



Minutes of Danebridge PPG Meeting

Date: 19 November 2020

Venue: Virtual meeting via Zoom 4pm – 5.30pm

Present: Mandy Skelding-Jones, Gilly Davis, Monica Foster, Valerie Mais, Russell Smith, Mo Morron, Norma Broadhurst, Sheila Bowker, Les James, Ellie Thomas, Lee Brown.

Apologies: Beth Hanson, Alex Roof, Tara Micklewright, Imogen Hollingworth

1. INTRODUCTION

Mandy thanked people for joining the meeting.

2. MINUTES AND ACTION LOG UPDATE

The minutes for the October meeting and the Special Meeting were then approved. The Action Log was reviewed.

3. PATIENT FEEDBACK

- i. Norma updated PPG on the Leg Club. The pandemic had made seeking volunteers to take on the running of the Club difficult. She had sought advice from the Foundation on how to take matters forward so as to retain resources in the community. On this basis the current management structures will continue until it is possible to carry out a more comprehensive search for new leadership.
- ii. A patient with a skin condition was surprised that a prescription was issued on the basis of a photograph. Mandy and Gilly explained the reasons for this approach and the processes in place to quality assure the outcome.
- iii. Some issues around registering and using the NHS App for repeat prescriptions were discussed. Gilly told PPG that Patient Access was still useable.
- iv. On the issue of volume of calls, Gilly said they had fallen during the first lockdown but had recovered.
- v. There was praise for the Practice's response time in dealing with a condition identified from a blood test.
- vi. Gilly reported that a letter praising the quality of a new GPs home visit had been received.
- vii. Mo has contacted Sir John Deans College to start the process of identifying potential members for PPG.

4. PRACTICE UPDATE

- i. COVID 19 – Mandy reported that a 'Hot Hub' had been set up at Leighton for patients needing clinical treatment. There was also a 'Virtual Ward' in place for

those who can be looked after at home. It utilises a statistical monitor of temperature. On the basis of the returns the patient can be referred to hospital.

- ii. PPG members asked for an update on COVID 19 vaccine situation. Mandy reported that logistical discussions were taking place at PCN level. Practices had been asked to identify safe and accessible locations for vaccinations and local access. The Northwich practices had identified Kingsmead as a potential designated site for vaccinations. This had been accepted by CCG and put forward to NHS England for Licensing. If accepted it will be used on a rolling programme with each practice funding staff on a designated day.

The priority order for vaccination at this stage of development of planning is, first, people in care homes and their carers; then the over 80s; then 75+ and health and social care staff; then the over 70s followed by the over 65s and so on. The aim is to focus on the at risk groups.

To help release staff to manage and deliver the vaccination process NHS England will pause other deliverables and release funds to allow additional staff to be taken on to increase capacity. The practices will also be encouraged to utilise volunteers.

On timing, Mandy said the current view was that mass vaccination would not take place until the end of Winter. The vaccines still needed to be approved by regulatory bodies and then mass produced and the infrastructure put in place for delivery. It is not yet known which vaccine will be used.

- iii. Flu Clinics have gone very well. Additional vaccines have been obtained for different cohorts and clinics run. GPs are encouraging those who have not been vaccinated to do so. Gilly said that update was over 75% and for vulnerable groups between 90 – 95%.
- iv. Staffing Developments
 - a. Dr Mohammed had joined the Practice. Further GP recruitment was needed to cover maternity leave and a resignation. Locums were being used to cover.
 - b. Three new PSCs have started. There have been two internal promotions of PSC to Secretariat, and a Secretary is training to become a Health Care Assistant.
 - c. A full time Nurse will start in January 2021.
 - d. A Finance Apprenticeship is being restructured to attract candidates with the right skills.
- v. Sandiway Surgery

Mandy had circulated the letter from the Chair of the Primary Care Commissioning Committee to Danebridge Partners to PPG for information. She highlighted the request the Committee had made to the Practice to undertake a number of actions. Mandy said that the Practice intended to set up a number of Focus Groups before Christmas. The Focus Groups would comprise of Dr Mullen, Mandy, PPG members

who were available to attend, 'Save our Surgery' nominees, and others from the community. Russell said this timing would be suitable for SOS.

Mo said she had followed the Commissioning meeting and found it very helpful in improving her understanding of the issues. Dr Mullen's input had been powerful. He had made clear it was an application to close Sandiway not a business case. The concern was clinical outcomes. The CQG report had been a catalyst not a cause. She now recognised that the Partnership model for supplying GP services meant financial risk for those involved and these risks could destabilise the delivery of services to the totality of patients.

She reported that all the clinicians present agreed the cross site management and staffing was difficult in the current environment. This was debated.

Russell asked whether the interest in taking on Sandiway by another practice had been taken forward. Mandy said discussions had taken place but the interest had not been sustained.

Val asked if the main concern is financial viability and risks to partners. Mandy said this was an issue but not the main driver. She said there were clinical limitations at Sandiway. The pandemic and different ways of working had shown that moving between sites led to inefficiencies. Reducing sites enabled clinicians to develop better team working and support. It was suggested that the social cost of closure needed to be considered. Patients would need to involuntarily bear the cost of additional travel.

Norma noted that CQC had been surprised that the responses to their report was a proposal to close Sandiway. Why did the Practice not utilise the grants available? Mandy outlined the structure of the grant scheme, the partners would need to raise one third of the sum sought, and then payback the other two-thirds by having funds taken at source.

Norma believed communication gaps were a key thread that had run through the process. At the Open Evenings the PPG members in attendance had not felt they knew the full picture, or what the new model of care is. This meant they could not respond to many of the queries they faced, and this led to an all round frustration. Monica and Mo supported this.

Mo asked what work the Practice had done to respond to the details of the protocols and plans for repeat prescription, sample collection, appointments, meds monitoring etc. Mandy outlined some of the thinking that had been done.

Monica drew attention to the request that a future deliver model with an impact analysis on 'Sandiway activity' be made clear. PPG members needed to know what this would look like. It was also suggested that evidence of the effectiveness in terms of medical outcomes of the new ways of working was needed. Mandy said that the CCG needed to describe and evaluate a new delivery model.

Mo asked whether the Practice intended to carry out another survey of patients' views on the proposal for Sandiway now that the new information was available and the impact of the pandemic on the delivery model for general practice was becoming clear. Mandy said the survey had cost £10,000 and it was not practical to repeat it.

Norma reminded PPG that the original timetable for the consulting on the proposal had been criticised. We seemed to be repeating it. Was this wise as we did not want to be criticised for not giving sufficient time for meaningful consultation an engagement? Mandy replied that the PCN believed the attention that had been given to the proposal meant there was a momentum that should be built on.

On timescales for Focus Groups, Mandy will meet with Dr Mullen on 23 November to identify dates for meetings and the subjects to be covered at each meeting to discharge the Committee's request. The aim is to hold 4 or 5 Focus Groups. Mandy will provide the Groups with a fact sheet so that they have background briefing that enables informed and meaningful dialogue.

PPG discussed whether it should meet in December to take a progress report. It was decided that the demands on members and on Danebridge management made a December meeting problematic. PPG agreed to discuss the outcomes of the Focus Groups and the way forward at its January meeting.

5. NEXT MEETING

The next meeting is 15 January 2021 via Zoom.

Possible Agenda Items for January 2021

- Update on COVID 19 mass vaccination programme.
- Feedback on the Focus Groups on the Sandiway Surgery proposal.