

Patient Participation Group

Virtual Zoom Meeting held on Monday 5th October 2020 at 4pm

Present:

JD, AJ, YG, JB, RA

Practice:

BC

Apologies:

IW, JT

Virtual Members: DC, JB, AN, CH, AH

1 Apologies for absence

2 Minutes of last meeting:

Minutes read by JD.

3 Membership:

Actual members of PPG: 7

Virtual members of PPG: 5

The VM who resigned was RI

4 Treasurer's Report:

YG asked if JD had made any other changes when she added to the Barclays account, JD reported that she spent a long time in bank but only added herself to the group. The reason YG asked is that since December when JD went in she has had no access to our online bank account. AJ said she is also no longer receiving statements and wondered if JD had changed this, as AJ had been requesting them to go to YG. We wondered if the bank has removed YG instead AH and was AH receiving the bank statements, but sure if AH were receiving statements she would have said so. JD going to make an appointment to go in to sort out and YG will attend as she will need to set herself up for online access again and this cannot be done remotely. The bank has to ensure that YG can go straight upstairs and be in an office (not open plan) with just JD and one Barclays member of staff. YG does not want to be waiting anywhere due to Covid.

YG reported that the total balance as of 05/10/20 stands at £957.39. BC collected £77.74 from book payments, she requested that we purchase 2 cameras for the practice that cost £151.96, these have been purchased and the difference will be paid to BC. The camera payment and book club funds are reflected in the balance above. The only other payment due will be the NAPP membership, the renewal is in October, which is £40.00.

Action Point: JD to contact AH to see if she has been receiving correspondence from Barclays for the account.

5 Website:

New group photo needs to be taken as members have changed since last photo taken. **(Still outstanding)**

The practice website has been upgraded/redesigned. Dr A and NS are working on it. BC asked if there is anything missing to let her know. She also asked the committee to look at other practice websites and email her with any suggestions for improvements. The committee gave positive reports on the new look website.

BC said that patients could now complete e-Consult forms stating their illness/medical problem, rather than phone the practice. The form gives the patient lots of room to state what their problem is, it asks for various information including when relevant an estimate of their pain level. If patients report a high pain level they may be advised to attend hospital or telephone the surgery and the form is terminated. In all other instances (including lower pain levels) they submit the form and within 2 days the surgery makes contact. e-Consults are usually triaged by the duty clinician on the day they arrive although a few are moved on to admin tasks before a clinician sees them if they are clearly of a nature where admin would usually deal with them, eg ongoing fit note requests are moved to the appropriate doctor who deals with the request as an admin task, outside an appointment slot. The e-Consult form is being used by 20-30 patients a day. The clinicians like them as the amount of information gathered in them allows the clinician to prepare for the telephone consultation and hence cuts down the time needed for the consultation itself.

There are various forms and questionnaires on the website including one for adding someone to a waiting list for Flu vaccination. Flu vaccination clinics have worked well in September and are continuing with drive through options in October being organised by the Primary Care Network. The drive through clinic is at Aspley but an appointment **must** be made, patients cannot just turn up due to restrictions on the number of vaccines available. There are also Flu clinics at the practice being held by the Healthcare Assistant and nurses. The practice ran a Saturday clinic in September which worked well and will possibly be holding other Saturday clinics at the end of October and in November when further vaccines have been delivered. Deliveries of vaccines have been delayed by the suppliers which the practice are finding very difficult to cope with..

Another form available on the website is an Asthma Review form. When the completed form is received at the practice the nurse reviews it to see if a telephone call is necessary to the patient. This means that a significant number of patients do not need to attend the surgery for their annual reviews. The practice is reviewing who needs to attend the surgery and reducing the number of visits people need to make to the practice to a minimum in the light of Covid.

6 Notice Board & Information Files:

JB has not been able to refresh the notice board due to Covid and restricted access to surgery, BC said that if JB wanted to visit to attend to the noticeboard there would be no problem with that but the committee asked was it necessary at the moment, due to JB's health and safety? The information files have been removed due to Covid.

7 PRGN, FFT meetings:

JD attended the Tolson Partnership (our Primary Care Network) meeting in December. This was an update meeting as the Partnership started in the Summer of 2019. The subjects discussed:

- The Practices – there are 8 in the partnership
- Best Practice
- Getting to know each other's practice
- Look at focus of meetings
- Pathway
- Social prescribing to clubs and carer support groups
- Mental Health

JD circulated the Minutes after the meeting.

8 Waterloo Practice Information:

As mentioned in Item 5 above the practice is now using online consultations, through the E-Consult form and telephone requests. The doctors are not seeing patients routinely, they are doing telephone consultations and if using the telephone consultation, they decide they need to see the patient they will arrange for the to be seen. The nurses continue to see patients face-to-face for vaccinations, health checks, blood tests, etc.

Telephone calls to clinic were discussed, 15 minutes then cut off, at the moment seems too short, as once cut off you have to join the back of the queue again. With technology moving and pricing structures allowing free calls it was thought that callers should be able to decide if they wish to continue holding on. BC reported that she thought the 15 minutes to cut off started as soon as the call was connected and therefore included the messages (which are quite long before you get put in a queue). Different people have heard a different response at the end of 15 minutes, one message is 'Please call back a less busy time'.

Action BC to look at and lengthen the cut off time. RA enquired about the position in queue facility that we used to have. BC reported that this was a different phone system with the 0844 number and had more features due to the 0844 number funding the additional features. It can be done on this system, but it cost which BC would have to check but thinks might be about £70 per month. There are no restrictions on the number of people who are held in the queue on the present system, this can be restricted, but fewer patients would be able to join the queue and this could upset some patients.

New Premises Engagement: BC asked could the committee offer any suggestions of committees, groups, newsletter or organisations that she could contact with regard to new premises and consultations. BC said the practice is to host online meetings to allow patients and interested parties to ask questions. AH suggested it may be worthwhile that the practice has an idea of the number of people attending in advance, even though it is online, as the staff will be better prepared. There was also a suggested that the practice could ask for questions prior to the meeting, again to be better prepared and hopefully have a smooth online experience. The practice will contact every household within the next 2 weeks by letter. The CCG have requested that all work be undertaken remotely and nothing paper based, but it is difficult when asking for suggestions as not everyone is Internet savvy, or has access and would need a paper-based questionnaire to complete. Through the Tolson Partnership the practice has been able to:

- Increase the Pharmacist hours
- Have access to a Dietician
- Have access to a Wellness team

The CCG put out a tender for Phlebotomy clinics as both Mill Hill and the hospital have cut back on appointments. The GP Federation with Locala Community Services submitted a tender and have been successful. Waterloo will act as one of a few hubs to provide these additional phlebotomy clinics which any of the eight Tolson PCN practices can book into. Waterloo will have 2 clinics on a Monday morning and 1 clinic on a Friday morning.

Car parking has been a problem and has not been helped recently with workmen's vans and residential parking. Each practice has been allocated Care Homes near them to care for the residents as patients. Waterloo has now got responsibility for Valley View, Wakefield Rd, Waterloo and Oxfield Court, Albany Rd, Waterloo. An additional 8/10 residents at Oxfield Court have recently registered at the practice moving from other local practices following the initiative. The practice also has a few patients at other local care homes which are now assigned to other local practices. Patients resident in the homes do not have to register with the assigned practice and it is thought that most may remain with their original practice until they pass on but new residents are likely to register with the assigned practice.

Feedback from committee on various subjects:

Covid

Separate entrance and exit at the surgery was attempted but due to patient feedback was abandoned after a couple of days. Using both front and back doors for entering and exiting seems to be ok with the reduced numbers coming in. Attendees who have visited the surgery did not report any particular concerns with the current arrangements YG & AJ say they felt very safe on visiting the practice and the system in place for patients is excellent.

New Premises

- Discussed possible sites and even the suggestion that Crown Motors site could be built on and used as an annex
- Discussed the possibility of the Sports Soccer site which has good parking and the centre has now closed and is a big site?

Action Points: Committee members offer any suggestions of committees, groups, newsletter or organisations that BC could contact, with regard to new premises and consultations

9 Correspondence:

None no JT.

10 Communication:

Telephone discussed in item 8.

11 Fund Raising:

This is difficult due to Covid, as cannot sell raffle tickets or ask for prizes. AJ suggested running a Quiz, she has one which was run to gain funds by an organisation last December, this will be emailed to the committee. Ask for a £1 per entry via PayPal with a prize of ?? for the winner(s). YG showed 3 pictorial quiz sheets that have been used successfully and will photograph and email to the committee. This would need careful thought, could it be entered for on the practice website with a password given once paid? Instead of being a yearly thing this could be a monthly thing. BC very interested with this as it would promote the PPG and get people involved with the PPG and could be helpful to those who feel cut off and isolated at this time

Action Point: AJ & YG to send in Quizzes plus other committee members to have suggestions or email in examples to AJ.

12 Any other business:

JD thanked BC and practice staff for managing during a difficult time. The committee will get chocolates and a card for the practice team as a thank you from the patients.

13 Date of next meeting:

16/11/20 AJ to contact IW to see what time he can attend, then email out time of next meeting.

Meeting ended at 5.45pm

ACTION POINTS :

JD to contact AH to see if she has been receiving correspondence from Barclays for the account.

Committee members offer any suggestions of committees, groups, newsletter or organisations that BC could contact, with regard to new premises and consultations.

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