Dawley Medical Practice – Patient Forum

Minutes of a meeting of the Patient Forum held Tuesday 17th May 2022 at 5.30pm.

<u>Present</u> – Patrick Spreadbury, Neilson Clarke, Julie Prentice, Margaret Hunt, Lynn Pickayance.

<u>Dawley Medical Practice</u> – Denise Hallett (Practice Manager) Jayne Stones (admin) Sue Hodgskin (admin)

Apologies – Diana Clarke, Terence Whiten, Brian Churm, David Hunt

All- Members of the group present accepted the Minutes of the previous meeting as an accurate record of the meeting

PJS- raised the item in the minutes relating to the posts Chair, Vice Chair and Treasurer and asked for further discussion of the item further under a separate agenda item.

DH –Informed the group that patients who are cancer care patients now have, as part of the practice team, Helen Troath-Patel who is a MacMillian Care Co-ordinator and will see patients face to face or have a telephone consult for a review at 3 and 6 months, post diagnosis. Dr Murphy and Helen will carry out nonclinical reviews with the patient, which will last 30+ minutes and provides support on the social and psychological aspects of a cancer diagnosis, such as finance, attending appointments and support groups. Katie (Admin) will deal with all the patients on the cancer care list. The patients will still have a clinical review at 3 and 6 months with a GP.

Extended hours

PJS — The Telford Patient First group had carried out a further survey to check if practices had diverted their phones to the EA call centre over the Easter and May Day bank holidays. A number of practices had not diverted their phones. TELDOC had not flagged to say no calls were being received until it was discovered at mid-day on Good Friday. It was noted that the Extended Access service will be changing in October to become each PCN's responsibility to decide how designated EA out of hours provision would be covered. Further details would be reported under a separate agenda item.

LP - reported that NHS111 does not, on some occasions, offer advice to patients about alternative medical services but,

as a default position, will often refer patients to A&E or the UTC. It has been reported that the UTC has 22 appointments at weekends and 12 on weekdays.

Flu Clinics Autumn 2022

PJS – asked the Practice Manager about the autumn flu clinics – DH reported that there was no information available at this time, only that the NHS had indicated that free flu vaccines would not be available for the over 50s unless classified as at risk. This would be the same as pre pandemic. Further details would be made available when known.

Update:!! The Government has now reverted back to pandemic cohorts for flu eligibility and all over 50's are eligible. However, the not at-risk patients will only be offered vaccination once all at risk patients (as per NHS information below) have been vaccinated and, if vaccine stock allow.

Any further details will be notified to patients when known.

Flu vaccine for people with long-term health conditions

The flu vaccine is offered free on the NHS to anyone with a serious long-term health condition, including:

- respiratory conditions, such as <u>asthma</u> (needing steroid inhaler or tablets), <u>chronic obstructive</u> <u>pulmonary disease (COPD)</u>, including emphysema and <u>bronchitis</u>
- diabetes
- heart conditions, such as coronary heart disease or heart failure
- being very overweight a body mass index (BMI) of 40 or above
- chronic kidney disease
- liver disease, such as hepatitis
- neurological conditions, such as <u>Parkinson's disease</u>, <u>motor neurone disease</u>, <u>multiple sclerosis (MS)</u>, or cerebral palsy
- a <u>learning disability</u>
- problems with your spleen, for example, sickle cell disease, or if you have had your spleen removed
- a weakened immune system as the result of conditions such as <u>HIV and AIDS</u>, or taking medicines such as <u>steroid tablets</u> or <u>chemotherapy</u>
- Talk to your doctor if you have a long-term condition that is not in one of these groups. They should offer you the flu vaccine if they think you're at risk of serious problems if you get flu.

Staffing

DH – informed the group that Dr Oke Nwanneka had left the Practice and a new GP, Dr Andrew Harwood, would be starting in August and would be doing 7 sessions a week. 3 new receptionists had been employed, 2 had already started and one was due to start later in May. One new member of the admin team had also started. The Practice was currently recruiting a replacement ANP for Sally Gallimore, who would be retiring on the 1st June. The PCN practices (Dawley, Hollinswood, Wellington) now had access to 4 shared pharmacists, not including Surinder Kumar who is a member of the Dawley medical staff. The extra pharmacists would be able to support care homes and help support with chronic diseases and discharges from hospital. The Practice had also welcomed physiotherapist Lindy, also working across the PCN and who would be in Dawley 3 sessions a week. 2 social prescribers would also be working across the PCN – they are non-clinical and will be able to provide non clinical information and support for patients with issues such as, finance problems and housing. Patients can be referred straight to the social prescribers by Reception and do not need to see a GP.

Patient Forum Officers

PJS – raised the question, deferred from the previous meeting, of filling the posts of Chair, Vice Chair and Treasurer for the group. PJS explained there were 2 ways in which this could be done: - (a) nominate a person or (b) conduct a formal vote. It was decided by the group to nominate the following: – Chair – Patrick Spreadbury, Vice Chair – Lynn Pickavance, as she had had 9 years previous experience of being Chair at a different practice. It was also suggested that, at the current time, as the group does not have its own bank account and raises money on behalf of the Practice, there would be no immediate need for a Treasurer. This could be discussed in future, if and when the group was wishing to raise money independently, when the Practice would then be able to approach the group for financial assistance for specific projects.

Building & Car Park

DH – raised the issue of the state of the car park with its potholes and reported that someone had had an accident in 2021 and that a complaint had been submitted to the landlord to get something done about the state of repair. The Practice had been looking at financing some repairs Despite chasing companies for quotes, only one had been received so far. For the front section of the car park up to the concrete bollards just one estimate of £13,000 had been received.

MH – informed the group that the car park was leased to the practice and that the area behind the concrete blocks belonged to the landlords, Assura (formerly Matrix)

DH—reported to the group that external and internal CCTV had been fitted at the Practice and that a new automatic door into Reception, which is disabled compliant and has safety beams all around, has been fitted. The Reception desk has been fitted with toughened glass screens with steel fixings. Within the coming months the staff car park would also be being made more secure with automatic key-fob activated gates and an intercom. The funding had come from CCG winter funds.

Dr Hannah Bufton joined the meeting.

PJS welcomed Dr Bufton to the meeting.

DH informed the meeting that the CCG had recommended that practices should open their doors to patients without any social distancing restrictions. However, as Dawley provides primary care services the Special Allocation Scheme (SAS) patients, the internal safety door would be being kept locked, and everyone would have to continue to be screened via the intercom, SAS patients know they are not supposed to come to the surgery without an appointment, however, if they do turn up at the surgery, the screening ensures they can be told the correct procedure and not admitted, ensuring patients' and staff safety.

HB stressed that, although there was a general perception that the pandemic was over, this was not the case and that, for the benefit of patients and practice staff, it had been decided by the partners that social distancing and the wearing of masks in the Practice would continue until further notice.

Extended Access

DH- explained that individual PCNs had to submit their initial plans for delivering the merged Extended Access and Extended Hours provision from the 1 October 2022 to the CCG/ICB by the end of July. HB informed the meeting that it was planned that Dawley MP would deliver routine GP appointments on Sundays and Tuesday evenings. The other two PCN practices (Hollinswood and Wellington) would cover the rest of the week. It was planned that appointments would be pre-booked with a few available on the day. There would be a mix of clinicians working but there would be no facility for taking bloods as there would be no hospital transport to collect blood samples. Further updates on EA would be reported at the next meeting.

Dr Hannah Bufton left the meeting.

DH gave further information on the extended access changes from October. Wrekin PCN patients will be able go to any of the PCN member practices (Dawley, Wellington or Hollinswood). Dawley will be supplying a 5-and-a-half-hour session on a Sunday with 1 GP supported by nursing team and other clinicians. Dawley will continue to deliver the Tuesday

evening session from 6.30 to 8pm. These arrangements are subject to approval by the CCG/ICB. Further update to be given at the next meeting.

DH/PJS – reported that the first part of the NHS 'Time for Care 'programme had finished and would start again through June to October. The Practice is looking at improving access for patients and improved conditions for staff with the NHSE mentors. A different title is to be used for members of the reception team. Staff had been asked to put forward some ideas: Care-co-ordinator, Medical Receptionist, or Patient Liaison Receptionist. It had been decided by staff ballot that Medical Receptionist sounded more appropriate for their current role. It was also suggested that something like 'A Day in the life of a (Medical) Receptionist' and 'A Day in the life of a member of the Admin Team' could be drawn up, so patients would then have a better idea of what goes on in the practice on a day-to-day basis.

JP – as a new patient to the Practice, indicated she would like to praise the practice for the teamwork that is involved within the practice.

PJS – informed the group that Future NHS was offering a series of webinars on patient groups and that if any members wanted to log on to any of the webinars, to contact him for the link. The three sessions were: 1: Refreshing the PPG after the pandemic, 2: Re-focussing the PPG and its interaction with the Practice and 3: The PPG and PCNs –Looking to the Future.

PJS – Informed the meeting that National PPG awareness week would be taking place between 6 to 10 June, to promote patient engagement and involvement with GP practices.

MH – informed the group of a distressing situation, where patients are being prevented from using the car park as parents of pupils at the local school were using this as a drop off and pick up point for their children in the morning and afternoon.

Action - it was agreed that the Chair should write a letter to the head-teacher at the school to express the PF's concern about the ongoing situation and ask him to write to parents to highlight the inconvenience caused to patients by this issue. MH, as a local councillor, also agreed to take up the issue.

AOB - A farewell from the PF was given to Sue Hodgkinson for her retirement in June. Sue had provided admin support over many years for the PPG and was thanked by the Chair and Denise (PM) for all her hard work and dedication during her time at the Practice.

Next meeting will be a lunchtime meeting in September 2022. Exact time and date to be confirmed when finalised.

Meeting closed at 7.20pm