

CENTRAL SURGERY
Virtual meeting via Zoom
3rd March 2021

Present: Jenny Young, Verina Pettigrew, Valerie Simmons, Joy Das, Janet Search, Sally Ruddy, Liz Scott, Dr Kearns, Heather Riches, Olivia Purdie, Maxine Tilley

| | | Action |
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| 1 | Apologies for Absence: Dave Manser | |
| 2 | Minutes of 3rd February for Accuracy: No amendments | |
| 3 | Response from Liz to questions: <ul style="list-style-type: none"> • Medication reviews are limited at the moment. The surgery has been asked by secondary care to only send urgent blood test requests to limit patient footfall into the hospital buildings. Only medication reviews which do not require a prior blood test are being completed. This decision may be reviewed on 8th March. • NHS111 First: There has been no detrimental effect on the surgery but it has not reduced the enquiries into the surgery, so is having very little impact. Very few appointments are being booked through 111. Dr Kearns said that there may be an audit of NHS111 work. • Easing of lockdown: The practice feels that it is too early to be planning for this and are waiting to see if NHS England produces any information or guidelines. Dr Kearns is hoping to reopen carefully as Covid cases reduce further, but it will be a challenge. There have been no new cases in Sawbridgeworth over the past week so more patients are being invited in for face-to-face appointments after triage. | |
| 4 | Partners Meeting: The pandemic will continue to have an impact on routine health care and some catch up work will be needed. The Practice is still doing investigation requests for possible cancer cases and is working on getting waiting lists up to date. In the surgery, they have begun holding vasectomy clinics, eye checks for diabetics and aortic aneurism checks. Respiratory patients are still being seen at Herts and Essex Hospital. Staff are now returning to the surgery after working from home. There is now a male staff member doing 'Meet and Greet' at the front door 3xweekly to match the busiest times. It is working well and the rudeness at the front door has eased. The Practice has a clinical budget which is spread across all disciplines. A couple of doctors have expressed an interest in joining the Practice to create an additional 6 sessions per week. Interviews will be held in the next few weeks with a view to the applicants becoming partners to ensure long-term commitment. Dr Portelly is retiring and Dr Kearns will be reducing by one session a week. It is a busy time for the Partners with financial, business and operational management and the vaccination programme. There have been virtually no flu cases or seasonal conditions but a large increase in mental health consultations. Dr Kearns hoped that there would be an ongoing effect from the learned behaviour during the pandemic. It has been time consuming dealing with complaints. | |

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| 5 | <p>Website Update:</p> <p>The new website is now live and is much improved. Liz has received the PPG information sent by Jenny and intends to try and put it all together in one place under a new 'tile'.</p> <p>Jenny has written the Carers' information but needs one of the three carer contacts at the surgery to send it to. Liz will send Jenny the details.</p> | <p>LS</p> <p>LS/JY</p> |
| 6 | <p>Covid Vaccination Update:</p> <p>The vaccination programme has gone well and Central Surgery is ahead of other surgeries in the groups. The Primary Care Network (PCN) is contacting patients to attend for their second vaccination and April is sorting out the ones who the PCN cannot contact. The second appointment process at the surgery became disjointed after the change of advice from Government to a 12week time delay.</p> <p>Those who booked through the NHS website have already been given the second appointment.</p> <p>Patients with a learning disability are being invited into the surgery for their vaccination and may have their annual health check at the same time.</p> <p>The clinically vulnerable, aged 16-64, are now being invited for their vaccinations and Dr Kearns said that they are currently working with the patients in their 40's.</p> <p>Informal carers will be contacted centrally as not everyone is entitled to be a priority.</p> <p>Patients over 60 can apply for their vaccination directly on the NHS website.</p> | |
| 7 | <p>eConsult Usage:</p> <p>The figures have gone up for February with 404 contacts. Liz has yet to analyse the data. The system is still working well, partly due to the good use of locums funded from Winter Pressure money. There is still good capacity within the Practice.</p> | LS |
| 8 | <p>Action Plan:</p> <p>Yet to be completed due to time restraints.</p> | LS |
| 9 | <p>External Meetings:</p> <ul style="list-style-type: none"> • Learning Disability Vaccinations: Jenny had circulated information prior to the meeting with overheads and a Q&A session. There still seems to be some confusion about this group. • Cares in Herts Information: Jenny had circulated an excellent presentation on the Family Liaison Line at Watford General Hospital. There is a possibility that it may be rolled out to the Lister Hospital. Jenny was unsure whether PAH were considering it. • Patient Network Quality Meeting: Maxine and Jenny gave verbal feedback on the last meeting. Their notes and the official minutes will be circulated once completed. | MT/JY |
| 10 | <p>Younger Membership:</p> <p>Sally has spoken to a local headmistress about applying to join the group. Verina suggested that a separate letter about the PPG could be sent out with the information for patients reaching 16. Olivia offered to write a draft.</p> <p>Dr Kearns thought that some Leventhorpe pupils in years 11-13 may be interested in doing a 6month placement with the PPG as part of community service. It was suggested that a visit to Leventhorpe to talk to the 6th form again might be useful when restrictions allow. Olivia offered to go with Jenny.</p> <p>Heather said that one of the Sawbridgeworth councillors works at Leventhorpe and may be a useful contact. She will send the details to Jenny.</p> <p>Olivia suggested a social media post may be useful and more attractive if the opportunity was for a limited time.</p> | <p>OP</p> <p>OP/JY</p> <p>HR</p> |

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| 11 | <p>Patient Group News and Media:</p> <p>After the last meeting Liz spoke to Valerie and asked her to do some screen shots for the new website to include in the Newsletter.</p> <p>The High Wych Link published the Newsletter in full again. Church and Town will no longer be published and the information will be put on a two-page spread in The Flyer.</p> <p>Valerie had circulated the draft April Newsletter. April had asked Valerie to add a piece about the on-going problems outside the Surgery and to put it on Facebook. Valerie offered to speak to a neighbour who works at Leventhorpe School with a view to Year Heads addressing the issue with the students. Olivia said that Leventhorpe had already sent a letter home to parents about this.</p> <p>Valerie will add the news of the reducing Covid infection rates. She thanked Joy for her superb vaccination video.</p> <p>The Google link to the surgery website has a picture of the old entrance. Dr Kearns said that they have some good professional photographs of the new building which could be used. Liz agreed to talk to Dr Remedios about getting this changed with Google.</p> <p>April had sent out a new holding message for the phone which all members agreed was good.</p> | <p>VS</p> <p>VS</p> <p>LS</p> |
| 12 | <p>Password for PPG email Account:</p> <p>Liz said that our account had been deleted as it had not been used for a year. There is now an NHS shared email box for us which should not need a password but Liz needs to check how to set it up. It should enable us to arrange Zoom meetings through the NHS.</p> | LS |
| 13 | <p>Actions Not Met:</p> <ul style="list-style-type: none"> • Action Plan • Analysis of eConsult figures. | <p>LS</p> <p>LS</p> |
| 14 | <p>Any Other Business:</p> <ul style="list-style-type: none"> • Les had not responded to Jenny or attended the meeting so she will contact him. • Ear Wax Removal: Maxine raised the issue having been questioned by a couple of patients who had prolific ear wax which had a detrimental effect on their hearing. Dr Kearns said that micro suction is the only safe method and it is not currently a commissioned service. Also, the surgery has no-one trained and no appropriate equipment. Dr Kearns acknowledged it was a problem and admitted that there is no current solution, other than patients paying privately so needed to be discussed in clinical terms at locality level. • Olivia questioned how patients could sign up for online access if they were not proficient in technology to scan/upload photo ID. Liz said that patients could use the NHS App, surgery website or could still bring their ID into the surgery. Valerie will add this information into the newsletter. • Primary Care Network locality meeting: It was agreed that Jenny and Maxine would continue to represent the surgery at these meetings. | <p>JY</p> <p>VS</p> |
| 15 | Date of Next Meeting: 31st March at 6.00pm | |