and communication issues and said she would like to know more about the Ollie Foundation. RH gave her feedback on accessing the GP not only as a patient but also a carer. RH stated she rang 96 times to get through for the person she cares for and 104 times to get through as a patient herself. When asked the receptionist if she knew how it felt to keep ringing that many times the response was 'I would not know how it feels because I am never sick'. Both RH and the person she cares for ended up being seen at the walk-in centre.

Another experience shared by RH was regarding a gentleman who needed an appointment. He was told to ring after 6.30 pm to get through to the out of hours. He needed help as he is terminally ill and his wife has dementia. To be told by your surgery to ring out of hours is not good. This gentleman thought he was dying that night and then to be told to ring the chemist in the morning.

RH also commented that she thought E-consult was a good service but that the call back time needs to be looked at. People have to wait all day for that call and then if you miss it, it is a missed appointment. Can patients be given an hourly slot? RH stated that she does promote E-consult but had a receptionist laugh at her saying E-consult was weeks behind.

JL responded to say she was sorry to hear about some of the experience's RH had shared and that she would be happy to support RH in raising any of them as a complaint. JL said that she will take forward RH suggestion of time slots for E-consult appointments. JL stated she would be happy for her contact details to be shared with RH.

Action: JL to take forward the suggestion of time slots for E-consult. WA to share contact details between JL and RH.

LH stated she was the Sefton CVS Community Connector for Maghull & Lydiate. LH said that she agreed with AW about the telephone systems and most of the feedback being about this from clients. LH stated that their clients are elderly and often cannot get through and this resulted in LH having to try and get through for them. LH stated that when she gets through and asks for the GP to call she often gets told yes, but feels this does not happen for the clients when they get through, it feels like staff do not take patients seriously. LH also said E-consult is a problem with no time of when the call will take place and then the patient has lost their chance. LH gave feedback concerning one client who repeatedly asked the receptionist not to call back on the mobile and to please use the house phone. This continued to happen until LH rang and asked that this be changed to the house phone and they then listened and changed it. They will listen to a professional ringing but not the patient and this causes so much stress for patients.

JL thanked LH for her comments and sharing the feedback. Action: JL stated that this would be taken back to the team and incorporated into the training for front line staff.

Question / Comments: JC from People First Merseyside said that she had heard lots of feedback with similar stories. JC wanted to say though that she felt not every surgery was the same. At her own surgery they will offer an appointment on the day either on site or at their other site. JC said that she agreed more training was needed for the front-line staff. Another area to comment on was the privacy for patients if they are being directed to see the chemist. A confidential space should be offered and not asked what the problem is over the counter.

Question / Comments: JS from Sefton Advocacy / Older Person's forum stated that she felt communication issues was a theme. JS wanted to share information re: consultant letters that are sent out to patients. JS stated that the letters should indicate on them that the letter is just for information and not for them to have to do anything with it. JL asked if the letters were coming from a certain team / department? A discussion ensued that patients have opted into this service and just don't realise.

Question / Comments: MB, Maghull Locality Rep asked about the NHS app. MB stated that patient medical records accessible on the app differed between GP surgeries. There is a lack of consistency as to what GP's have recorded for patients to see. One person can see their medical records and another in a different GP cannot. Action: JL will take this question back to the team.

Question / Comments: BW, from The Samaritans stated that his own GP practice was fine and that he had not experienced any problems seeing different health professionals. BW said that he felt communication was an issue based on calls they receive into the service. The frustration of not being able to get to speak with a health professional and that this was also for patients with mental health issues. BW stated he could see that NHS staff must also find it frustrating and tiring too.

BW also stated that he agreed about communication being an issue when it comes to medication. BW suggested that communication be more user friendly and professionals not only have titles but say what it is they can do.

Action: JL stated this was valuable feedback to take back to the team.

Question: BR asked if they knew what the Covid rates were currently in Sefton? JL stated that she would be getting an update on this later in the afternoon but that there had been a bigger rise in younger people. They are now vaccinating younger people.

JL told members that they are available to come out and speak to groups. There is a lot of working going on re: Covid Boosters and if network members needed any support encouraging people to take up the vaccine to let them know.

Question / Comments: DR, from Sean's Place said they had seen an increase in referrals for men who had been to a GP and told to go home and google local support. DR stated that they do not expect GP's to know of all services available in an area but that if GP's were aware of signposting services that this would help. E.G Sefton in Mind directory. GP's need to be aware of local signposting services as it is not good practice to tell patients to go home and google and look for themselves.

LC said that they currently promote the CVS directory along with some others and agreed signposting services are a good way to help patients. **Action: CCG to review what Signposting services are promoted to GP's.**

LC promoted the Winter themed event being held on 8th December. WA stated she would share the email with the details of this later on in the day.

The full presentation is attached to the notes.

BR thanked both JL and LC for their presentation today and providing members with the opportunity to feed in their feedback, concerns and questions. **Action: WA will**

type up all the questions to take forward and share contact details were this was requested during the meeting.

BR also thanked all of the network members and told members how valued they were and what they say, ask, share and comment on is valuable and important to everyone that they represent. BR stated that each member of this group was very appreciated.

4. Community Champion updates

BR asked for each member to provide an update on the work they / their organisation had been involved in during COVID-19:

Kindhearts Café – RH reported that their Christmas lunch was being held on 16th December at St Faiths, Crosby. People are asked to donate if they are able to. Kindhearts café offer people a place to come in for lunch, cup of tea and chat. This is aimed for people who are lonely, vulnerable and isolated.

Liverpool & Sefton Age Concern – PD updated members that the service is operating their befriending service face-to-face in their own home. PD thanked Healthwatch for bringing everyone together and for their encouragement.

Sean's Place – DR stated they would be opening their new building in January 2022. Referrals were now closed until January 2022 but that they would signpost anyone in need. The centre is open Christmas day 11 – 12.30 pm for a mince pie, tea and chat. Towards the end of January there will be an event to show people the new building and meet clients. DR will share the invite with network members.

Healthwatch Sefton Signposting & Information Officer – AW reported that the main themes coming through the signposting line relate to GP Access and dentists. AW said she felt it was useful to hear from the CCG at today's meeting and have the opportunity to feed in feedback re: GP Access.

Sefton CVS Community Connector – LH stated she was the Community Connector for Maghull & Lydiate and that they were a team of 3 staff. One of the Community Connectors for the south, Helen Hagan, had left and the post was now out for recruitment. LH stated if anyone identifies a client who needs support from the service who are isolated or lonely to get in touch. The service can support in many ways

including: Help in getting out to groups, buddy up, help to connect clients with services and help with collecting prescriptions.

Maghull Locality Representative – MB updated members on a particular issue concerning a patient attending her GP practice to get advice on where to get the Covid vaccination and was sent to / not given clear information of where to go in Seaforth. Instead of attending the Seaforth Village surgery the patient ended up at the SWAN Centre. MB felt lessons should be learned and that precise and clear directions should be given to patients. MB also raised the issue of housebound patients receiving their Covid boosters and asked if there is confirmation on who is being commissioned to deliver this service?

Bootle YMCA / Bootle Action Group – BR reported that this Saturday would be the Christmas light switch on outside Bootle library. Event is between 2 – 5 pm with the switch on at 5pm

People First Merseyside – JC introduced herself and said she was attending today with SW. JC has taken over from Joanne English and will be attending the network meetings with the members moving forward. SW said hello to everyone and had no further updates.

The Venus Centre – NT introduced herself and said she was the Operational Project Lead and that the centre was based on Linacre Lane in Bootle. The centre provides and supports:

- Women and families
- Homeless accommodation for men
- Syrian resettlement

The centre are working to support people over the Christmas period and currently are running a toy appeal campaign.

5. Healthwatch Sefton updates

- Healthwatch Sefton Signposting & Information – Amanda Williams has joined us today. Please contact Mandy for any signposting and information requests info@healthwatchsefton.co.uk or 0800 206 1304

- The Healthwatch Sefton Steering group meeting was held on 27th October 2021. The work plan has been reviewed and revised in-line with COVID. To access Steering Group minutes visit: <https://healthwatchsefton.co.uk/about-us/steering-group-minutes/>.
- Sefton Council Adults Social Care Day Opportunities Consultation - <https://healthwatchsefton.co.uk/news/sefton-council-adults-social-care-day-opportunities-consultation/> link also shared with network members on 21/10.
- Community Champion review – thank you to everyone who has completed the form and provided the information. I will continue to follow up with groups over the next couple of weeks. This will help us to link in better with you all and we are going to be revamping our Healthwatch website which will include a Community Champion page for you to share your services with links to your services. It will also help us to plan the meetings and invite guest speakers. So far as network members you have requested:
 - Occupational therapists – exercises and aids
 - Community services – in particular an update on podiatry
 - Sefton CVS crisis café hubs
 - CCG – Mental health commissioner
 - In addition, we have invited Liverpool CCG to talk about the new Stroke services – January 2022 meeting.
- GP Access project – WA has offered the opportunity for Community Champion network members to take part in on-line zoom engagement sessions. A big thank you to the groups who have been able to organise sessions:
 - Sefton Opera
 - The Reach Men's Centre
 - Sefton Older Person's forum

Please get in touch if you would like your members to take part in an on-line engagement session.

- GP Patient Participation Groups (PPG's) – The next session is being held on 1st December. We will be looking at the draft PPG support packs for both the practice and patients. A survey has been sent to GP practices to find out who has an active PPG and who would like support.
- Long Covid – Healthwatch Sefton are working in partnership with other local Healthwatch to carry out a consultation on patient access to long Covid clinics at LUFT and what they would want from the service as it transfers to Mersey Care.

- Access to Dentists – the report was shared with you all.

6. Emerging Health or Social Care themes

Identified during this meeting:

- Covid booster vaccinations for house bound patients
- GP Access – areas of concern recorded and noted to take back by the CCG representatives.

7. Community Champion network notes for approval

The notes from the meeting held on Wednesday 29th September were previously circulated to all members for comments or amendments and were today agreed as accurate at the meeting.

There were no outstanding actions following the September 2021 meeting.

8. Previous emerging issues / questions taken forward to Healthwatch Steering group.

All emerging themes from the September 2021 meeting were noted at the Steering Group.

Note: If members would like any emerging issues discussed on the Steering Group agenda then please complete the 'Tell us what we should focus on' form.

9. Feedback to be taken forward to Steering Group

Identified emerging health and social care themes as below:

- Covid booster vaccinations for house bound patients
- GP Access – areas of concern recorded and noted to take back by the CCG representatives.

Emerging issues identified during this meeting will be added to the Steering Group work plan to be noted.

Please note: emerging themes will only be noted at Steering group. The form 'Tell us what we should focus on' needs to be completed for themes to be discussed at the meeting.

10. Information exchange/ Any Other Business

None recorded.

Date and Time of Next Meeting:

Tuesday 25th January at 10.00 am

Venue: ZOOM