

# **Mill Stream Surgery Patient Participation Group**

## **Minutes of the Annual Open Meeting**

**Monday 15 November 2021 at 7.30pm via Zoom**

**Present:** Fenella Galpin, Dr Stephen Harper, Karen Washbourn, Sarah Foster, Evelyn Hunt, Esther Chamberlain, Lorraine Lindsay-Gale, Claudia Downing, Robert Watkins, Christine Rees, John Lant, Barbara Ferriman, Yvonne Griffiths, Stephanie Hewett, Maggie Winters, Caroline Nathan, Derek Shaw, Barry O'Connor, Tony Winters, Marion Bradley, Ian Smith, John Reid, Alison Reid

**Apologies:** Julie Allinson

### **1. Chair's report**

Fenella apologised she was unable to circulate her report prior to the meeting.

Our last AGM was held in Feb 2021 (delayed due to Covid), and the panel has met 3 times since then in March, May and September (all on zoom). We hope to get back to face-to-face meetings soon, but will probably aim to alternate online/in-person meetings going forwards.

We have 4 working groups, but their activities have been restricted due to Covid.

We have been involved in some village activities, namely setting up the "Help Hub", which has now become the Community Hub. This is still helping some people on an individual basis, but the wider help can be reactivated if needs arise.

Christine has led a team of volunteers which have been particularly helpful to the Surgery during both Covid and Flu vaccination clinics.

As chair of the PPG, Fenella sits on the management group of the Millstream Centre, with which Christine is also very involved. We are pleased to have such good links so we can work together better to improve services for all. Donna (Millstream manager) suggested the Men's Shed idea, and plans for that are progressing.

We have also worked more widely:

- Fenella sits on SELF (South East Locality Forum); John Reid chairs this and it is a really useful forum for exchange of ideas. There are 10 PPGs in SELF but only 8 actively attending meetings.
- We also take part in Oxfordshire Healthwatch initiatives

- Attend NAPP meetings (see below)

We continue with our aims of trying to promote the Surgery in the community, and the community to the Surgery.

## 2. Working groups

### **Carers** – report by Marion

We have held carers coffee meetings on the first Friday of the month (hosted on zoom by John Reid) for the last 18 months. One carer has been to all meetings, and there have been a couple of new carers recently. Now the library has reopened we have had the first one back in the library.

For the next few months we will hold the in-person meeting on a Friday, and a zoom meeting on the third Thursday of the month. This meeting may move to being held in the Millstream Centre.

The carers group would like more people to join this working group to help facilitate these meetings.

### **Marking local and national events** – report by Claudia

Many plans haven't been able to go ahead due to Covid.

We marked Deaf Awareness week with an article in the Benson Bulletin (BB), and the school got involved with a signing assembly. We are hoping to arrange a Samaritans talk in the future.

We have asked the Surgery for focus ideas – these have led to an article in the BB but we have not been able to run any events with face-to-face contact.

Claudia attended the National Association for Patient Participation (NAPP) meeting which focussed on access issues: >50% of patients surveyed were concerned about this. The GP perspective is that GP's are understaffed and under attack from press and patients, the media are unhelpful, and patients need to have a greater awareness of what GPs and other practice staff need to do. There is also widespread abuse of practice staff which obviously impacts staff morale. Different patient groups have different needs eg younger patients are more tech savvy, older patients are more likely to slip through the net regarding remote consultations. We need to change the question of access to "access to whom" ie the patient doesn't necessarily need to access a GP when another health professional may be more appropriate. There was also a presentation from another PPG (Thornton) who are a good role model for what PPG's are able to do eg run training sessions, engage with retirees/carers/school children, provide IT support eg to set up online prescription requests.

### **Reaching out to the community** - report by Fenella

The new well-being navigator (Esme) is enthusiastic about reaching out to the community. Fenella has met with her. We are also involved in the Men's shed initiative.

### **Pharmacy** – report by Caroline

Lloyds are going through a difficult period: changes of staff, lack of regular pharmacist (can't open without one), greater volume of work due to closure of Lloyds in Wallingford and increasing population numbers. The staff want to give a good service but are hindered by these issues and a lack of space. These challenges create a lot of work for the Surgery too, although the Surgery has no control over the pharmacy service. There are often comments on the village facebook page about it.

### **3. Election/confirmation of new members of the PPG and co-options to working groups**

The panel can consist of 12 elected members, with 3 co-opted members.

Elections:

Fenella proposed by Stephen, seconded by Christine. Elected chair

Claudia proposed by Caroline, seconded by Karen. Elected vice chair

New nomination: Robert Watkins proposed by Fenella, seconded by Marion.

Evelyn Hunt, Barbara Ferriman and Stephanie Hewett to be co-opted onto the panel: proposed by Fenella, seconded by Claudia. Other Panel members remain until their term of office expires (normally a term of office is for 3 years).

#### **Panel members from 2021 AGM**

Fenella Galpin (Chair)

Claudia Downing (Vice Chair)

Marion Bradley

Sarah Foster

Yvonne Griffiths

John Lant

Christine Rees

Derek Shaw (rolling one year membership)

Robert Watkins

Michael Winton

#### **Co-opted members for one year**

Barbara Ferriman

Pauline Hoad

Evelyn Hunt

Caroline Nathan

Stephanie Hewett

### **From Millstream Surgery**

Dr Stephen Harper  
Karen Washbourn  
Julie Allinson

Working group allocation to be arranged by email due to time restrictions.

#### **4. Report from the surgery – report by Karen**

Emailed to members prior to meeting

The Surgery is grateful for the support from the PPG over the last 18 months. Covid is still a concern, and we still need to be very careful. Christine and all volunteers provided invaluable help for the Covid and Flu vaccine appointments. We are aware of disappointment in the community that we are not doing 3<sup>rd</sup> Covid vaccines, but this was a positive decision made to allow us to focus on direct patient care.

We are gradually offering more face-to-face appointments, although not directly publicising this. Patients will always be able to get an appointment for a medically urgent condition on the same day, but routine appointments with a named doctor will now be pushed back to 2-4 rather than 1-2 weeks.

New telephone system: lots of grateful patients, still some unhappy. The message on this will change at the beginning of December.

Notes are being digitised which will free up space and allow the development of a new consulting room with an outside entrance (no timescale for this yet).

Staffing changes: see report. We are looking for an additional Clinical Pharmacist to join the team.

There has been a huge rise in the amount of verbal abuse to the staff, which mostly affects the Reception team. We know people are stressed but this is unacceptable and destructive behaviour, and becomes very hard to deal with when it happens constantly.

Wallingford closed their list at the end of August which has had a huge impact on our practice. We have had to take a large number of patients from Wallingford, many of whom don't want to be registered here. It has taken up lots of time negotiating with the CCG/NHS England, plus registering and seeing new patients. Goring are now registering some patients even though Wallingford is out of their area, and we are still discussing with the CCG/NHS England what is the best way forward.

NHS England and the CCG are aware of a national shortage of pharmacists. Karen has an offer of a meeting with the regional manager of Lloyds tomorrow which is a positive sign, but the Surgery does not have a say over how Lloyds manage the pharmacy.

Flu vaccines: we have given a large number (more than any other year). There was a national delay in the vaccine being sent out. These can't be ordered far in advance due to reimbursement rules. There is a further vaccination clinic for over 65's this week, and the clinic still has lots of slots available. Vaccines are not available for under 65's yet.

Repeat prescriptions: the practice will not accept telephone requests from Dec 1<sup>st</sup>, primarily due to clinical safety due to the volume of phone calls. This will be publicised, and there are still non-online options available (including ringing Chalgrove pharmacy for those who like to order by phone).

Stephen thanked Karen for all her work. We need to look after her as she underpins all the surgery organisation.

## **5. Question and Answer session with Karen Washbourn (Practice Manager) and Dr Stephen Harper**

**Abuse:** Caroline says has been abused twice in the street recently, and wonders if abuse of staff is coming from certain new residents. Karen replied that this is not entirely the case. Maggie thanked the surgery staff for managing to keep their cool under difficult circumstances. The staff have access to support / counselling via generic NHS phone numbers, and the practice are putting a well-being board together. However, no matter how much counselling you can access it still doesn't change the challenge of having people being rude / demanding, so to help improve morale the staff had a bake-off competition. The GP registrar will also be looking into staff-wellbeing. There is a practice policy about how to deal with abusive patients.

**Prescriptions:** Ian is concerned about how this change is being communicated to patients as 1<sup>st</sup> Dec is soon. Everyone who has been ringing for a prescription should have been warned over the phone, and text messages will also go out in the next few days (the Surgery were waiting for this discussion with the PPG prior to sending these out). There is worry from some PPG members that this is a tight timescale, although the PPG are going to help publicise this (posters up in shops as well as article in BB and on Surgery website). There will be information available about alternative ways to order prescriptions. Christine will investigate if Millstream visitors are able to have their prescription requests taken to the Surgery by a volunteer.

**List closure:** Claudia wanted to know why Wallingford can close their list, and at what point do we say we can't take any more patients. The Surgery are in discussion with the CCG and other local practices about whether we can close our list when Wallingford reopen theirs in Feb. However we can't close ours at the same time, and if we did close it then it would have to be to everyone (ie wouldn't be able to take on any Benson residents during this time). The geographical boundary of our practice currently includes Wallingford town area but we want to try and reduce our geographical area if we can. We were able to cope with the numbers of new patients projected in the plan for new housing, but the actual number of houses/patients is higher than these projections.

**Covid vaccines:** no concerns about pregnant women receiving the Covid vaccine. If a patient is concerned she should discuss this with her GP.

**Biggest challenge for the surgery:** lack of applicants for any clinical positions we have advertised.

#### **How can we help?:**

- Please be kind to all staff (administrative and clinical)
- Realise that some changes need to happen and accept these eg new telephone system
- Recognise what we can and can't help with eg no control over pharmacy
- Recognise who is the appropriate person for your needs – Karen to work with a group (Christine, Yvonne, Claudia, Caroline, Stephanie) to see how best to publicise this
- Understand about appointment times – routine appointments with a named doctor will take 2-4 weeks rather than 1-2 weeks, although medically urgent conditions will still be seen on the same day
- Encourage volunteers to help in the local volunteer service eg to drive patients to appointments
- Set up sessions for NHS App support
- Spread the word about the pressures the Surgery is under.

#### **AOB**

Date of next meeting: to be sent by email

Thanks to Stephen and Karen and all the other practice staff – for all the work you do and for continuing to support our meetings.

Meeting closed: 9.09pm