Snaith & Rawcliffe Medical Group

Notes on the Patient Participation Group Meeting

22nd February 2023 @ 6:30pm

Members Present

Mr Phil Price (PP) (Chair)
Mr Laurie Stewart J.P. (LS) (Vice Chair)
Dr Frances Booth (FB)
Dr Susie Foster (SF)
Dr Noel Tinker (NT)
Dr Dan Thompson (DT)
Ms Kirsty Harvey (KHV) (Dispensary Manager)
Mrs Jean Brooks (JB)
Mr Andrew Cohen (AC)
Mrs Eileen Hall (EH)
Mrs Brenda Mitchell (BM)
Mrs Betty Wilks (BW)
Mr David Shepherd (DS)
Mrs Jane Price (JM) (Secretary)

Apologies for Absence

Dr Jon Martin (JM)
Dr Georgina Wildgoose (GW)
Mrs Jacqueline Roe (JR)
Mr Peter Gibbs (PG)
Mrs Katrina Haigh (KH)
Mr Dennis Tredgett (DT)

PP opened the meeting at 6.32pm, welcomed those present and requested members briefly introduced themselves.

Apologies for absence were noted and are as stated above.

Minutes from the last meeting

Accepted as read.

Actions and matters arising

a. **Raise documentation to log members consent to hold personal information.** JP had raised a draft document and asked members for feed-back. SF suggested the length of time personal information would be held after a member left the PPG should be included. This was agreed.

Action – Sec

b. **Book Dementia Friendly Simulator** – PP stated that the General Practitioner Engagement Group (GPEG), were still holding meetings via Microsoft TEAMS which was incompatible with software on his computer. It was thought that the GPEG would shortly be returning to face-to-face meetings, and he would ensure that the relevant group member (if there still was one), was aware of the PPG's interest in having the simulator at the next Practice Open Day.

Action – PP

c. **Decision to make PPG Fund a Charity or CIC** - PP reported that in his experience it would be better to create a 'Private Society' as opposed to either of the above, which incurred a lot of legislative procedures. LS agreed and stated that a group he belonged to had taken exactly the same route for the same reason.
FB asked who would be responsible for paying money into the account? PP said this would need further discussion. FB would contact JR re arranging a meeting to discuss further. It was agreed the any signatories for the fund would need to be an active member of the group.

Action – FB/JR/PP

Practice Report

FB reported that

- There had been a lot of changes, with staff leaving and being recruited in multiple departments. Janet Cooper, a senior Health Care Assistant (HCA) had retired after 17 years with the Snaith and Rawcliffe Medical Group (SMRG), plus many more in NHS. A replacement HCA had rescinded their application which had left short-term pressure for HCA appointments. However, Practice Nurses and HCA's were covering the short fall. Recruitment was ongoing for a replacement HCA.

- The first Physicians Associate (PA) had been employed by the Primary Care Network (PCN) but was based at SRMG. The PA was reviewing patients in care homes and reporting back to the lead GPs, also assisting in hypertension reviews - ensuring patients were carrying out requested home blood pressure checks and also undertaking minor illness reviews. Appointments for the PA were made through the GP triage system.

- PCN staff were expanding; alongside a full-time pharmacist there are also two pharmacy technicians assisting in the background, more social prescribers, and more primary care mental health team workers. The PCN waiting lists were shorter than the NHS lists, so patients could be seen quicker. Funding streams within the PCN are utilised for services that were specifically required within the areas covered by that PCN and the best professional for a patient to consult regarding a problem would not, necessarily, be their G.P. This was going to be the way forward and patients would need to adjust accordingly.

- There was now a 'First Contact Musculoskeletal Clinic' on Thursday evenings so patients could book appointments with a physiotherapist without seeing a GP first. Appointments could be booked through the trained Care Navigators on /at reception.

- The surgery staffing situation was now stable, with the exception of recruiting new GP's which had been unsuccessful. However, the situation was being managed by utilising regular locum work, (Dr Burke).

- After 25 years as a Partner, FB said she would be retiring at the end of March. Plans were in place to provide cover until a replacement for her was found.

- JR (Practice Manager) requested the group be informed that her husband had passed away, very suddenly, in September 2022. After a period of bereavement leave, she was now on a phased return to work.

SF reported:

- There were currently three trainee registrars at the surgery, with a fourth joining in May. In August, three new trainee registrars would join. LS asked what effect the new housing builds would have on the surgery? NT said that the patient population had grown consistently over the past 20 years, at approximately 150 patients per annum, this hadn't changed with the recent new builds. More accommodation might be required in the future. However, the NHS was aware that Primary Care Estates would need to increase. Hopefully, funding would be available to facilitate this.

- The surgery would continue to teach year 1 and 2 Physician Associates, plus year 4 medical students too. There were currently 8 medical students training at the surgery.

- Lucy Ruhmann had been granted the prestigious Queen's Nurse Award, (Queen Elizabeth the Queen Mother Award for Outstanding Service), an award given to community nurses who provide exceptional care to their patients and demonstrate a continuing passion and enthusiasm for nursing.

- FB had received the Fellowship of the Royal College of Practitioners. NT was also a Fellow and had been so for some time.

- The Summer 2022 patient survey results were very positive.

- Several staff members had achieved milestones in their careers at the surgery - FB had been at the surgery for 25 years, as would SF in September. NT and Eileen Chantry had served 20 years. Two dispensers and a joint reception/HCA staff member would achieve 20 years this year.

- The pilot menopause clinic had been very successful and was now held on a monthly basis.

KHV said

- That staffing issues had caused operational pressures during 2022. However, two new full-time dispensers had been recruited, which alongside dynamic operational changes had had a very positive impact.

NT reported

- That the uptake for flu/Covid booster campaign exceeded 90% which was excellent.

- Further information was awaited regarding a Spring booster campaign for the over 75's and high-risk patients.

- Some patients still required their pneumococcal and shingle vaccinations which were being given on a ad hoc basis. EH questioned if a lot of patients utilised the chemist service for their boosters? – NT said not a lot of patients were lost through this route.

- Rooms 1 – 5 required refurbishment, which would hopefully be within the next 18 months.

- Room capacity was a little tight, but as previously mentioned, a case would be made if funding became available.

- NHS strikes were not affecting the SRMG, ambulance call out continued to prove an issue, trainees were not striking. Secondary Care continued to struggle and patients were not always discharged with care packages in place which did have a knock on effect on the surgery.

Chair's Report

PP had nothing to report on this occasion.

PPG Statement of Accounts

The amount in the PPG account stood at - £1727.32p. KHV stated that the defibrillator machine at the Rawcliffe surgery was beyond repair and a replacement would cost approximately £1000. Would this be something that the fund could cover? All members present agreed that a new defibrillator could be purchased through the PPG fund.

Action - KHV

New Items

PP said that the next meeting would be the AGM. SF asked if this was too soon after this meeting. JP and PP said they couldn't guarantee being available for April. This was discussed, the AGM would be held in March.

Any Other Business

EH requested advice for a patient who was experiencing difficulty having her 'sharps' box collected. The number she had and also provided by, East Riding Council was not being answered. KH said she would take this for action and investigate.

Action - KH

DS had been approached by two patients complaining that care navigators had directed them to a pharmacist at the chemist rather than to a GP. They were not happy, as they would have to pay for any medication/treatment required over the counter, where a prescription would be free for them. FB reiterated that the pharmacist/chemist should be the first point of contact for patients with a minor illness. This would free up GP's time to see those patients who really did require a GP consultation. A pharmacist was well qualified and would advise if a GP should be consulted.

Meeting closed – 07:41 pm

Dates for future meetings

Monday 20th March 2023 - AGM

Annex A – List of Actions

Annex A

List of Actions

Date Placed	Action	Lead	Status/ Date Complete
18 Jan 21	Consult with Practice Managers re the probability of volunteers assisting in making patient vaccination appointments.	JR	29 Jun 22
18 Jan 21	Possibility of PPG volunteers assisting in vaccination Clinics	JR	29 Jun 22
16 Sep 20	Send contact details of PALS to DS	JR	18 Jan 21
16 Sep 20	Discuss making PPG Fund Charity or CIC	PP/JR/JM	Ongoing
16 Sep 20	Create form to log members consent to place personal details on PPG communication register	JP	22 Feb 23
15 Jan 20	Raise necessary paperwork for nominations/ballot papers (if required)	JP	11 Mar 20
15 Jan 20	Send Constitution out for review	PP/JP	6 Mar 20
15 Jan 20	Members to consider 'Did Not Attend' (DNA) procedures	ALL	29 Jun 22
15 Jan 20	Produce Posters for Veterans	Practice	16 Sep 20
15 Jan 20	Email all entrants who submitted photos for 2020 calendar, request permission to use in wait area 2	CH	18 Jan 21
9 Sep 19	Email members to confirm availability to help at Flu Clinic	JP	12 Oct 19
9 Sep 19	Investigate availability/book "Dementia Friendly Simulator" for next Practice Open Day	PP	Ongoing
9 Sep 19	Share written feedback from Bartholomew observer at May PPG meeting.	JR/JP	11 Sep 19
9 Sep 19	Provide costings for purchase of wall mounted otoscope and get PPG approval	DT/JR/JP	16 Sep 20
25 Mar 19	NHS App enabling new patients to register online – feedback webinar	JR	25 May 19
9 Jan 19	Include Pharmacist in preps for next PPG.	JP	25 Mar 19

Date Placed	Action	Lead	Status/ Date Complete
9 Jan 19	Produce Newsletter article explaining implications of not fully utilising Practice Clinics and Dispensary	FB	1 Feb 19
9 Jan 19	Submit application to become a *Park Run* Practice	SF	1 Jan 19
9 Jan 19	Transfer PPG Fund/Info	KH/JR	16 Sep 20
24 Sep 18	Investigate means and costs to produce 2020 Practice Calendar.	GTM	9 Jan 19
9 Jan 19	Draft Article for inclusion on Website/Facebook Page		25 Mar 19
25 Mar 19	Promote calendar at Practice Open Day	GTM	29 May 19
29 May 19	Arrangements regarding choosing/publishing pictures	GTM	29 May 19
9 Sep 19	Coordinate development of 2021 Practice Calendar	PP/CH	15 Jan 20
24 Sep 18	Practice to create prioritised list of items to purchase	JR/Partners	9 Jan 19
25 Jul 18	Early morning appointment DNAs/MJOG texts	FB	9 Sep 19
25 Jul 18	Flu clinic planning	All	17 Nov 18
25 Jul 18	UTC Goole Treatment Concerns – Raise with CCG	JM	29 May 19
9 Jan 19	Update would be requested at the next LCF (Local Commissioning Forum).		25 Mar 19
25 Mar 19	Awaiting further feedback from CCG		29 May 19
25 Jul 18	Patient Transport Eligibility. Raise with CCG	JM	9 Jan 19
25 Jul 18	Practice Open Day Planning. Date set 18 May 2019. Member of practice team will lead detailed work.	All	18 May 19
25 Jul 18	Purchase of digital cameras/Integrated ECG machine using PPG Fund.	JR/Partners	25 Mar 19
25 Jul 18	Development of App to enable Primary Care to take photos on iPhone.		29 May 19
9 Jan 19	Cost for purchasing digital cameras required.		25 Mar 19
9 Jan 19	Response required from IT prior to purchase of Integrated ECG machine for Rawcliffe Surgery.	JR	25 Mar 19
25 Mar 19	Protocol for correct use of digital camera required	JR	9 Sep 19