**SIDNEY HOUSE AND THE LAURELS SURGERY**

**PATIENT PARTICIPATION GROUP**

**MINUTES OF A MEETING HELD via ZOOM ON 2ND FEBRUARY 2022, 7.00PM**

**PPG Members attending:-** John Galley (JG; Chair),Vanessa Benson (VB), Bob Farrell (BF), Ann Martin (AM), Barbara Carr (BC) and Peter Elkington (PE; Minute Taker).

**Practice Staff Attending:** Alexandra Jones (AJ; Practice Manager), Dr Karen Hall (KH; GP Partner),

**1. Apologies for absence**

None received.

**2. Minutes of last meeting / matters arising**

Reference was made to the minutes of the meeting held on 30th September 2021. It was accepted that some points arising from that meeting would come up during this meeting or as AOB. For practical purposes the minutes were taken as read.

**3. Practice update**

KH began the Practice update by saying that the previous Practice Manager, Mahesh Rajagopal, no longer works at the Practice. Whilst he was a pleasant individual, he was not the best fit and so has moved on elsewhere. Therefore AJ (who had briefly gone to work at another Practice) was invited to return, and took up the Practice Manager role on 1st December. KH said that calm had been restored. The Practice misses Beverley Jones, but AJ is picking up where she left off.

The nursing team has seen a fair bit of change but is now settling down. The requirement for appointments is considerable, and there is pressure on chronic disease management. The Practice is therefore making more use of the Extended Access Service, a part of the Mid Essex GP services, based in local hubs including Maldon and North Chelmsford Health Care Centre next to Sainsbury’s, Springfield. AM asked how patients were made aware of these additional appointments as currently they did not appear to be available on the on-line system. It was stated that posters can be seen in the surgery explaining this arrangement, and a check would be made that the Practice website mentions it. It could be advertised on Facebook. KH commented that patients wishing to use the facility must be prepared to travel to surgeries within the hub.

Post Meeting Note: Some extended hours appointments within the surgery are now available via the on-line system:

The Surgery has resumed offering Extended Access appointments: Dr Cronin offers telephone appointments between 7 and 8 am on Mondays, and KH and Lisa, a Paramedic Practitioner will offer telephone appointments between 7 and 8 am on Tuesdays. Nurse Stacey has some evening sessions.

25% of the Practice’s appointments available are bookable on line directly by the patients, and are taken up quickly. A recognised problem is that they cannot be triaged first and some of them are found to be for purposes which a GP should not have to spend time on.

It was pointed out that patient care is subject to individual health workers’ knowledge and experience. There are certain things which some nurses can, or cannot, do. Practice pharmacists can make decisions about medications, whereas independent pharmacies can only issue medications as per prescriptions.

AJ continued with some statistical information. Regarding the ‘flu campaign, 4800 of the Practice’s patients received the vaccine (45% of those eligible), of whom 2360 received it at the Practice, the rest receiving it elsewhere. 71% of the 50+ group, 32% of the under-50 group, and 60% of eligible 2 - 3 year olds received the vaccine.

Regarding Covid, 8350 patients (77.7%) received the first dose of the vaccine, 7900 (73.7%) received the second, and 6590 (61.3%) received the booster dose. 34 patients (0.3%) declined the offer of the vaccine. All of this amounted to a good take-up.

Covid-related restrictions at the Practice have been eased: there are more chairs in the waiting-room, and the one-way system has been removed. There are many more face-to-face appointments available (although the telephone triage procedure remains in place). However, staff continue to wear PPE for face-to-face appointments, and face coverings are still required.

In reply to a question, “What does Boreham (i.e. The Laurels Surgery) offer?”, KH said that all services are offered, and all the available rooms at The Laurels are being used, with 3 doctors, minor illness plus phlebotomist working out of Boreham.

AJ, continuing with the update, referred to the period from December to March as a time of high demand because of winter pressures throughout the health-care system. NHS England have therefore made temporary funding available to help practices provide additional appointments, with emphasis on face-to-face. The funding allows the Practice to hire locums and arrange overtime working for staff. The Practice has therefore been offering additional appointments, including GP consultations, and will do so until 31st March when the temporary funding ceases.

BC asked if this was an opportunity to keep a record of what additional funding could achieve, and campaign to keep receiving it. JG asked for clarification that next April the staff, and the funding, would revert to normal and the Practice would again juggle finances and staff. KH remained optimistic about the future. JG asked how the Practice could generate more income. KH said that rooms in the Practice premises can be rented out (which some are to other healthcare professionals). Also, if the number of patients can be increased, the basic funding increases by an amount per additional patient. This amount is fixed to per patient, regardless of how many appointments and GP services that patient uses.

**4. Primary Care Network (PCN) update**

One of the pharmacists has recently left to join another PCN, but the Practice has been joined by Amit Gadher who, two days each week, will be offering medication reviews and some annual reviews of long-term conditions, for example, asthma checks.

The Practice has a new Care Co-ordinator, Kathryn, who is building some excellent working relationships with our two care homes for the elderly and three homes for those with learning disabilities. She is working to set the homes up with remote medical observation equipment, including blood pressure monitoring, pulse oximetry and weighing scales. The care homes can regularly send in observations for their residents who need close monitoring, which will enable rapid treatment, management and appropriate escalation. BC will liaise with Kathryn.

Kathryn is also leading a project to identify other patients who may have a learning disability, to ensure that they are able to access all the health and support services they need.

The PCN is also advertising for more clinical pharmacists, another social prescriber and a health and wellbeing coach.

**5. Any other business**

**(i)** BC spoke about a new micro-hub arrangement for unpaid and paid carers, which is a massive move forward, and she will send details to AJ.

**(ii)** PE spoke about the experience of his wife in telephoning the Practice and losing contact after being told she was “number 1 in the queue”. AJ asked for details, and said that the telephone provider could investigate this call cutting. Further, as the company managing the telephone system had withdrawn from the telecommunications market, the Practice would have to upgrade the phone system in the near future. It was also stated that the Coronavirus message is still played over the telephone and could do with being updated. This was accepted but it was pointed out that the Practice is still dealing with Covid patients.

**(iii)** AM raised an issue, which had been raised previously, about the News section of the website. New items have been raised by the Practice on the first ‘pop-up’ page, but it conflicts with the ‘News tab’ on the front page. The ’News tab’ hasn’t been updated for some time and still states the surgery doors would open on 15th March… last year’s news. In addition, many patients would be using their mobile phonesto access the web site, with most of the information being lost unless they scroll down a long way.KH said that the website also needed an overhaul, the consequence of interruptions to Practice management. AJ agreed to look at the website viewing it via a mobile phone.

**(iv)** AM brought up the subject of the communication of test results to patients, asking when does that happen. KH said that the Practice cannot telephone every patient to advise that test results are normal. There is a Results Line which patients can use.

**6. Date of next meeting**

It was agreed that the next meeting would take place on Wednesday 20th April.

PE/AM/AJ