

Tollerton Surgery PPG Annual General Meeting Draft Minutes
Tuesday, 4th June 2024

PRESENT: Tim Key (TK) (Chair), Sharon Oliver (SO) (Vice Chair), Mike Tranter (MT), Lynn Ridley (LR) (Hon. Sec.), , Sarah Utting (SU), Fiona Howell (FH), Peter Bond (PB), Murray Ferris (MF), Ken Hinds (KH)

APOLOGIES FOR ABSENCE: Apologies were received from Micky Johnson (MJ).

Annual General Meeting

Report from Chairman

It was noted that the PPG was initiated in 2012. The last AGM meeting was July 2022. TK was pleased that the group had continued to meet regularly over the past 12 years. During this time there have been changes within the practice, including the practice relocation.

The challenges for the group include communicating with a widely dispersed rural community and attempting to communicate effectively with patients who are not connected to social media or the internet.

TK hoped that the group has been a support to the practice.

Election of Chairman, Vice Chairman and Hon. Secretary

TK wishes to step down as Chairman. SO was nominated to take on the role of Chairman, seconded by MF. SO was happy to take on the role.

TK was nominated by MT and LR to be Vice Chairman and accepted.

LR had agreed at the PPG meeting on 12th March 2024 to take over from MF as Hon. Secretary.

The PPG thanked TK and MF for their contribution to date. Both wish to continue to support the group.

KH thought that MJ would no longer wish to attend the PPG meetings. There was an expression of thanks for MJ's contribution.

It was agreed that we should aim to extend an invitation out for more members.

Tollerton Surgery PPG Meeting Draft Minutes
Tuesday, 4th June 2024

PRESENT: Tim Key (TK) (Chair), Sharon Oliver (SO) (Vice Chair), Mike Tranter (MT), Lynn Ridley (LR) (Hon. Sec.), Sarah Utting (SU), Fiona Howell (FH), Peter Bond (PB), Murray Ferris (MF), Ken Hinds (KH).

- 1) **APOLOGIES FOR ABSENCE:** Apologies were received from Micky Johnson (MJ)
- 2) **MINUTES OF MEETING:** Minutes of meeting on 12th March 2024 were agreed as a true record by all present.
- 3) **Matters Arising**
- 4) **Practice Manager's Report**

Premises

The cabin (named Cedar Lodge) is in place. A tour was planned after the meeting. Desks have been installed today. IT engineers are arranged to set up computers on 5th June. We will then just be waiting for the couches, but the rooms may start to be used for sessions that do not require a couch.

Patients are likely to have to wait in the current waiting room or outside (weather permitting). The surgery are looking at options for calling patients through to the cabin.

Work on the garden commenced last week. Completion expected to take two weeks. The pergola is due to be put in place on 5th June.

Staffing

Recent staffing news:-

Dr Ellie Cullen, GP Registrar commenced in February as reported at our last meeting.

Dr Peter Mason, Foundation doctor commenced at the beginning of April.

There is a plan to increase the staffing to 4 part time placement doctors in the Autumn (October). SU told the group that Registrars have more clinical experience and need less direct supervision than the Foundation doctors who require direct supervision throughout their training. This obviously impacts on the GP's workload since they have to support and supervise the trainee doctors.

The nursing department has had quite a change recently and has been difficult to recruit.

HCA Molly left at the beginning of May, she has been given a place to study midwifery. Practice Nurse Emily left mid-May to commence a role as an occupational health nurse.

The surgery has successfully recruited an experienced HCA, Elsa, who is starting tomorrow. Elsa has successfully gained a place to study her nursing degree starting in September so will be leaving at the end of August.

Nurse Tracy is to commence beginning of July. Tracy is coming to the surgery from James Cooke Hospital. She will need to be trained in the Primary Care Specialties such as

diabetes, smear tests, respiratory medicine etc. The in depth specialist training runs over several months.

HCA Sally is to commence end of June.

Laura who left in January has returned to the practice and will be managing the nursing team. The practice are delighted to have Laura back with the team.

SHaR PCN

Urgent Care Service (UCS) continues to develop with additional GPs. Also Paediatric ANP Felicity has been with SHaR for nearly 6 months, she is now holding routine clinics including covering newborn parental anxieties, digestive issues, continence, weight concerns and eczema. She is also experienced in Mental Health, neurodiversity and depression/anxiety in children.

Easingwold Health Centre – work has started at the health centre but establishing the UCS at Easingwold has been delayed to the end of July. Once the UCS is in the health centre the health kiosk will be put in place.

IV Zoledronate (Zoledronic Acid) Project – A bid has been approved and SHaR has received funding for one year. The budget will allow 32 patients to receive intravenous treatment with Zoledronate in the surgery. This is a drug treatment for osteoporosis which can help to make bones stronger. It is a once a year intravenous infusion, at present administered in the hospital. The project funds practices to be trained to administer the injection in the surgery. The team at the hospital will still have overall governance for looking after the patients.

Comprehensive Geriatric Assessment Clinics – this is a multi-disciplinary team which GPs refer into to improve patient wellbeing and independence as well as reduce risks of falls and hospitalisation. The clinical team includes a GP, ANP, physiotherapist, occupational therapist and social prescriber. Clinics are held at St Monicas hospital in Easingwold.

Spring Covid Vaccinations

Citywide Health held Spring booster clinics at the Galtres Centre on 2nd, 9th and 16th May. The surgery receives a patient notification when a patient has received a vaccination. Reports show 250 patients were vaccinated out of an eligible 482 patients (52%).

MT asked how people could find out about the vaccination clinics being held locally at the Galtres Centre. The clinics were not registered on the national booking service and the only way to find out about them appeared to be directly through Citywide Health. Again, it is reliant on people having some IT access or someone who is able to help.

LR commented that none of the centres offering covid vaccines through the national booking service were easily accessible for elderly people in Easingwold and District who might be unable to drive and are reliant on public transport.

Tollerton Parish Emergency Community Plan

Tollerton Parish Council have put a policy in place for an emergency action plan. There was some discussion at the PPG about how the community identify vulnerable people who might need assistance, for example, access to bottled water if the water supplies were interrupted.

There is a secure box in the waiting room for anyone resident in Tollerton Parish to post their details to be put on the vulnerable contact group. There is also a box at the Post Office. From the discussion it was not very clear how the plan works. MF suggested that it might be worth the Parish Council putting some information into the newsletter.

Junior doctors strike

Strike action is planned for Thursday 27th June 7am ending 7 am Tuesday 2nd July. This may affect the junior doctors at the surgery.

GP contractors in dispute with NHS England

The BMA is holding a non-statutory ballot for GP contractors in dispute with NHS England rejecting the contract changes given in March 2024. Taking action to save General Practice to protect practices and patients' care.

Background: Since 2015:

- 1000 GP practices have gone
- 2,000 fewer GPs
- 6,000,000 more patients registered with practices across England
- For 2024/25 contract to match 2019/2020 funding, it would need an 8.7% uplift, not 1.9%.

This does not compete with the cost of living increases. The BMA are now wanting to make a stand as part of a co-ordinated campaign . The practices will be given information to share with patients, written in a patient friendly format. The PPG may be called upon to help communicate this to patients.

5) Terms of reference

SO shared the constitution of Tollerton Surgery PPG. It was not clear when this was written. It was agreed that the group was not making formal decisions so it was not necessary to specify a quoracy.

Currently agendas and notes of the meetings are not displayed in the practice premises or on the website. It was agreed that minutes would be displayed on the notice board. To bring forward to the next meeting for further discussion.

6) Urgent Care Service

The group asked how the urgent care service was working. SU and FH reported that the number of slots is limited and most are taken up by mid-morning. The Duty Doctor or receptionist will select the patients that need to be referred to the UCS.

Feedback from patients has been positive although some have asked about being seen more locally. The service is still being run from Terrington Surgery at present.

Reception staff are now using a signposting tool to decide if a patient is urgent or otherwise and the duty doctor is also involved with this. The UCS has been involved with the software development.

The revised poster to inform patients about the service was presented at the meeting. It was agreed that, given the limitations of the service and the number of available slots, it would be

better that the practice manage the work internally. We would not wish to falsely influence patients expectations of the service.

7) Feedback from the ICB Patient Engagement Network

SO attended the meeting remotely and shared the link to the meeting if anyone wished to listen. There were four areas of focus which were discussed and considered would make the biggest difference to patient care:

Reducing harm from cancer,
Cutting cardiovascular disease,
Living with frailty
Enabling mental health and resilience

SO reported that Mark Williams is observing practice and discussing work with PPG's to find out what happens locally. There was some discussion about the PPG or the ICB being a conduit for feedback. It is not clear how we might link up with other PPG's. There may be an opportunity to look at this within the PCN.

NHS 111 are looking at their service and reviewing how it is being used. The report that 53% of patients are satisfied with the NHS 111 service. They are talking about publishing more information on how to use the NHS 111 service.

The patient engagement network are aiming to try to capture feedback on their experience of using services from members of the public. It was reported that patients are concerned about how their data is shared and used.

SO is planning to continue with her link into the network meetings.

8) Tennis Court Lane access to the surgery

This has not progressed. There have been objections from local residents who are concerned that people may start parking down Tennis Court Lane to access the surgery or the housing estate if there is a pedestrian access. It was thought that having access and creating a short cut might encourage more patients to walk to the surgery.

MF to take forward to the Parish Council meeting again but creating access through the hedge does not appear to be an option at present. To remove from the agenda.

9) Covid vaccine access to services and uptake

Already covered in the practice managers' report

10) PPG Members items for discussion

LR asked about access to GP services for people visiting the area. SU said that they should be able to access GP services at the surgery as a temporary resident or use NHS 111.

LR acknowledged the problems with staffing but raised concerns relating to the difficulty for some patients in getting blood tests done locally and noted how busy services are at the Vanguard and hospital blood taking. She asked if there may be an opportunity to get blood tests done in Easingwold Health Centre when the Urgent Care Services begin working there. SU said this is not possible at present but is being considered..

No further business was raised.

Proposed date of next meeting: Tuesday, 1st October at 4.00 p.m. in the Surgery