

Patient Group Meeting – Wed 15th Sept – 2021 – 6pm

Attendees: - John Lawrence; Rowena Sutcliffe; Alan Pound; Sue Lewis; Trisha Jackson; Monica Grizzle ; Sarah Monteith & Sarah McKay.

Apologies: - Ruth Baker; Cheryl Benson (technical issues could not join call)

1. Welcome to this virtual meeting

-Smon thanked everyone for joining the meeting and well done to all for coping with MS Teams this time as opposed to Zoom
Sorry it is such a small group.

2. Any message from our Chairperson

- Due to technical problems Cheryl was unable to join the meeting.

3. Update from Healthwatch/ One Care PPG representative

- Pat Foster was not on the call so no update on this currently.

4. Practice updates

a) Flu vaccinations – use opportunity to gather health information / maybe put scales and BP machine in waiting room and also advertise the patient group.

-RS asked about patients being eligible for flu vaccination if they are a carer – we advised they do need to let us know that they have a caring role so that we can update our records and ensure that they are called in.

-SMon plans to give the pts coming in for Pfizer boosters a piece of paper to get up to date information on pts – i.e. height /weight/smoking status/alcohol intake etc. Plus will get an advert for patient group on this too. (as they will need to wait in waiting room for 15 mins after vaccination)

b) Covid Vaccinations

-Booster vaccinations – news we had today was we will be giving booster – 6 months from 2nd dose – so for us that is likely to commence from 9th /10th Oct for our older population. We also hope to be able give boosters with flu, however we have no guidance on this at present.

JL asked which brand of vaccine we will get – SMc advised Pfizer or Moderna– we do not believe we will have AZ and we have been told it is interchangeable and does not have to be same manufacturer as primary doses.

c) Blood Bottle Shortage

-Smon advised about how we were not given any warning about this – so hit us all nationally at the same time. Manufacturer supply problems. We were only allowed to do urgent / hospital bloods/ INR /medication monitoring bloods. Sorry if we have had to cancel your appointment – we are hoping we will be back to normal soon.

MG – was having monthly checks due to meds she is on – had her appointment cancelled – so querying when will be back in touch with her – SMon advised we have a more stock coming in now so should be able to

contact reception tomorrow and book in – just explain needed for monthly monitoring

d) Dr Harris/Ingram/Bate

Dr Harris is retiring on 29th Sept and Julie Davidson is also retiring the same day. Dr Neil Ingram (who has been with us since April) has increased his sessions to help cover and Dr Rachel Bate is also joining us in Nov to help cover the sessions we will lose.

e) Julie Davidson/Amanda Murray/Abigail Stubbs/Hannah Pring/Claire Richmond

- Julie is being replaced with a new ANP – Amanda Murray – who has a lot of primary care experience – she started last week and is settling in well
- Two new nurses also joining us next week – Hannah Pring and Abigail Stubbs – both are new to general practice, but have sound hospital and community experience. We have boosted the nursing team to help cover Claire Richmond on maternity leave and Nannette Gibbs who is planning to retire next year – so makes sense to get them in now and train them up.
- Claire had her baby today – both doing well

f) Mary Blestowe/ Caroline Riddle

- These are two new pharmacists that have joined us last month – both working 20 hrs a week each – they will be helping initially with polypharmacy reviews – medication reviews and to help GP's with medication queries and will be seeing pt face to face for reviews with the view they free up

g) Community Pharmacy Consultation Scheme

- SMC explained this is a locality service we have signed up to this month – different to our active signposting scheme. This service is that you will be referred to an NHS community pharmacist who will ring you back within 4 hours. If they need to see you face to face they will offer you an appointment to come and see them. They will be advising the pt of home remedies they could try / sell them items over the counter / prescribe under certain circumstances. They will also spend the time to help educate the pt what actions they could take to avoid getting this problem again and what to try again first if needed.

5. Any questions from patients

-TJ – asked when we will be able to book appt for GP's online ? – good question as we still need to ask questions about covid we are not able to do this for the GP's just yet – we are asking all pts to still wear masks in the building and GP's are wearing PPE – we are offering face to face appointment – so if you ask for one you will get one. Please continue to call the practice to book a GP appointment for now.

SMon advised you can use the e-consultation service

-RS – asked if we will be offering tea/coffee at flu clinics again – SMon advised we will not be able to offer this again this year as we need to be very

stick with the process again and be mindful of how many people in the waiting room/building at the same time

-JL – lots in the press about GP workload – does tel consults help decrease the workload? – initially it helped with the workload – having nothing but tel consults actually increased the workload as speak to them on the phone and then have to see them too. So some months ago we started giving reception guidelines of what pt conditions will need to be booked in to be seen face to face. Some pts find the tel calls have suited them better, as no need to take time off work. –Some of the press reports has been demoralising about GP doors closed not seeing pts – however, we have been working throughout and any pt who has needed to see a GP face 2 face has been seen.

- Abuse was discussed and the increasing amount we get and letters we have had to write. The PPG group gave the reception team great compliments on how they treat them as pts through this time (and the GP's) – SMon will feed this back to the teams
- AP asked what the waiting lists were looking like – we unfortunately have not been advised. Referrals are being made as previously by general practice but the time you may have to wait for a hospital appointment is often currently longer (apart from 2 week wait appts)

6. Next meeting Rebecca Kemp from PCN will attend to tell us about some project work regarding health inequalities and other projects that our Primary Care Network are working on.

As always if you have any discussion items / suggestions for the future meetings please let us know in advance so that we can build into the agenda and research any information ahead of our meetings.

Suggested date Weds 15th December – All present happy to do virtually again for next meeting and no objection to date.