

Patient Participation Group Zoom Meeting

7th October 2020 10.30am to 11.15am

MINUTES OF THE MEETING

Present:	Pearl Dunn	Julie Jones	Virginia Grundman
	Ranald Mcdonald	Karen Sherlock	Barbara Marsh
	Brenda Greaves	Paul Jones	Barbara Finch
	Chris Lightfoot	Ros Matthews	Pam Wildgoose
In Attendance:	Joanne Gordon	Martin Donohoe	Nicola Vardy
	Michelle Renshaw		
Apologies:	Barbara Powell	Margaret Curry	Valerie Gunn

The meeting was chaired by Joanne Gordon, Operations Lead, Imperial Road Surgery.

Minutes of the PPG Meeting held on 25th June 2020

Matters Arising

Joanne Gordon thanked members for attending the Zoom meeting in these unsettling times.

Have the telephone appointments been well received and are they to continue?

The phone calls have been well received and in the vast majority of cases we are able to offer a same day phone call with a doctor. It is a telephone triage appointment in the first instance, which provides an efficient service. 99% of cases get a same day appointment. The telephone calls will continue, but we are offering a face to face appointment if needed.

Can we request to speak to a particular Doctor?

You can request a particular doctor but we have limited pre-bookable appointments as we do not always know which doctors will be in due to isolation/track and trace.

Can we request a face to face appointment?

The reception team have been instructed by the Doctors as to the face to face appointments that can be booked in without the need for a telephone call first. They are lumps, ear or eye problems, babies and small children and people with special needs. We have 2 clinics, a high risk clinic and a low risk clinic.

Can patients get continuity of care and arrange to speak to the same doctor after an initial consultation?

This is at the clinician's discretion not the patient. After speaking to or seeing a patient if the Doctor wants to see them again they will organise the follow up appointment. We will try our best to book an appointment with Dr Emmerson for joint injections and gynaecological problems with Dr Raybould as they have expertise in these areas.

How can we find out which Dr we are registered with? We used to have a 'named Dr', is that continuing?

This has not changed and you can telephone in to the surgery to ask who your registered GP is. This does not mean that you have to always see them though. When Dr Sinnott retired his patients were changed over.

What was the uptake of the flu vaccine?

It has been met very positively but we are only half way through the campaign and still have further deliveries of the flu to come. The 23 October is our last delivery. This Saturday's clinic is full.

How were those patients informed who couldn't access the website or don't have mobile phones?

Nearly 6000 patients received a text message and the papers and TV campaign ensured that the requests for flu vaccinations have been the most ever. It was on our website and on our greeting telephone message. It has not been necessary to write out to patients. Patients in the high risk categories such as diabetes, asthma and COPD have been contacted by telephone.

Is the practice getting information about patients with Covid-19? (HF)

We are aware of both negative and positive tests for our patients, which are uploaded to the patient's records.

Are there any patients with long Covid? Is there a support network for them? (HF)

We are not able to discuss long Covid due to confidentiality and as this is an unknown pandemic we are guided by NHS England with regards to any support available

Where do the test results come from? (BM)

Via the laboratory.

How many have tested positive in our area, number of cases, number of deaths? (Penny)

We have no data to share on this.

Can staff and their families get tested easily? (HF)

Staff can access a test through the CCG, NHS 119 or the gov.uk website. Their families are not a priority.

What is the practice procedure for prescription reviews for medicines prescribed by hospital Consultants? (RM)

We cannot prescribe medication prescribed from the hospital unless we have written instructions from the Consultant. We do not leave patients without any medication, but would prescribe a limited amount if the medication review is overdue. The first prescription should be issued by the hospital and then the authorisation can be taken over by the Doctor here. Patients have a date set for medication reviews.

More hospital consultations are via phone. They often want blood tests doing but patients aren't given forms. How can this be actioned in this new way of working? (KS)

Several years ago ICE was introduced which Chesterfield and Sheffield use, but is working progress with Derby and Nottingham. Consultants can input the blood requests on to ICE and we can print off the form at the surgery to go with the bloods. The results are sent from CRH to Sheffield and can be accessed on the ICE system.

KS – From the patient's point of view this doesn't seem to work as reception ask the patient if they have a form. JG said reception is aware to check on ICE to check the Consultant has uploaded the form.

MD stated that the bloods requested by the hospital are funded through the hospital and the surgery cost would be for staff time only.

JG states the surgery has always done hospital requests for blood tests. The results will be returned to the person who requested them. KS states the patient may be unaware that this happens. The Phlebotomist informs the patient to ring either here or the hospital for their results.

The surgery website directs patients to private physiotherapists rather than to the very good NHS physios at the Whitworth by self-referral.

It would be better if the surgery website made sure the first information patients were searching for was how to self-refer to the physiotherapy Whitworth NHS service. (KGC)

Our website is in the process of being re-built and redesigned, which is extensive work and we can promote both private and NHS services to enable patients to have freedom of choice. The delays at the Whitworth Hospital physiotherapy department are extensive and there are limited face to face appointments.

Any other business:

It was CL first PPG meeting and he thanked everyone for making it so clear and informative. He asked about having a flu vaccination. JG said that we have a limited stock and CL had been placed on a waiting list and would be contacted. It could possibly be November.

PD said the details about the PPG on the website were 2 years out of date. JG stated that when the website has been rebuilt and redesigned the PPG minutes will be anonymised and uploaded to the website.

PW wondered if PPG members were aware that the Whitworth MIU had recently been upgraded to an urgent treatment centre. It can be accessed through 111 and you will then be given an appointment. There is always a Paramedic now on duty. There is an extra children's room and the League of Friends have provided children's packs. JG is aware of the urgent care centre and reception are asking patients to make an appointment before attending.

BM stated she had been reading an article regarding problems about the lack of Health Visitors across the country and difficulties young mums were having accessing the service. BM asked if there were any issues in our area. JG indicated that the Health Visitors were employed by DCHS and the number of Health Visitors has dwindled over the last 2-3 years. There is no office space at the surgery to accommodate the Health Visitors and they are now based at the Whitworth Hospital. The surgery provides an 8 week baby check and a postnatal check with mum. The Health Visitors deal with a wider area. BM said Health Visitors had been redeployed because of Covid.

RM was in his campervan in the Norfolk Broads and was thankful to be able to join in the meeting via Zoom. He hoped in the future there would be a face to face meeting, but members that couldn't make it could still Zoom to contribute to the meeting.

JG said that due to Covid such technology had been fast tracked, which is a positive situation. Zoom will stay in place for the PPG meetings for the foreseeable future and we are hoping for another meeting just before Christmas where we will be able to discuss our final feelings on the flu vaccination programme and Covid going forward into January, February and March.

KS found the remote meeting very useful and thought this kind of technology would be ideal for the GPs to use for patient consultations. JG stated that Zoom is not confidential enough for a patient's consultation, but if the GP deems it appropriate then video consultations have been happening for a while through Accurx.

BG wanted to say thank you and well done for the excellent organisation at the flu vaccination clinics. She was in and out in less than 10 minutes. Will it be a similar set up for the Covid vaccination at the end of the year? JG said it all depends when the vaccine becomes available.

BF asked if the asthma and diabetic clinics for example had restarted. JG said these had never stopped, but some were done by telephone or video consultations. 95% of our clinics were now face to face. The diabetic clinic is face to face and we never stopped doing smears. The asthma clinic is by telephone consultation. Nothing has been suspended such as B12 injections, depo injections and dressings.

JG finished by thanking everyone for joining us and the next meeting will be leading up to Christmas.

