

HIGH FIELD SURGERY – PATIENT PARTICIPATION GROUP

Minutes of the Patient Participation Group held on Tuesday 14 July 2020 commencing at 11.00am. Meeting held by Video conference on Zoom.

Present: Chair - (GBe).
(CA), (DA), (DP), (GBu), (LW), (LR),

Practice Manager - Mike Holmes (MH)
GP – Dr Helen Poulter (HP)
Practice Secretary – Kayleigh Burton (KB)

1. Apologies and Introduction

Apologies: (BA), (KB), (LB), (MG accepted the meeting but did not join)

GBe opened the meeting, thanked all for joining and explained the rationale behind moving the meeting online.

2. Action Plan & PPG Quality Indicator

GBe explained that the PPG action plan had been updated following the last sub group meeting, and its contents were still pertinent, however in view of the Covid-19 pandemic and the sudden cancellation of the previous meeting the proposal was to park for now and restart the group based on more current issues.

Similarly the PPG quality Indicator document could also be put on hold and picked up at a later date.

3. Online meetings

GBe explained it was likely future meetings (including sub-group) would remain online. For now this was using GBes Zoom account as a temporary measure, both the CCG and the practice were looking at alternative video platform solutions going forward.

4. Surgery Update

MH & HP gave an update as follows:

Introduction

- Covid-19 is a new virus with little knowledge initially & still lots that we don't know.
- Key is it is highly infectious (social distancing & protect staff and patients)
- One incident could close the surgery if all staff have to isolate
- Safety of Patients and Staff of paramount importance
- Government & NHS guidelines have been changing rapidly (sometimes daily) and we have had to react

Transformation of service

- Face to Face (F2F) contact minimised. All non-essential procedures suspended
- Surgery took decision to keep the doors open, 4 months in few surgeries have done this, asking patients not to visit unless appointment, majority have been fantastic
- GP appointments switched to 100% telephone triage. Introduction of new technology, video/photo, F2F if clinician agrees
- Nurse by definition majority F2F so non-essential reviews suspended. Ability to do Asthma by phone, and restart Diabetics and bloods
- Likely to remain this way in short term – following NHS advice

HP explained benefits and drawbacks of Telephone for GP and Nurse

- Convenience for patient
- Proportion can be done remotely
- Cannot examine

- Sometimes Video/Photo OK
- Other times preferable to see – will bring to surgery (introduces an extra step)

Social Distancing

- Surgery footfall kept to a minimum – eliminate unnecessary visits (online/telephone/econsultations)
- Social Distancing waiting room and staff
- Face coverings for patients
- PPE for staff – uncomfortable to wear all day
- Extra cleaning – creates a reduction in overall capacity

Other Issues

- Shielding guidance confused patients and led to increased surgery workload
- Shielding patients challenges of providing care
- Stockpiling of medication – another challenge to be addressed

Current Secondary Care Referral Position

- Hospitals closed to referrals in March
- Exception Urgent & 2 week wait (cancer) referrals
- Only reopened 29 June

Implications

- Presentations to surgery reduced due to shielding
- Many patients actually discharged by hospital and require re-referral
- Backlog of referrals – cleared as a surgery
- Current hospital service much different
 - Less F2F
 - Telephone/video contact
 - Advice & guidance through GP
 - Longer waiting times likely

HP discussed dangers of not presenting with symptoms

- We have remained open
- Local and national campaigns
- Delay in treatment
- Increased workload for GP under advice & guidance

Lots of unknowns

- Flu season & SD
- National Guidance
- Vaccine
- 2nd Wave
- New technology will remain, what mix of service

5. Questions

GBu asked about communicating with patients and the digital gap. Both MH & HP confirmed the surgery were conscious of this issue and would welcome feedback from the group on closing this gap

CA asked about the upcoming flu season and could external sites be used. MH confirmed that flu season was at the forefront of surgery current planning, although we are still awaiting national guidance particularly as to a possible expansion of the programme. The CCG were looking at the complex logistics of external sites, however the surgery is very experienced in delivering successful flu vaccination seasons. MH gave examples of how this year might look different, GBe suggested possible PPG assistance in managing flu clinics.

DP asked about Covid vaccine, would it be included in the flu jab and who would qualify. HP explained it would certainly be a separate injection, but if it proceeds we would get national guidance as to who qualifies first and this would likely be the most vulnerable to the virus.

GBu suggested the surgery build and adjust its service to its own requirements and adjust this according to a traffic light system. MH agreed this was a sensible approach.

DA related recent experience with appointments and was it necessary to attend the surgery for repeat Blood Pressure checks. MH agreed this was a good point, the surgery was piloting a process to see if patients could use their own BP monitor and submit the readings online. If the pilot is successful this will be rolled out to all patients.

6. Next Steps

GBe agreed some priorities for the sub group to pick up:

- Communication to patients, what's changed, why. best way to send out?
- Surgery service configuration

7. Meetings

The next PPG meetings were agreed for:

- 15 September 2020 11.00
- 17 November 2020 11.00

Interim meetings for PPG only were agreed for:

- 18 August 2020 16.00
- 13 October 2020 16.00

GBe explained the purpose of the interim meetings and that invites will be sent to those who attended today or sent apologies.

GBe thanked everyone for attending, several members gave feedback that the meeting had run smoothly and was well organised and chaired.

The meeting closed at 12.15pm