

Minutes of PPG Meeting 30 September 2021

Present

Pauline Coulthard (PC)	Daphne Tibbles (DT)	Sue Sullivan (SS)
Elisabeth Clarke (EC)	Linda McComie (LM)	Sandra Reed (SR)
Dr S Maddipati GP (DrM)	Nicky Wright (NW) DPM/IT Lead	

Apologies: Shobhna Dave, Beverley Tavares, David O'Donnell

	ITEM	ACTIONS
1.	The Minutes of the July PPG meeting were agreed. Today's meeting was both via Zoom and at Hilltops.	
2.	<u>News from the Practice</u>	
2.1	The routine CQC inspection which took place at Hilltops in July/August resulted in a grading of Good. The full CQC report is available on the Hilltops website via Practice Information in the left hand menu on the Homepage.	
2.2	<u>Staff changes</u> : Healthcare Team issues have arisen following the departure of Lesley, the Diabetes Nurse. Kerry Cooper, Registered Adult Nurse, will be leaving the Practice on 07 October and Karen Day, Practice Nurse, will not be returning from maternity leave.	PPG
2.3	The diabetes clinic will be covered by Dr Maddipati and Dr Field in the short term and one new nurse has been recruited to join the Healthcare Team while also undergoing one further year of retraining.	
2.4	It was acknowledged that there is currently an MK wide shortage of nursing staff and Hilltops is one of the many MK practices experiencing the additional pressures that this shortage is causing.	
2.5	<u>Flu Vaccinations</u> : The seasonal flu vaccination clinic is now in place, with vaccinations being carried out at Whitehouse Medical Centre. Whilst the Whitehouse Medical Centre is being used as the main hub for the delivery of the flu vaccine to patients, it was agreed that emphasis should be given to the fact that the flu vaccination programme is a PCN responsibility and not the responsibility of Whitehouse MC alone. Patients should therefore contact their own surgery within the Watling St Network (our PCN) with any vaccination queries, and not Whitehouse MC.	

<p>4.</p> <p>4.1</p> <p>4.2</p> <p>4.3</p>	<p><u>Update on PPG / Network News</u></p> <p>SR advised that the PPG registration link on the website isn't functional. NW explained that it needs to link to a specific route such as a PPG email address, which the PPG currently does not have. The alternative would be a link to Hilltops admin team which would result in messages intended for the PPG going to Hilltops' Dashboard, the inbox where all incoming messages arrive for assessment and onward direction to the appropriate clinician/department.</p> <p>SR acknowledged that having incoming PPG messages arriving in this way would be unworkable and will arrange for the creation of a dedicated gmail account as soon as possible pending which NW will remove the current link.</p> <p>A Network meeting was held via Zoom on 12 August 2021. Meeting notes will shortly be added to the PPG section of Hilltops website alongside other updates that are pending.</p> <p>With covid restrictions easing and the ongoing success of the covid vaccination programme, the presence of PPG representatives talking to patients in the waiting area was discussed. It was agreed that, as there are now fewer patients in the waiting area at any one time, shorter and more frequent PPG visits would be effective in sharing relevant Hilltops information and updates with patients.</p>	<p>SR/NW</p> <p>NW</p> <p>SR</p>
<p>5.</p> <p>5.1</p> <p>5.2</p> <p>5.3</p>	<p>Treasurer's Report</p> <p>PC reported that, as previously, the PPG has £47 in its bank account and £45 in petty cash, although PC will shortly be checking petty cash amounts currently held at Hilltops on behalf of the PPG.</p> <p>A recent check indicated that book sales are starting to pick up.</p> <p>As previously, it is hoped that the anticipated number of books and DVDs being sold will provide a boost to donations and thereby an increase in PPG income as well as funds available for charity donation now that patients are allowed back in the surgery waiting area.</p> <p>Stocks of books have gone slightly down but can now be restocked. LM asked if the selection of books on sale in the waiting area includes cookery. This being confirmed and, at the last check, with only four available, LC's offer to donate her spare cookery books for PPG sales was gladly accepted.</p>	<p>PC</p> <p>PPG</p>

6.	Any Other Business	
6.1	The question has been raised as to what impact, if any, the new system of working has had on DNAs. DrM and NW advised that there are no specific figures currently available but their impression is that numbers are no worse and no better with some DNAs now occurring as unanswered telephone consultation appointments. NW agreed to look into this question.	NW
6.2	DrM advised that Hilltops is working on narrowing the difference between given telephone consultation appointment times and the actual time of the call being made.	
6.3	<p>As these are consultations by appointment regardless of whether they be by telephone or face-to-face at the surgery, SR asked why they cannot be treated as such on a surgery appointments list.</p> <p>Dr M agreed that both are acknowledged as appointments and the time difference is improving. This combination of appointment types has resulted in up to 30 consultations per day being achieved per clinician. DrM pointed out that telephone consultations do, however, tend to take longer because, in the absence of patients' visible body language, clinicians need to ask more questions. DrM emphasised that if, even after these further questions, patients' issues remain unclear, they will be asked to come to the surgery for a face-to-face consultation.</p>	
6.4	In order to convey to patients the day-to-day working of clinicians at Hilltops and help dispel any misconceptions as to the management of patients' care, DrM suggested that he be shadowed by a PPG member for a day and findings be shared with patients. This was agreed and will shortly be arranged.	DrM/PPG
6.5	The length of cover provided by this season's current flu vaccine was discussed, following concerns raised that patients receiving their vaccine early in the season would become less effectively protected towards the end of the season.	

6.6	<p>Dr M explained that each season's flu vaccine, with its season-specific combination of vaccine for targeted viruses, is expected to provide long-term, possibly indefinite, protection from those specific strains. The only reason for the annual flu vaccination programme is to provide protection from the new strains of the flu virus that regularly emerge, as is the habit of viruses and is being seen in covid.</p>	
6.7	<p>The re-emergence of previous strains of the flu virus was discussed, in which case it is possible that those who had either contracted that strain in the past or received protection from it via vaccination would be immune. Whilst this is a very rare occurrence, an example has occurred when a strain of flu in the 70s (possibly the arrival of H1N1) re-emerged in the 90s but those who contracted the 70s strain remained unscathed during re-emergence in the 1995/6 season.</p>	
6.8	<p>A question was raised about procedure following the on-line submission of a consultation request. Problems have been experienced when patients receive a text message in response to submitting such a request which advises the next step. It appears that patients may be replying direct to the text message i.e. replying by text. It was acknowledged that, whilst it is possible that a reply by text can be requested, the facility to accept a text reply needs to be implemented by the clinician making that request, but it sometimes happens that this implementation facility is subsequently overlooked, hence the reply path will remain blocked.</p>	
6.9	<p>Most consultation requests result in a 'phone call for triage in order to ensure the patient is directed to the appropriate clinician and whether the consultation needs to be face-to-face or by 'phone. Having made the assessment following triage, a further message will be sent advising how and when the consultation will take place. Any queries the patient may have in the meantime should be made via reception pending the update of the website whereby patients can message on line.</p>	

<p>6.10</p> <p>6.11</p> <p>6.12</p> <p>6.13</p>	<p>SR asked how patients arrange to see the Resident Pharmacist, Reena Raithath, since the website currently directs patients to local pharmacies for advice.</p> <p>Dr M explained that Reena’s present role within Hilltops is based on monitoring prescribed medications, for example ensuring that all medications prescribed to Hilltops patients are regularly reviewed, are followed up, do not have contraindications, etc. Appointments are therefore not being made with Reena at the present time</p> <p>Veteran Accredited Status</p> <p>SR asked if the Veteran Accredited Status logo could be moved to a more prominent position on the Hilltops homepage, from its current placing at the foot of the left hand menu where it cannot be seen unless visitors to the website scroll down the page.</p> <p>It was suggested that the logo be placed as closely as possible to the Hilltops Medical Centre title at the top of the homepage. NW agreed to contact the website designers to ask if this can be done.</p> <p>Following her presentation at July’s PPG meeting, Johanna Hrycak, Armed Forces Covenant Project Manager, is preparing information packs that can be distributed to Hilltops Veteran patients. Johanna has, in the meantime, provided DrM with links to podcasts that contain guidance which can be utilised by GPs during consultations with Veterans.</p> <p>Numbers of Armed Forces Veterans registering at Hilltops continue to slowly increase.</p>	<p>NW</p>
	<p>Next Meeting</p> <p>The meeting ended with thanks to all those attending.</p> <p>Next meeting is scheduled for Thursday 02 December at 1300hrs and, in response to requests, will be held via Zoom.</p>	