

## **HIGH FIELD SURGERY – PATIENT PARTICIPATION GROUP**

Minutes of the Patient Participation Group held on Tuesday 12<sup>th</sup> January 2021 commencing at 11.00am. Meeting held by Video conference on Microsoft Teams.

**Present:** Chair - (GBe).  
(GBurns), (DP), (BA), (CA), (LB), (LW), (LR)

Practice Manager - Mike Holmes (MH)  
GP – Dr Helen Poulter (HP)  
Practice Secretary – Kayleigh Burton (KB)

### **1. Apologies and Introduction**

Apologies: None received

MH opened the meeting and explained how to use Teams as this is the first meeting on Teams.

MH reviewed the minutes from the last meeting, all 3 actions were on today's agenda.

GBe outlined the process for him standing down as chair and a replacement being appointed. From the last meeting we had one nomination for Chair, GBurns. It was proposed he take over as Chair and this was approved unanimously by all attendees.

GBe will continue a period of transition with GBurns.

### **2. Surgery Update**

#### **Flu**

- MH explained that the flu season is underway, still vaccinating 50-64's. LW asked how we informed the patients who were eligible for the vaccine; MH explained that we sent a text and or a letter to the cohort. GBurns asked more details about who was invited; MH explained that existing private vaccinations were excluded. LW mentioned that it is voluntary to inform GP surgery. Take up for this cohort is around 35% with 10% declined and the remainder not responding.

#### **COVID**

- MH moved on to explain COVID roll out. This is a gradual roll out, some patients have had their vaccine, however our PCN has not yet received our delivery yet. High Field Surgery delivery is due Friday, we are running our first clinic on Saturday. Hopefully having another delivery next week as well. MH explained the difficulties of the publicity around the COVID vaccine as patient's are being told they will be called in due course but patients expect their vaccines now.
- We still have no confirmation of how many vaccines we are getting in this first delivery – may be receiving more.
- MH explained how the COVID model works, we are unable to order deliveries, we are told what our PCN will receive and when. This causes a delay. If we can order in due course we can run very well and very quickly
- The COVID vaccine will be over 80's first and will then roll out to over 75's
- GBe asked what help we may require to run the COVID clinic. Do we need any additional support? MH explained that we are giving Oxford vaccine at HFS, clinic will run from 8:30am onwards, MH has explained that we do not know if the clinic will be extended. Marshalling assistance is required.
- LW volunteered Saturday clinic, LW asked if the vaccine is random, HP explained that we do not know what vaccines we get or when, patients will be given what we are given

- CA volunteered, LR volunteered to help Sat clinic, GB also offered to help.
- BA asked about contingency plans for bad weather. GBe raised the issue of helping elders; MH explained that this would be directing not physically helping. MH stated that we have booked the clinics in a specific way that there should not be a lot of people waiting around due to social distancing and they should be in and out.
- MH stated that we are having two deliveries of Pfizer vaccines next week – this has to be given next week at IWS – unsure as to plans yet as we have to liaise with IWS

### 3. Update from Sub Group

- LR explained that she was looking for non-clinical support for patients regarding their mental health and wellbeing. She explained that the website she used was not easy to navigate
- MH has updated our website and HFS discovered that the links are pulled in from NHS choices and these were broken. This affects many surgeries in the city and has been raised nationally.
- HFS has added a news item to the front page as suggested by LR on behalf of the group. LR asked for feedback in due course.

GBe raised that 50% surgeries websites do not work and it was a good find by LR

- GBe mentioned the 2<sup>nd</sup> item to discuss was the newsletter. GBe contacted the CCG and had a disappointing reply they have a leaflet and not a newsletter template. LR has looked at a variety of newsletters by other surgeries, some were friendly for the patient but others were less friendly. Some had lots of signposting.
- MH surgery views are that the Newsletter should be from PPG rather than the surgery, patient perspective would be beneficial. Tone should be professional and friendly but not too chatty. The newsletter should cover signposting etc. Frequency should be 6 monthly as anything above this would be difficult to fill. Distribution would be on the website, hard copies could be in waiting rooms, pharmacies, community areas where patients will see the newsletter. Not to be posted as a lot of patients are not interested in the surgery. Also distributed on social media through group contacts eg BA's network
- GBe does not want to rush the newsletter but we need to get the basis together for the newsletter. LR – The purpose of the newsletter – an area in it that has the comings and goings at the surgery, local initiatives should be included, an update on national issues would be useful.
- Is the newsletter from the GP or the group – LR not sure how patient group would feel about this. GBe's view thinks it would be better from the practice with input.
- LB mentions that clinical issues should come from the practice but if it is patient orientated then would be good from PPG – needs to be balanced.
- GBe relayed GBurns comment – GBurns likes joint venture, PPG to take the lead but get input from HFS –Need commitment from the group.
- LR frequency should be 6 monthly – PPG agreed.
- GBe advised to store any further questions regarding newsletter LR agreed GBurns raised a point that if things are carried over we need to get a focal date and launch date – suggested Autumn.

**Action:** Sub Group will work up the next steps, potentially some drafts for comparison

#### 4. AOB

- GBurns - noting the performance of HFS in the annual NHS Survey – MH explains that the patients are picked at random for survey, our metrics are very favourable compared to local and national averages
- GBe raised that our PPG gives a balanced opinion representing all the patients not individual issues
- GBe confirmed upcoming meeting dates
  - Full Meetings
    - 16<sup>th</sup> March 2021 at 11:00am on Teams, all attendees agreed the times
    - 18<sup>th</sup> May 2021 at 11:00 am on Teams (times remain under review)
  - Sub Group Meeting
    - 16<sup>th</sup> February 2021 10:00am email will be sent out with invite
    - 13<sup>th</sup> April 2021 10:00am
  - GBe thanked everyone for their support and for attending
  - MH Thanked GBe for chairing the PPG

The meeting closed at 12.28