

High Street Surgery Patient Participation Group

Committee Meeting

30 May 2023

Cyberspace via Teams

Attendees:

Anni, Lesley, Margaret, David, Linda, Joanne, Caroline, Peter, Ian, Emma and Sandra

1. Welcome

Thanks again for a strong meet-up. Welcome to new member, Emma.

2. Minutes of last meeting

Taken as read. Approved by the meeting

3. Matters arising

No matters arising

4. Appointments booked at High Street Surgery

Ian asked whether it is still possible to pre-book appointments. There have been many reports in the media about improving availability. Request for clarification. Anni explained that pre-booked appointments are ring-fenced for GPs to give for follow-up appointments. If all are taken on that particular day, receptionists can be instructed to call the patient if one becomes available. Otherwise, patients are asked to call on the day that they need the appointment. The number of pre-booked appointments has been reduced because of the high levels of DNA (did not attend) associated with pre-booked appointments.

Anni provided the following appointment data for May:

The total number of appointments booked was 4415, which is lower than expected due to the three bank holidays during the period. This comprised a total of 2843 patients attending, some of whom attended more than once during the period.

Of these, 1487 were seen by a GP, 398 were seen by a nurse practitioner/ECP, with a further 2 full days at care homes per week. This is somewhat lower than expected due to staff illness. The surgery has seen a number of Covid absences in the period.

Nurses saw 2165 patients, the social prescriber saw 11 patients, the mental health practitioners saw 34 patients, the health and wellbeing advisor saw 185 patients and the clinical pharmacist saw 135 patients.

In May, the surgery administered 130 Covid vaccinations to care homes and up to now to 95 housebound patients. Around 30 housebound patients remain for this week.

There were 157 DNAs, which amounts to 3.4% of all appointments.

229 appointments were cancelled by patients, which amounts to 5% of all appointments.

87 appointments were cancelled by the surgery, which amounts to 1.9% of all appointments.

There seems to be a good balance between pre-booked and on-the-day appointments. It would be possible to offer more appointments but the space at the surgery is at full capacity, so there are just not any further clinical rooms available. However, the number of appointments offered has increased 10-fold since Anni began.

Unfortunately, there is no data available for how many appointments have been pre-booked without a doctor's invitation.

GP's private appointments are not included in the statistics but there are very few of them. Emergency appointments include appointments with the duty doctor. Duty doctors also deal with other things such as ambulance calls and home visits. GPs also visit housebound patients once or twice a week.

Ian asked whether there were any planned changes in light of the latest funding news. Anni responded that she is creating an access plan. Demand far outstrips capacity and no extra funding has been provided to cater for the demand.

With regard to referrals, it was asked what the GPs were doing to get secondary care to accept referrals. Anni said that all that can be done is to continue submitting referrals. One patient had had 90% of their referrals rejected. The LNC has performed a 2-week data cleanse. Referrals create a lot of admin work. It appears that the criteria for services have shrunk while the GP workload has increased. An extreme example is that ENT/GYN referrals have a waiting time of 2 ½ years.

5. CQC return inspection

The return inspection did not take place in May as expected. There is a shortage of the doctors who act as inspectors. Anni has spoken to CQC who indicated that it may be in July. CQC must give 2-weeks' notice before the inspection. A recent ~~QC~~ inspection did not throw out any issues. Did give very positive feedback about the team's hard work.

6. News from the surgery

1st of two Covid vaccine clinics was held last week. There have been delays due to vaccine supply problems. All vaccines must be administered by the end of June. One more round of housebound vaccinations remains. These are demanding because the nurses have to spend the morning mixing vaccines.

There will be changes to shingles vaccinations in September as the live vaccine previously offered will no longer be used. There will now be a two-dose vaccination. Previously, the limit was 66, now patients will have to wait until they are 70. The two vaccines will create more work for nurses. Joanne asked about the difference and Anni replied that the outcomes are the same, but the vaccine works more quickly. There are two types of shingles and the vaccine only protects against the one type.

There will also be changes to the criteria for influenza vaccines. Historically, they were offered to 55-65 year olds, now they will only be offered to those under 65 who are immune-suppressed. Orders for vaccines must be placed 1 year in advance in Jan/Feb. It is possible to claim back a percentage of the cost of unused vaccines in the March following the clinics. This does not apply to Covid vaccinations for which the surgery does not pay, in fact the surgery gets paid for giving them, although less than before. They have a shelf life or around 6 months.

The PCN will have an anti-smoking campaign, sending text messages urging people to consider alternatives and encouraging them to quit. Smoking numbers still quite high, the

PCN is also considering lung clinics with specialist nurses. The practice refers around 7% of its patients to the JPH lung clinic. Results show that the clinic finds around 2% of cases early. In response to a question about vaping, Anni responded that medical research is required into its effects on health. NICE has recommended vaping as a way of weaning people off smoking. Two drugs are available but it is a long process that involves lifestyle changes. The biggest challenge to the surgery is staffing. There are large gaps in reception. Will and Julie have left, Rob has become a care coordinator. New receptionists are beginning, but will require training. Teresa, who has been the GPs' secretary, is retiring. Helen and Sharon will be starting, both of them come from JPH. Emily, one of the nurses, has left, as has Jake. A new assistant practice nurse will begin next week – there is currently an advert running for a new practice nurse, there has been a lot of interest. There have been a lot of staff changes. There was an outbreak of Covid at the surgery resulting in a lot of absence. The practice is still preparing for the CQC inspection.

6. Any other business

Peter informed the meeting that he was in the 8 o'clock queue and decided to fill in the online form. He was impressed by the form and will use it in the future. The result was much better. Anni said that the forms are much more efficient and some practices insist that everyone use an online portal. High Street surgery consider that to be discriminatory. There is a higher proportion of DNAs for appointments booked online.

Linda enquired about resuming in-person meetings.

Anni said that she would like to organise a summer event to gather all of the PPG.

Anni and David agreed to get together to attempt to arrange an in-person meeting.

Emma asked about police no longer attending mental health issues. Anni said that around a quarter of appointments are for mental health issues and these patients are long-term patients.

Although the government seems to have said otherwise, no extra funding is directly available to surgeries for mental health patients. All funding goes to the PCN rather than the practices. 4 or 5 mental health nurses are funded by the PCN.

Lesley reiterated that hospitals are not making referrals easier, it is a challenge for practices to keep up with the changes. More support is needed, but is not available from JPH.

A member has had issues with repeat prescriptions, sporadic requests have not been dispensed twice although the requests have been submitted through SystmOnline.

Anni asked for details to be sent to her and she will check it out.

7. Date of next meeting

The next meeting will be on 11 July 2023 at 7 pm if no CQC inspection.