

SIDNEY HOUSE AND THE LAURELS SURGERY

PATIENT PARTICIPATION GROUP MEETING

MINUTES OF A MEETING HELD via Zoom, 25th February 2021

Members present:- John Galley (JG), Beverley Jones (BJ), Dr Karen Hall (KH), Alexandra Jones (AJ), Dr Hannah Bradbury (HB), Peter Elkington (PE), Bob Farrell (BF), Vanessa Benson (VB), Ann Martin (AM)

1. Apologies for absence

Apologies were received from Barbara Carr, Robert Bates

2. Minutes of last meeting / Matters arising

The minutes of the meeting held on 15th October 2020, due to the use of new technology, had not been recorded. It was agreed to add as much as we could to the minutes of this meeting.

Post meeting Note: Ann eventually found some of her notes from the 15th October meeting. Peter also traced some notes. Together they form the basis of the following comments.

(a) Attendees: John Galley (JG), Beverley Jones (BJ), Dr Karen Hall (KH), Peter Elkington (PE), Bob Farrell (BF), Vanessa Benson (VB), Robert Bates (RB), Ann Martin (AM), Barbara Carr (BC). Unfortunately, Katrine Brewer and Alexandra Jones were blocked by technology for some, or all the meeting. Apologies were received from Alan Harrison.

(b) The minutes of 4th February 2020 were accepted as a true record and were to be signed by JG. There were no matters arising.

(c) Practice update (BJ/KB)

It was noted that operational changes had been made at the Practice because of Covid 19. Although patients were still seen face-to-face, there was more use of video consultations and video technology of good quality.

A new PCN Clinical Pharmacist had been appointed.

Statistics for face to face and home/telephone appointments were discussed.

All the flu vaccine supplied to the Practice had been used. The marshalling of patients at the flu vaccination sessions had gone well. The Practice agreed that they had admitted people too early at the first clinic.

The IT system had been upgraded to Windows10.

Meeting the telephone demand has been a struggle. Annual leave for several doctors, one doctor isolating, long term sickness and anxiety of both patients and the Practice team were contributory factors.

Diabetes and asthma checks had continued (by telephone by Nurses Stacey and Carmel), but COPD monitoring was difficult to provide due to risks and lack of visiting COPD nurses.

The lack of communications was raised. It was said that the Practice needed to keep both patients and the PPG advised of developments. BJ responded that the Practice does regularly post information on Facebook, its own website, and in the Practice magazine.

(d) Unpaid Carers Support (BC)

It was suggested that there is a need for a project to make the lives of carers better - a carers' network is needed as many are isolating and not all are IT literate. There should be coaching for carers.

A request was made for Hazel (Social Prescriber) and Barbara to provide a presentation to Practice staff after Covid19.

(e) Under AOB AM raised an issue over the size of signage at the Hatfield Peverel surgery. KB agreed to look at and take action to make signage bigger.

(End of notes of 15th October meeting)

3. Practice update (25th February 2021 meeting)

BJ advised the meeting of the following:

The Practice continues to work behind closed doors. Patients who are triaged and deemed necessary to be examined are seen face-to-face at Hatfield Peverel. Clinicians who are not rota'd to see patients face-to-face are currently working behind the scenes at Boreham triaging and signposting patients as necessary.

On odd occasions, due to staff shortages due to sickness or isolation the Practice has had no Reception staff at Boreham. This has not caused a problem because patients are not being seen face-to-face. However, in view of the recent lockdown relaxation announcement, the Practice aims to provide more face-to-face appointments at Boreham with effect from 15th March, and gradually increase footfall (subject to guidelines) with the aim of re-opening mid-June 2021.

A number of new staff are joining the Practice in March. Caroline Thomas will join the Practice mid-March on a fixed-term six months contract as Dispensary Consultant, to look at improving the performance of Dispensary and, hopefully, increase its profitability. Two Receptionists commence employment in early March, part of their role possibly being to assist Dispensary as Prescription Clerks. An additional Phlebotomist joins the Practice from w/c 15th March, and it is envisaged that the availability of blood tests will be enhanced, and the service will again be available at both locations.

KH commented that the Practice is working with patients both at a distance (by video-conferencing and new technology, working well) and sometimes face-to-face. Things are quiet at the moment but when lockdown ends, demand will rise when patients seek help with problems they have been reluctant to seek help for during COVID , and the Practice envisage being a lot busier as they gradually return to some normality.

AJ commented on the vaccination programme undertaken by colleagues at Danbury Medical Centre, who have been vaccinating our eligible patients. They have done an excellent job. In particular, AJ drew the PPG's attention to the fact that (at the time of the meeting) 93.6% of the 80+ group had received their first vaccination: 75% of patients who are health-care workers: 92% of each of the age groups 75 - 79 and 70 - 74: 90% of the age group 65 - 69: and 86% of those patients known to be at high risk from Covid. AJ made the point that since the priority so far has been for the older age groups to receive their first vaccinations, the younger age groups have had a smaller uptake, having only recently been invited to a vaccination session.

While on the subject of vaccinations, AJ analysed the take-up of the flu vaccine. 141 children had received it: 2029 patients aged 65 and over: and 3219 patients aged 64 and under.

4. Update on PCN staff

BJ advised the meeting that during 2020 growth was seen in the staff roles across the Primary Care Network, and there was the expectation of further growth in 2021. She explained that currently the Practice and its patients benefit from two Clinical Pharmacists, a Physiotherapist, an Audit Clerk, and a Social Prescriber. Unfortunately the role of the Health and Well-being Coach did not develop further than an initial trial period.

The PCN is looking to introduce new roles during the next financial year but the Practice has little influence over what those roles might be. It was agreed that following the Covid pandemic, there is likely to be an increased demand for mental health services, and there is general agreement that a Mental Health Nurse or Therapist would be of benefit across the PCN. The PCN have an AGM due in March, when future recruitment will be on the Agenda.

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5. Any other business

BJ said that outage problems had meant that telephone statistics were not available. Also, the telephone lines had been clogged up with enquiries from patients about Covid and their compatibility with the vaccine, taking up the Doctors' time.

KB had reviewed the signage as agreed at the previous meeting. She agreed that the small signs were easy to overlook and made improvements before leaving the Practice.

AM suggested that a 'pop-up' be added to the web news page. Most patients would be interested in Covid19 news (not just the standard pop up on the main page). Currently the first piece of news covers changes to antenatal care. AJ took an action to investigate this.

AJ said that carers are coming forward and becoming known.

BJ had signed an agreement adding to its current status as a Training Practice. In addition to training Drs as GPs of the future, the Practice will commence to train student Nurses.

6. Date of next meeting

It was agreed that the next meeting would take place on 29th April 2021, at 7pm.

AM/PE

4/3/21