Willington Medical Practice Patient Participation Group (PPG)

May 2021 Annual PPG Meeting (ZOOM)

Present

Chris Baker, Sue Carter, Holly Goodrich (Practice Manager), Janice Heier (treasurer), Margaret Hooley (chairperson), Pete Horridge **VPE** (vice chairperson), Sally Lovatt (secretary), Barbara McCardle, Val Shelton, Jo Topping and Vic Wright **Apologies**

Sara Bains, Joan Burton, Pat Harvey, Judith Kelf, Maisie Trotman and Ann Wood

Margaret Hooley welcomed everyone to the meeting, especially Jo Topping who was joining us for the first time. In September 2020 we held a virtual AGM and in May 2021 we are holding this Annual meeting. Hopefully by May 2022 we will be able to meet face to face and hold an AGM.

Chairman's Report 2021 Margaret Hooley

Since our Annual General Meeting held via Zoom in September 2020 we have continued to meet as a 'virtual' group on a monthly basis. As you will appreciate the COVID-19 pandemic has been relentless and continued with a second lockdown in December 2020.

The impact on the Surgery and patients has been immense and we have all been eager to hear news from Holly Goodrich, Practice Manager, who has been kind enough to share with us what has been happening at the Surgery and more recently the amazing progress with the roll out of the vaccination programme.

I feel proud to be Chair of the PPG and patient of Willington Surgery knowing we are in safe hands and keeping all my fingers and toes crossed that we are emerging from the pandemic in a positive way.

Although no fund raising has taken place since our last AGM, for obvious reasons, as you will hear from our Treasurer our funds are staying healthy. Thank you to Janice who has stoically managed our accounts and spent a lot of time on the phone to the bank!

After consultation within the Group we agreed to trial alternating our meetings and now meet Tuesday mornings one month and Monday evening the following month.

I wish to say a particular thank you to Pete Horridge, our Vice Chair, who has, throughout the pandemic, encouraged PPG members to become so much more IT literate and thanks to Pete we have held all our scheduled meetings using Zoom. So, a huge thank you Pete for all our help and support.

I wish to also express my sincere thanks to Sally, our secretary, for all her hard work and especially for keeping me 'on the straight and narrow'. She has worked hard on establishing a virtual group of PPG members who I hope are joining us at our AGM tonight.

Practice Manager, Holly Goodrich, continues to regularly attend our meetings so we have direct communication with the surgery. Again, thank you Holly.

Our Treasurer, Janice Heier, Practice Manager, Holly Goodrich will be reporting as per the agenda but as Chairman of PPG I am honoured to be working with all the members of PPG so a huge thank you to you all it is very much appreciated.

Treasurer's Report Janice Heier

Due to last year's report taking us from April 19 to August 20 I have completed this AGM report from April 20 to April 21. This should show a little normality. Sitting at the bank in the current account there is £5907.32 and I have £5.47 in petty cash. Although we received no income, we spent £1693.12 over the year. We had a very generous donation last year which is why we still have a healthy balance.

Expenditure for the year:

Notice boards for outside and blinds for the upstairs windows	£1322.25
(This was balance of payment of total £3668.85)	
Bronze memorial plaques have been purchased for the previous	110.34
items.	
Surgery information book, printing and delivery	136.80
NAPP affiliation fee	40.00
SDDC lottery affiliation fee	20.00
ZOOM project fees	28.78
Flowers for Chris for work on PPG	34.95
Total	£1693.12

AGM PPG Surgery Report for 2020 – 2021 Holly Goodrich Practice Manager.

Having started in Primary care in January 2018, I often said what a massive learning curve I went on, but the last 18 months has been something I would never have envisaged when accepting this role.

The main focus for the surgery has been the rapid and continuous changes to make the surgery covid secure for both patients and the surgery team. The PPG has helped the surgery in this with funding from a patient donation for the outside notice board which enables us to give information to the patients with us advising people to only enter the practice if it was essential. Also, with their help and support for the reception desk screen. We also had funding from a patient through the PPG for the new blinds above the reception area which have really helped.

At the start of the pandemic, we had to set up a specific triage "Red" room for anyone with covid-19 symptoms and although we still have this room, we very quickly worked with our Primary Care Network (PCN) and the other PCN's in the Derby city to organise the drive through covid hub at the University which really helped us to keep the surgery on Amber rather than Red alert.

We put in place many measures to protect the surgery team as one of the biggest risks to us as a practice in keeping patient care available was clinical and non-clinical team members going off sick or having to isolate. We have in place still mask wearing if not behind a screen (either on the reception desk or back offices) and wiping down of all areas on a regular basis. One thing we have found with this is that generally sickness has reduced overall. I'm also proud to say that we have had no covid cases within our team that have come from working at the practice.

I'm also proud that the surgery doors have (physically) remained open throughout, we are lucky as a practice to have a large reception area and waiting room which has enabled us to do this while others haven't; but believe this has helped patients to feel we are still here for you. We have also done face to face appointments throughout but have had to implement telephone or video appointments with our GPs before a face to face could happen. This was to reduce the time a face to face took so the reduce the exposure to both patient and clinical staff. I understand that accessing the surgery has been in different ways and acknowledge this has been easier for some patient over others but we have tried to accommodate everyone who needed us.

The reduction in clinical appointments due to "clean down" processes has had a massive impact on us and patients trying to give and get appointments, we have bought in Locum GPs to try and help with this and will be reviewing this again in June to see if the clean downs between patients can be reduced.

Our workload has increased hugely since this time last year with reports from the British Medical Association backs up saying:

BMA's Response to GP Appointment Data

GP appointment data shows practices are busier than they've ever been, says BMA

Responding to NHS Appointments in General Practice data1, which shows that practices in England delivered 4.8 million more appointments in March than they did in February, BMA GP committee chair Dr Richard Vautrey, said:

"Today's figures underline the immense efforts that practices are going to providing care to their communities and the intense workload pressures that staff are under as we continue to respond to the pandemic alongside patients' wider health needs.

"Practices in England delivered almost 5 million more appointments in March than they did the month before, and nearly 3 million more than they did in the same month two years ago, long before the onset of the pandemic.

"GPs and their teams are consistently telling us they're busier now than they have ever been, and this data – which does not include a large proportion of the vaccine programme undertaken by practices, nor a vast amount of other daily tasks – backs this up.

"Every day, more than a million patients in England had an appointment with their practices, whether this was the significant proportion seen face-to-face, on the phone, or, for a smaller number, via video call. This phenomenal amount and associated workload is before we consider the hundreds of thousands of other people being vaccinated via GP-led sites each day.

"And with too few GPs and practice nurses – and a promise in 2015 of 5,000 extra family doctors within five years actually delivering a loss of almost 1,5002 – individual doctors and other practice clinicians are taking on more and more as demand rises and the workforce diminishes.

"So, for GPs working 11 or 12-hour days, often leading heroic efforts to protect as many people as possible in their communities against a disease that has had such a devastating impact on all of us, it is heart-breaking and completely demoralising to hear accusations that general practice is not open and that patients are not being seen.

"This narrative, categorically proven wrong by today's data, is extremely damaging at a time when morale is already reaching rock bottom and many GPs, practice managers and others in the practice workforce are reaching breaking point.

"It may feel slightly different, with changes put in place for the protection of staff and patients alike, but general practice is open, and staff need support, patience and understanding as they work harder than ever before."

Every member of the practice team has gone above and beyond their job, sometimes at a cost to themselves (and sometimes their family) to ensure that the patients get the best possible care that we can deliver. I am so proud of the Team at Willington Surgery.

Another success of the practice was the Flu vaccination program which ran from September 2020 to March 2021; doing this in a covid secure way was a real challenge to the surgery and we really pulled together as a team to make not only the vaccination of the normal cohort of patients but also the addition on anyone over 50 years old, which for us, was an additional 1800 patients.

We have increased the Team through Primary Care funded staff which includes a social prescriber (which we share with 3 other practices) a clinical pharmacist, and a first contact physio (which we share with one other practice).

Then in December 2020 we were asked to deliver the Covid-19 vaccination program – the constraints around the Pfizer vaccine which was at that time the only vaccine that could be offered lead us very quickly to the conclusion that if we tried to do this in practice we would have to close most of the other services we currently have. As we had worked successfully with our PCN and the other Derby city PCN's over the Covid red hubs we agreed this would be the best option so The Arena hub site was opened. As of 7th May the PCN side of the Arena has done 159,448 1st vaccines (63% of the 33 practices capitation – this includes down to 18+ age group) and 75,442 (30%). As a practice Willington have done 7382 1st vaccines 84.6% and 3783 2nd vaccines 44% of the eligible patients. There has been a massive effort from the reception team to help book all these patients in and our clinical team (especially Nurses) have done a lot of shifts at The Arena on top of their working weeks.

We are now once again looking at our appointment system from June to try and keep all the good technologies we have (had) to embrace through Covid but also bring in face to face appointments without a telephone call beforehand. It will be a fine balance and feedback from our friends and family shows us that many patients prefer the telephone / video consultation options. We will have to do some additional training with the reception team so they know what goes to a telephone appointment and what goes straight to a face to face.

Our patient numbers have increased again this year; when I started in 2018, we had 8862 patients and as of today we have 9421. With an uplift since the beginning of this year of 180 patients.

The PPG have once again been a really valuable asset to the practice with help and feedback on many things including the recently installed telephone system, which apart from a few teething problems has gone a lot smoother than I thought it would. Plus, they have continued to meet monthly on zoom.

Unfortunately, we have not been able to do many patient events and the book table and fashion show got mothballed, but we all hope that if things continue as they are at the moment then we could be dusting things off.

Can I take this opportunity to thank the elected team of Margaret Hooley (Chairperson), Peter Horridge (Vice-chairperson), Janice Heier (Treasurer) and Sally Lovatt (Secretary) plus all of the PPG members for your help and support over the last 12 months?

Discussion

Sue C asked if the increased number of patients had resulted in an increase in staff.

HG responded that a review had been made and an extra clinical session had been implemented. This is partly funded by money from Primary Care Network because the extended hours provision has not yet been reinstated. Added to this the surgery now benefits from a physiotherapist, pharmacist and Social Prescriber (see above).

Appointments have been the subject of a recent project and at the training session on Wednesday 19th May there is to be a brainstorming session on appointments. Currently the number of appointments offered is appropriate for the number of patients. There has been an increase in the number of patients requesting appointments because of health anxiety, patients waiting during the pandemic and now contacting and patients requiring more attention while waiting for hospital appointments/treatments. Hospitals now seem to be more or less back to normal

Vic W said that his last two hospital appointments had been face-to-face.

Janice H commented that she had experienced very efficient call backs from the hospital.

Holly G commented that the hospitals are discharging patients back to the community more efficiently; sometimes good and sometimes not so good.

Pete H asked if calls from patients are comparable with other surgeries and this was confirmed by HG.

Holly commented that Willington, unlike most other surgeries, has kept the doors open and carried on with smears, coils and Long-Term Condition reviews. Cleaning down reduces capacity and the four nurses have spent their hours outside work providing support at the Arena.

Pete H asked if patients were less abusive because the surgery is accessible and with the new telephone system. HG commented that patients are often unwell, frustrated and anxious and many surgeries have posted quite aggressive notices asking patients to be civil. Holly now listens to telephone calls and has a standard letter advising patients that the call has been listened to and advising patients in an educational way rather than an aggressive way to respect the hard-working reception team.

Chris B commented that the receptionist answering his call seemed very anxious and kept apologising for cutting him off when using the new telephone system.

Sue C asked if the reception team was at full strength. The surgery is currently recruiting 3 new staff as some of the younger members of staff are going off to university. It is likely that a new apprentice will also be employed.

The Integrated Care System is gradually being rolled out (refer to information sent out last month to PPG and PP virtual group and attached again below)

Digital Buddies Update Pete Horridge

The connection between the practice and patients utilising local community based initiatives, which a 'village hall based' IT facility would provide appears to be grouped into the Social Prescriber function within the new framework.

I have had some dialogue with our social prescriber: Judith, who covers several practices and possibly won't have the available time to lead such an arrangement. I also understand that a facility for providing IT kit thought suitable for the 'digital buddies' initiative is not as available as first thought.

At this stage, it is unclear how useful a Willington PPG initiative will be if it doesn't sit within the agreed framework. I wouldn't want to involve PPG members in something that won't get utilised and hence not benefit our practice patients.

Integrated Care System

In January 2021 all health and care systems will be required to work together as Integrated care Systems and Joined up Care Derbyshire became an Integrated Care System in January 2021.

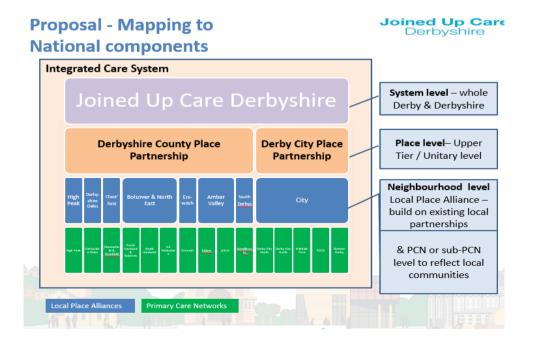
The new White Paper on Health and Social Care reform (2021) provides the blueprint for reforms that will join up the health and social care systems.

Joining up provision will happen in 2 ways:

Through **Place-based partnerships** with an aim to make decisions closer to the communities they affect to lead to better outcomes

Through **Provider collaboratives** where similar types of provider organisations deliver a common set of shared objectives. For example, ambulance services and 111 providers to reduce variation, health inequalities, better work force planning and more effective use of resources.

The Local Integrated System looks like this:



At system level the Integrated Care Service covers the whole of Derby and Derbyshire

At place level there are two local authority boundaries, Derby City and Derbyshire County where joint strategic needs assessments and health and wellbeing assessments are made. There will be a role for local councils and clinical primary care leaders with appropriate resources, autonomy and decision-making capabilities.

The Urgent Community Response, Better Lives and the Community Mental Health Framework are the first programmes to be addressed in 2021/22.

At neighbourhood level groups of practices working with community services, social services and other providers to deliver more co-ordinated and proactive services.

(Primary Care Network) PCN level will reflect local communities

Willington Surgery belongs to Derby City South PCN which comprises of 8 GP surgeries across South Derbyshire, including:

- Hollybrook Medical Centre
- Parkfields Surgery
- Alvaston Medical Centre
- Chellaston and Melbourne Medical Centre
- Willington Surgery
- Haven Medical Centre
- Wellbrook Medical Centre
- Village Surgery

The next meeting is Tuesday 15th June at 11am