

**NOVUM HEALTH PARTNERSHIP
BARING ROAD BRANCH PATIENTS' GROUP**

**Online Meeting: 19 November 2020
6.00 p.m.**

MINUTES

Present: Lee Walker (LW, chair), Bob Blunden, Pat Blunden, Robert Thompson (minute taker), Janet Thompson, Patrick Connolly (PC), Paul Howell (PH), Anthony Atherton (AA), Jan Gimble, Elaine Curley, Suzy Wilkinson (SW), Seyhan Yusuf, (SY, Novum), Dr Judy Chen (Novum)

1. Before beginning formal business, LW outlined the etiquette for conducting online meetings in terms of waiting for cues to speak, minimising background noise, muting devices when not speaking and so on.
2. LW then welcomed and introduced everyone who had signed in to the meeting. Apologies had been received from Mythily Mahatharan and Pauline Garrod.
3. The minutes of the meeting on 27 August, which had not been considered at the previous meeting on 8 October, were accepted as an accurate record.

There was some discussion of the minutes of the brief abandoned meeting on 8 October. The view of members who had suggested writing privately to Dr Arora in the first instance instead of writing to the partners had not been recorded, and the majority decision to send a formal letter copied to supervisory bodies was therefore not unanimous.

It was agreed that the final decision was properly recorded and that no action needed to be taken beyond noting the correction above. The minutes were otherwise accepted as an accurate record.

4. Matters arising from both sets of minutes, not covered later in the agenda.

Dr Chen apologized for having missed the previous meeting, but explained that she had not known it was happening. LW undertook to send reminders and information about future meetings, to which Dr Chen will be very welcome.

SY undertook to circulate an up-to-date list of practice staff and roles.

5. Ongoing issues: complaints and access

It was agreed that the pre-lockdown phone system, which has now been reinstated, is far better than the remote-working substitute used over the last few months. SW and PH reported good recent experience of using it, and similar comments were passed on by AA.

There was a brief general discussion of telephone systems for booking appointments. The online booking system cannot currently be used for general purposes because of the need for telephone triage before patients come to the practice, and there was some concern as to what might happen to telephone bookings if the practice had to return to

remote working. LW mentioned a system called Surgery Connect; Dr Chen explained that rather than replace the relatively new system the partnership currently uses, they are exploring remote options which might be available on it.

Online services apart from making appointments, such as access to records and getting repeat prescriptions, have also been problematical. Records which had once been accessible were now unavailable. AA has made a complaint about these issues which has not been answered. SY will look in to these problems: apart from detailed records, which require special permission, other services ought to work.

6. Practice report

Seyhan presented the practice report previously circulated by email. The following topics emerged in subsequent discussion:

a) Virtual Patients' Group.

In discussing the uptake for the virtual PG (currently 20, which is 14% of those who initially expressed an interest) PH pointed out that the PG details on the partnership website are not regularly updated: they currently include only one set of minutes from 2020, for example. The impression is thus given that the 'in person' PPG is inactive, which is a disincentive to joining the virtual one. SY undertook to start updating this part of the website.

b) Patient Survey.

LW congratulated the practice on the number of responses to its patient survey and the generally very positive assessment of the practice staff. Dr Chen said that the partners had not yet had time to analyse the responses thoroughly and she would therefore like to return to the survey at a later PG meeting. She would also like to try to obtain an even wider response, for example by text-messaging people who have had recent appointments: the balance between or responses the two branches was more or less proportionate to their respective patient numbers, but minority groups were underrepresented, as were people aged over 75. It was noted, however, that text messages had been sent to all patients for whom the practice has mobile phone numbers, so it is not as though the initial approach had been unsatisfactory, and the response to the practice's own survey had already been far better than that to the national Ipsos Mori patient survey.

LW suggested that the lack of response from older patients might be because they do not use the Internet, meaning that internet-based surveys are bound to produce incomplete information. PH suggested that it might be worth leaving further enquiry until face-to-face services are resumed, as many of the survey questions relate to in-person visits to the practice.

c) Coronavirus vaccinations

There was some discussion of the practice's expected role in delivering coronavirus vaccinations. Dr Chen explained that Novum is part of a Primary Care Network (PCN) with six other practices. The national plan is for each PCN to have a single hub delivering vaccinations in its area, because the vaccine requires careful and specialised handling and storage. In our case, the hub will probably be the Downham Health Centre.

The task will be a considerable organisational challenge for various reasons. To maintain social distancing, attendance will be by appointment only; because the vaccine is entirely new, it is recommended that patients remain on the site for 15 minutes after vaccination in case of adverse reactions. 900 doses of the vaccine will be delivered weekly, and must to be used within five days. Vaccinations will also be administered in care homes etc.

PH asked whether other buildings such as the adjacent school could be used, to allow more space for queuing and distancing. This will not be possible, because the programme will continue for a very long time and therefore requires a dedicated building as well as appropriate refrigeration and resuscitation equipment.

PC expressed concern about the impact on staff workload. Dr Chen agreed that there is bound to be a considerable impact: a GP will need to be available at the hub at all times, which will have an inevitable effect upon other services. Given the seriousness of the public health issue, it is hoped that vaccinations will be administered seven days a week. No advice has been received from the CCG about wider services, though they obviously still need to be provided. The practice has received no information about a government programme to train up a large number of extra vaccinators.

7. Future meetings

LW reviewed the topics already suggested for possible future speakers, which had included obesity, Alzheimers, nutrition and exercise. There was a view that it might be better to wait until the group could meet in person, but there is also no certainty how far in the future this might be; PH's offer to invite an acquaintance who is a specialist exercise instructor was therefore gratefully accepted. She will be asked to present an online talk as part of our AGM on 28 January 2021, while the next meeting (17 December) will be mainly devoted to the Patient Survey.

7. AoB.

Concern was expressed about current and potential group members who do not use ICT. While technical problems might be soluble by lending someone a laptop, the issue is more often that people simply do not use this equipment, and should not be excluded for that reason. SY will contact members we already know about to provide paper copies of minutes etc. and to invite written responses.

PH asked whether the practice could set up a separate administration phone line so that non-medical calls did not have to go through the reception switchboard. SY suggested contacting him by email; he will call back if necessary.

PH also asked whether the practice intended to take up his suggestion for a source of office furniture: SY said he was still waiting for approval from Dr Arora.

The meeting was declared closed at 7.00 p.m.

Next meetings: Thursdays 17 December 2020, 28 January 2021 (AGM), both online at 6.00 p.m.

Link for next meeting: meet.google.com/aoi-mqsb-stc