

## **MINUTES OF THE VIRTUAL MSPPPG MEETING WEDNESDAY 11<sup>TH</sup> AUGUST 2021 AT 7PM**

### **Attending:**

Paul Harding (PH) – Chair  
Lesley Isaac (LI) – Vice Chair  
Mary Taylor (MT) - Treasurer  
Sam Radford (SR) – Secretary  
Joy Bailey (JBa) – Chair of Comms sub-committee  
Gill Waldron (GW)  
Pete Griffiths (PG)  
Derek Baker (DB)  
Lisa Tabner (LT) – Practice Manager  
Amanda Botley (AB) – Lead Nurse

### **Item 1 – Welcome and introduction**

PH welcomed all to the meeting.

### **Item 2 – Apologies for absence**

PH informed us that Jenny Becker would be resigning from the committee. He thanked Jenny on behalf of us all for her work on the PPG.

LT said that Dr McInerney was planning to attend but had been called away on home visits and had sent her apologies.

No other apologies had been received.

### **Item 3 – Minutes of previous meeting**

The minutes from the previous meeting were taken as read.

### **Item 4 – Matters arising**

There were no matters arising.

### **Item 5 – Action list**

PH said that all actions have been cleared.

With reference to action 44, PH had recently used AskmyGP and had received an emailed reply within half an hour. He also said he was aware that the system was being reviewed and the possibility of adding a list of questions which will help the Practice staff prioritise requests was being looked at.

## **Item 6 – Chair’s Report**

All present had received a copy of the Chair’s Report prior to the meeting.

PH mentioned the challenge that all the Practices and the PCN had faced when deciding whether or not to run a local hub for offering Covid booster vaccinations. There were several restrictions, including finding a suitable location, parking at both sites being an issue. There had been a debate about the impact on the reputation of the Practice if they decided not to offer this service. The converse view is the impact on their ability to continue with ‘normal’ business which wouldn’t be possible if they were offering booster vaccinations.

PH then talked about the fee that is paid to the Practice for each flu vaccination that is given (approximately £11) and if patients get their flu jab at the same time as their Covid booster this fee would be lost to the Practice. LT said they had already ordered their flu vaccines so would lose a lot of money if they did not use them all – they are limited on how many they can return. This is one reason for starting the flu clinics early this year to ensure they use all of their vaccines.

PH said it was about finding a balance between local pharmacies and the Practice, DB had voiced a concern about this prior to the meeting. PH said that he felt it was important to ensure patients are aware that the Practice is offering flu vaccines, in particular those patients who don’t have access to IT.

JBa said she will be providing an update for Caroline Bennett (Senior Support Coordinator Martock) to pass on to her Martock Friends group, most of which have no IT access. JBa asked LT if they would be sending letters to such patients? LT said they can search to see who has been left out following the clinics and then they will be contacted. LT pointed out that the Practice could not provide everyone with flu vaccinations and they needed the help of local pharmacies offering this service and that it was important for them to work together on this. The Practice would not be offering walk-in clinics, but patients will be given a time and then ushered straight in on arrival at the surgery. Weekday clinics will be held at Martock and weekends at South Petherton, giving patients more choice. PH says he has around 28 volunteers following the Henhayes Covid vaccination programme that he can contact and there will be a need to create a rota for help at the flu clinics. LT said the clinics will not be big and will consist of two nurses vaccinating so probably one volunteer on the door would suffice. It was then suggested a second volunteer could be inside to usher patients in the right direction. PH said he will sort out a rota for the clinic dates in September **ACTION PH.**

## **Item 7 – Treasurer’s Report**

MT reported that the balance remains the same at £565.19

## **Item 8 – Practice Update**

All present had received a copy of the Practice update prior to the meeting.

JBa said that someone had commented on Facebook that they had waited 20 minutes for the surgery phone to be answered even though they were number 1 in the queue? LT said that this week had been horrendous, the phone had been busy, and they have been very low on reception staff, all available staff have been helping with answering the phones. Next week is looking better with more cover and two bank staff have recently been recruited. There is a lot of staff off with sickness at the moment too. The flu vaccination texts were all sent out together instead of in batches which created a lot of phone calls.

GW said she had phoned up about the flu clinic and had been dealt with very quickly and efficiently. She asked why AskmyGP closes at 2pm on a Friday? LT replied that this is only for online requests and patients can still phone with their request after this time. All SHS Practices are the same and it will be reviewed after the summer holidays.

Amanda Botley (AM) joined the meeting at this point 7:26pm

PG asked LT what happens when a patient has a hospital consultation and doesn’t have a nominated GP who deals with any correspondence from the hospital?

LT explained that all practices have Workflow, there is a hub in Crewkerne. Most discharge summaries from the hospital are sent electronically so the Workflow team will put them onto the system. Some correspondence will go directly to the GP’s inbox and they will then decide who deals with it, but most of it goes to Workflow who will code it. It then goes into the patient’s notes with actions going back to the GP or the pharmacist depending on what is required, or to reception to arrange an appointment for the patient if necessary.

LT said they will be dispersing the patient list to GP’s who will select the patients that they generally deal with, but patients will be able to request a change if necessary.

PG asked if hospital results are followed up by the surgery? LT said that if a result is flagged the Practice will follow it up. Any urgent results are dealt with immediately and they are looked at every day. Patients are only contacted if results are abnormal.

LI said in her experience, patients are usually sent a copy of any letters sent from the hospital to the patients practice.

JBa asked about patients such as those in the Martock Friends group who still expect the Dr to phone them up with their results – any plan for these patients?

LT replied that they only contact the patient if the results are abnormal and that patients are told this at their appointment. The results GP reviews them every night and will put instructions against all results that need referring back to the patient.

AB said they inform the patient that they will be contacted only if results are abnormal but can phone if necessary and all staff should be telling patients this, but it's very important that these patients are still being cared for.

PH said we should try to reach out to these patients without IT access and suggested flyers in the library, post office and the local newsagents – he asked for everyone's thoughts on this. They could detail some generic issues that won't change too quickly.

MT said she could give some to Wendy Rudd (Village Agent for South Petherton) to pass on to some of the patients that she knows that would find them useful.

LI said she will put the information in the next edition of The Leveller and the TA13 publication (if possible). PH suggested getting together to decide on some wording for the leaflets. **ACTION PH**

JBa said she will condense all the information onto an A5 sheet and send it to Caroline Bennett who will then make photocopies to give to the senior residents in Martock and this could also be given to MT to pass on to Wendy. PH said that a copy should be sent to LT to read through before sending to Caroline. **ACTION JBa**

### **Item 9 – Covid booster/Autumn influenza vaccinations**

This item had been discussed earlier in the meeting.

### **Item 10 – Patient Issues**

Everyone present had seen the complaints/issues on the Practice Update – GW asked for any comments? There were none

### **Item 11 – September meeting of the PPG**

The meeting in September is due to be held on Wednesday the 8<sup>th</sup> but there are several members of the committee away in September making it difficult for the meeting to be quorate. PH suggested that we don't hold a meeting in September – all present were happy with this decision.

AB mentioned at this point that this year's flu vaccine does not contain any egg proteins so will not be an issue for anyone with an egg allergy or concerns. Also, there is still no news on having the flu vaccine at the same time as the Covid booster dose. She felt this would be useful information to include on any flyers that we produce. PH will check the information on the leaflets with LT and AB before distribution.

JBa asked who was eligible for the shingles vaccine? LT said any patient aged from 69 years onwards and up until the day before their 80<sup>th</sup> birthday.

The meeting closed at 8pm.

Next meeting will be on the 13<sup>th</sup> October 2021.