# TADLEY PARTICIPATION GROUP (PPG)

## Minutes of a Committee meeting held online on Wednesday 8<sup>th</sup> December 2021.

**Present** Heidi Williams, Dr Hogan, Alan Chambers, Graham Wright, Tony Wicks, Jean Chapman, Mary Cawley, Gill Tomlins, Claire Chambers, Sheila Gunnell, Val Turnbull, Gill Herbert, Elizabeth Chapman and Hazel Metcalfe.

Apologies Robin Treadwell and Kate Wright.

**Minutes** of the meeting held on Wednesday 13<sup>th</sup> October were agreed with a correction to the first section when District nurse should read Health Visitor.

### Matters arising

The dispensary lunchtime closure has been reduced to one hour from 1 - 2 p.m. Dr Bhanot was consulted about the possibility of later afternoon opening but felt this was not the right time to make changes.

### **Committee Matters**

The secretary will contact the Focus group about attending the next meeting.

The postponed visit by TMP to an Age UK lunch will now take place on 11<sup>th</sup> January with HW, EC and GH representing the Practice. Neither they nor LM for Age UK felt PPG input was necessary as they expect the questions to be about procedures.

The Annual Patient Survey was discussed again. In summary, positives were the fact that TMP is responsive to urgent issues with e-consults being answered well within the five days stated on the form and almost all patients being extremely happy with outcomes. The Partners are taking the lead with many new supporting staff roles aiding them. Concerns are around those with less urgent needs and Covid boosters at the moment. Issues were:

- Non-urgent appointments that suit both the patient and TMP.
- The triage/online appointment system is largely working but it would be useful to know the number of calls that are resolved through this.
- Cutting off the telephones and e-consults through the day seems a return to early in the pandemic.
- 111 is a poor backup system.
- Patients with chronic, long-term conditions would ideally be seen by their own GP. Is it possible to make the next appointment as they leave to ensure this?
- The NHS is a health service but, just now, is an illness service.
- National marketing has not been clear. For example, it has not been made clear what the latest support roles are and what they can offer.

In response TMP stated that on the 7/12/21 the window for submitting an econsult form has been extended to 8am to 7pm. More pre - bookable GP appointments are becoming available with the aim of some being bookable online in the future.

HW said they understand the frustration of patients with non-urgent cases and are seeking solutions. For example, they have been proactively seeking patients with diabetes, asthma and COPD and inviting them in for a face-to-face review. They are also checking through those with hypertension. Although there is increased pressure on the system currently and the government has said this type of action may be suspended for now, TMP is trying to avoid this whilst trying to maintain a safe system. They feel that they should not be only an emergency service but a service for non-urgent patients too.

Dr Hogan explained that the doctors are making follow-up calls instead of saying, 'Come back and see me in three weeks,' and this seems to be working well though this is doctor led so patients are not always available to take the call. Everything has been affected by the number of staff isolating at any time.

GT asked what provision was being made for deaf patients for whom a telephone call is difficult especially as the ability to 'fill gaps' in a conversation diminishes with age. CC pointed out that mask-wearing is a challenge for many but especially the deaf.

HW said that a note pops up on a deaf patient's notes saying, 'better face to face' and there is a hearing loop in Holmwood. The use of Zoom was suggested and, though not many consultations take place over this at present Dr Hogan thought it a promising idea to be taken forward where the IT is available.

A discussion followed on education and marketing. CC asked members to produce ideas as to ways to educate patients about the different staff roles. Ideas included, using local magazines, through the local U3A, through centres such as Ambrose Allen and The Point and through council websites. GH suggested the PPG committee might, through their local knowledge, compile a master list of groups that could be used to disseminate information. A sub-group was formed of JC, LM. AC and TW.

Most had viewed the PPG publicity video produced by Odiham and Old Basing PPG and agreed it might be an idea to try. JC and MC will connect AC to the producers via the CCG. JC and MC will report back to the CCG and try to gain more information about the views of other PPG groups.

Recently some members had been sent, and had completed, a Healthwatch questionnaire.

## CCG PPG

JC, GW and HM had attended an online meeting regarding a patient charter for Hampshire. This was mostly being driven by the Portsmouth area and, as the NHS is looking to produce a national one and there are much more pressing issues at the moment it was generally felt that a charter was unnecessary.

The CCG is bidding for a share of the £7 million Winter fund.

#### Patient queries

There were no messages from patients to report.

#### **Practice Matters**

Take up of flu vaccinations has been good, especially in those aged 65+. There have been few cases of flu so far this year.

Booster vaccines have caused much extra workload. There have been administrative errors in recording previous doses, all of which take time to check. It is good news that people are keen to have boosters now.

The Hampshire Court Hotel is about to open a vaccination centre on its indoor tennis court in addition to the facility at Jameson House. The two venues have between them provided over a quarter of a million vaccine appointments.

The provision of boosters to housebound patients has been problematic with Pfizer as well as time consuming as the patient must be sat with for fifteen minutes. Wherever possible this time has been used for other checks.

The Reception Manager from Overton visited and shared information with the TMP Reception Manager.

Soon it will be possible to refer minor illnesses to a pharmacy once Reception training is completed. This will be a clinical referral then the pharmacy will contact the patient. Pharmacies will receive a fee for this. The CCG is purchasing software which will enable the pharmacist to feed information back onto a patient's medical notes.

The meeting finished at 20.15

# Date of next meeting Wednesday 16<sup>th</sup> February online

H Metcalfe 13/12/21