



Grove House Partnership

Patient Group Meeting: 6th July 2022 Via Zoom

Attendees:

Syd Broxton (PPG)
Alan Smith (PPG)
Nancy Alexandra (PPG)
John Timms (PPG)

Julie Knight (PPG)
Joanne Cripps (BM)
Kirsty Kendrick (DOPM)
Sharon Williams (Admin)

1: Apologies:

Tony Hayes (PPG)
Ted Rawlinson (PPG)
Terence Watkinson (PPG)
Sharon Hearty (PPG)
Roy Brown (PPG)

Beryl McWhan (PPG)
Deb Kelly (PPG)
John Martin (PPG)
Kirsty Kendrick (DOPM)
Lianne Wilson (Admin)

Syd wished to express the sad news of Ann passing away. Ann had been a long-time member of the Group, and everyone felt that she will be sadly and greatly missed. Her contributions to the Group over the years will never be forgotten.

2: Actions from previous meeting

Away day / PLT – Joanne gave the Group an update on the Practice away day, which was used for all staff to discuss access and what we can work on as a way forward. Joanne explained that e-consult is going to change in September. It was put out for companies to bid, and e-consult did not win, so the new version could be easier for patients. Julie asked will the new software be standardized. Joanne explained that we now have One Halton in place since the CCG ended in June and are now part of the integrated care system. They will be commissioning the new software and it will be the same for all, but it will be up to each Practice how it is used. Once we have more information on the new system, we will bring it to the meeting to discuss.

Blood Tests – Syd asked if all blood tests are being done in house, Joanne explained that it is as our Practice staff that are delivering the service, due to Warrington Hospital still being unable to offer any service. Joanne informed the Group that normally when we provide an extra service we would get funding, but for this, we are not, but we are doing it as extra for our patients.

The Group asked about what services Bridgewater provide. Joanne explained that they provide services such as the District Nursing team, the Treatment Room, podiatry etc. Community have been in Practice for many years now, but they are a separate service to us.

<https://bridgewater.nhs.uk/aboutus/patientservices/>

Covid Boosters – Joanne informed the Group that there will be autumn boosters, but we do not have the dates yet. We are not expecting to be delivering the boosters, it is more than likely going to be in a mass vaccination site or at Pharmacies. We will be focusing on delivering the flu vaccines and we are looking to do some mass flu clinics as we did prior to

the pandemic. Joanne asked the Group how they feel about this, as we feel the mass clinics used to work best for the Practice. The Group all agreed with this and feel it would be best to go back to doing the vaccines that way.

3: Open Discussion:

Paramedic Practitioner – Syd asked about the role of the Paramedic Practitioner

Marcelo works differently than a Paramedic with the ambulance service, he currently gets assigned a list of patients to triage and to do home visits for, such as housebound patients. Because of his paramedic background, he is very switched on to what needs doing for patients and the GPs love his approach. He is not yet a prescriber, but he will be attending training to allow him to do this.

The Group asked about the role of a GP Assistant. Joanne explained that they support a GPs by doing things such as BP checks, ECGs and taking blood samples. They work very closely with the GPs, linking in with them, broadening our resource at different levels.

Syd mentioned that when you look at the Clinicians board within the foyer area, it looks like we blessed with an abundance of Clinicians.

Joanne explained that the board can be deceptive as most GPs only work part-time, so yes there are more faces, but they are not in the Practice full-time. The GPs do have a buddy system in place too, so they share patient information which is needed to have continuity of care. Joanne informed the Group that so we could have the equivalent of 1.5 full-time GPs, we needed to employ 4.

Julie asked if the GPs are seeing patients face-to-face. Joanne informed that they certainly are and explained that 36% of appointments in June 2022 were face-to-face, 36% digitally, 22% via the telephone and 2% were home visits. Joanne explained that we are still looking at call waiting times, as we are aware this is still not perfect, but we are looking at ways to improve this area, it has been impacted by staff being ill and the Practice working below capacity.

Joanne explained that we have a high threshold every, with nearly 8000 requests per month, no appointments are left unused. Our new GPs are, Dr Neville who works 3 days per week, Dr Kaye who works 2 days per week, Dr Giles will start in August and will be working 2 days per week, then later we will have Dr Mohamad who will work 2 days per week. We have now increased our male GP capacity, with 4 male GPs. Each GP has an average of 26-28 patients per day, along with all their paperwork and prescriptions.

Syd wished to say how impressed he has been with Reception lately and how excellent they are.

Nancy wished to say that at times she has been given conflicting information, she rang the Practice yesterday, due to the e-consult being switched off. She was informed to ring the next day at 8.30am, but then when she did, she was told she should have gone through an e-consult. She explained that once this was all sorted the service that she received was great.

Prescriptions – The Group asked about the waiting time for prescriptions. Joanne explained that because the majority are via online services, they go straight to the GP. We state 48 hours wait for the prescription to be ready, there may be delays at the Pharmacy end that we cannot control. We send them all electronically to the Pharmacy, so it is in an instance, but

the Pharmacy still have to pull it through, and Pharmacies are dealing with pressures with their own system. The Group explained that most Pharmacies will not hand over medication unless there is a Pharmacist present and that can be an issue, but they understand why this is done.

4: Meetings

Joanne informed the Group that there will be no meeting for the Group in August, so the next meeting will be in September. We do not know how things will be at that point in time, so we need to have Zoom as a backup. Joanne explained that we do need to start looking to promote the Group and recruit new members, especially as we have sadly lost 2 members in the past 12 months.

Joanne asked Julie, as the newest member to the Group, what enticed her to join. Julie explained that it was because she wanted to understand how the Practice worked and she felt that if she understood more, then she could be of help to others, in explaining how things work to them.

Syd explained that he does not like the hybrid meetings, he prefers it to be either via zoom or face-to-face. Nancy felt though that if it had not been for having a meeting via zoom today, she would not have been able to attend due to illness. Joanne informed the Group that we will look at how high the covid numbers are in September and make a decision from there. The Group agreed this was best.

Joanne wished the Group a happy summer and we will see everyone in September.

7: AOB

No further business to discuss.

Date of next meeting
(TBC Zoom or Face-to-Face, or Hybrid)
7th September 2022
4 – 5pm