**Ashville Surgery Patient Participation Group
Thursday 9 DECEMBER 2021, 5.30pm (via Zoom)**

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| **Present:** | **In attendance:** |
| Mordechai KREITMAN, Ashville patient | Magnus NELSON, Practice Manager, Ashville |
| Nina SHANDLOFF, Ashville patient | Leslie HUNTING, Admin, Ashville |
| Rosalind DUHS, Ashville patient | Jennie BEACH, GP, Ashville |
| Sandra SMMITH GORDON, Ashville patient | Katherine McWHIRTER, GP, Ashville |
|  | Mo RASHIDY, GP, Ashville |
| **Apologies:**  |  |
| Anza CLARKE |  |
| Heather PONITFEX |  |
| Andrew GOODWIN |  |

MINUTES

1. Welcome and introductions

MN welcomed all to the meeting, invited attendees to introduce themselves and noted apologies.

Meeting.

2 Minutes from the last meeting – 27 May 2021
MN confessed that there were no minutes from the last meeting, which had been a PCN-wide meeting with attendees from practices across the patch and several other individuals and organisations. MN admitted he’d found this meeting quite confusing, and in future, for the group meetings, it might be worth asking the chair to keep to a tight agenda and do their best to ensure all those attending get a chance to talk. MN – and attendees at today’s meeting – felt this had not been the case on 27 May.

3 New developments

* Staff (Reception)

There has been higher than usual turnover at the front desk. Three receptionists left this year. Two of them partly down to how much more stressful the role has become with patients being quite aggressive at times. Luckily we’ve managed to find replacements quite quickly, but we do need to make sure we support staff to make sure they’re coping.

* New Salaried GP
We appointed Dr Katherine McWhirter in August this year. She works 7 clinical sessions a week, and is fantastic. (Dr McWhirter was able to join the PPG meeting to say hello).
1. PCN developments
* We are now hosting the ‘eHub’

This processes a % of our eConsults (patient requests for medical advice / support / appointments etc). At the moment, two staff work from Ashville; a paramedic, who can triage patients and see them face to face, and a care co-ordinator who collates patient contacts with the surgery and allocates them to the most appropriate team (eg. clinical / admin). The eHub will work with the other practices in the Primary Care Network, and there is funding (and current plans) to recruit a second paramedic and a part time GP. The idea behind the eHub is that straightforward non-complex concerns can be dealt with quickly by that team, thereby freeing up our GPs to work on more complex cases. It’s early days still, but we’ve certainly noticed a difference that patient queries are being dealt with quickly, and often on the same day now (by both eHub staff and the Ashville GPs).

* The Primary Care Network has also appointed a new Link Worker (Melissa) and a new Health and Well-being Coach (Claudette), both of whom work at Ashville on a MONDAY.

ACTION – MN to update practice website with new staff details.

* Incorporation
There have been discussion amongst member practices of the PCN to formalise their links with one another. One option is though incorporation, making the PCN a legal entity. The benefits of this would be that the PCN could then more easily directly employ – and deploy – staff across the network. At present, we rely on the GP Federation to do this for us, but it can be quite complex and bureaucratic. We hope that this won’t impact negatively on patients. Indeed, we anticipate the opposite, but just to reassure the group, patients will still be registered at their chosen practice, and the bulk of their care will be delivered by that practice. By incorporating, we hope that we will be able to offer more services to patients – that we couldn’t offer as individual practices. MN agreed to keep the group updated with these on-going discussions.
1. COVID and vaccinations
* Pop-up booster clinics are being run by local surgeries, including Ashville. Eligibility criteria for the COVID booster is updated on a daily basis. Mass vax sites and local pharmacies also offering slots now.
* MN updated the group on what’s been happening at the surgery in terms of COVID. The practice has been open the whole time during the pandemic, patients have been and continue to be offered a range of appointments (including face to face – despite what the Daily Mail has been saying!). Clearly, we’ve had to make adjustments to whom we see and when. Many patient queries can be dealt with over the phone / via remote consultations, but MN reassured the group that when a patient needs to be seen, we are seeing them.

Ros mentioned a recent experience with NHS 111, where she was advised to attend the Urgent Care Centre at Hammersmith Hospital, only to find that the centre was closed. MN said he would look into how to contact NHS 111 to check that they have the most up to date info with regard to which services are operating, and when.

ACTION – MN to investigate the NHS 111 issue (and to find out their mechanism for updating the info they hold wrt local services).

1. Any other business
* Video consultations
Ros had asked for this to be added to the agenda so that MN could update the group. We have the capability to now offer patients video consultations, and we have been doing more and more such consultations. As these consultations often involve patients having to turn their speakers on (if using their phones) there are some privacy issues to be considered when offering these types of consultations.
* COVID impact on services
Nina had asked for this to be added to the agenda. This was briefly touched upon earlier in the meeting (see item 5 above). MN confirmed that there are certainly longer waiting times for outpatient and other apts at hospitals (following referrals from the GP). This has fluctuated during the pandemic, and also by hospital, and even department. We do keep an eye on all our urgent referrals, and chase up when patients have not heard back from the hospital.

Overall, the practice has been very busy dealing with COVID and COVID vaccination issues, especially issues around patient eligibility and vaccines given overseas.

1. Date of next meeting – To be confirmed (HopefullySpring, 2022)