## NOTES FROM ST MARGARETS PPG (by Zoom) – 18th November 2022 at 12.30pm

Present: Lisa Anderson, Barbara Benedek, Sue Bond, Nigel Edwards, Heather Flint, Charlie McCormack, Colin Marsh, Mary Regan, Dr Saini, Zoë Smith, Ann Thomson, Harvey Woolfe. Apologies received from Linda Green, Anne Hawkins (unable to attend because of technology issues), Laila Jan, Kate Menzies.

The notes of our last meeting (via Zoom) on 10<sup>th</sup> June 2022 had been circulated.

## Matters arising from that meeting

• All **medical records cabinets** have been removed from the practice. A new **Social Prescriber** (covering practices in the Brentworth Network) has just started.

## Practice update and current issues

- The **pharmacist referral service**, having got off to a good start in June, has faltered somewhat. The target set by the CCG was 9 referrals per week to date there have only been 69. 'Push back' from patients wanting to see a GP rather than a pharmacist was cited as a reason for the drop in numbers.
- Staffing A Health Care Assistant (HCA), Lorraine, started in July and is doing a grand job she works two days per week taking bloods, measuring height, weight, blood pressure etc. A locum practice nurse (for a six-month period), Helen, also works two days per week. Valentina has been helping with admin tasks for about a year. She is a fully trained phlebotomist and wants to go on a course to become an HCA. A physiotherapist works in the practice on Fridays (shared with six practices in the area) referrals have to be made by a GP.
- Appointments (and phones) Waiting times, said Lisa, have lengthened recently. Blood tests are taking one-and-a-half weeks, seeing a nurse takes two weeks, seeing a named GP takes three-and-a-half weeks. Harvey Woolfe asked why the practice was so busy. Lisa explained that they were being inundated with calls from patients and that, despite having more staff than ever, there had been a massive shift of workload from hospital to GPs, e.g. blood tests and follow-up hospital appointments previously carried out by the hospital were now being pushed on to the GP. Easier access to the practice through improved phone call handling meant that more calls were being made. Lisa went on to say that it was increasingly difficult to get locum cover. HW asked if the practice had any idea of how many patients making phone calls at 8.00am were not getting a call back from the practice. Dr Saini said that it was difficult to identify such figures.
- Charlie McCormack said that, in the past, she had been able to see the same GP, thus providing **continuity of care**, but that she had found this increasingly difficult since the pandemic. Dr Saini explained that this was still possible but that it would take longer to do so. Sue Bond said that she had been given a diagnosis over the phone which turned out to be wrong when she had had a face-to-face appointment. Dr Saini explained that he was not

- able to discuss individual patient queries during our meeting but that he would be happy to discuss such cases privately.
- Lisa said that she and Zoe would like to see a new Newsletter and to make changes to the practice leaflet.

At this point our 40 minutes Zoom meeting ended. Dr Saini and the practice staff had another meeting to attend but a few of us rejoined a new Zoom session and the following items were discussed:

- Mary Regan asked how GPs managed to carry out phone/video calls when they were
  working from home. Barbara Benedek said she wasn't sure, but she knew that the GPs had
  secure computer access at home. BB went on to say that GPs had a lot of paperwork to sort
  through which could be done more effectively, perhaps, at home.
- Ann Thomas said she was concerned for the GPs' well-being with the amount of work that had to be done by them. BB mentioned that a new overview of GP practices was being/due to be carried out. This would, amongst other things, look at how to improve communication between secondary and primary care, and the role of social prescribers, as well as looking at getting more general admin support for practices. MR felt that it would be good to make more use of pharmacists and other allied professions.
- BB encouraged us to promote **continuity of care** (seeing the same GP see above) and she said that she would raise this topic again at NWL meetings.
- MR commented that, after the last meeting, she had noticed that **communication** within the practice (e.g. on notice boards in the reception area) had much improved, with information being pertinent and accessible.
- Next meeting to be confirmed