



**Patient participation group meeting
Tuesday Sept 14th 2021, 5-6pm**

MINUES

Introductions: There were 8 patients present plus Camilla Hawkes, Managing partner for the practice. Apologies from Clare Jackson, ne Reception Manager (struck in traffic)

Practice workload & staffing update:

- We have 3 GP registrars working with us now (qualified doctors, learning to be GPs) which has greatly improved our appointment availability.
- In PST: Claire Jackson has joined us as Reception Manager a new role in the team, bringing a wealth of experience in General practice.
- Dr Jon Wills will join us as GP partner in November, till then we are using some carefully chosen locum GPs.

Workload remains high, there has been a small relative dip toward the end of the summer holidays but nothing like we usually have. There is some concern going into the winter about how it will be, but we will deal with it.

Covid 19 vaccines & flu vaccines

We have had no info yet about Covid vaccines: delivery dates or even if we will be asked to do them.

Flu clinics will start Sat 18th Sept. These will not be at SMP this year (partly due to the Medichem pharmacy still Covid vaccines using the ground floor waiting area) but also as we are working as one Primary Care network (as for the Covid vaccine programme) – so clinics are the Reginald Centre and Woodhouse.

Blood tube bottle shortages

The national situation with this has affected Leeds. This is despite Leeds using a different supplier. However, all tubes have been rationed to save them for urgent clinical care.

We are still doing testing for:

- People on high risk medication (amber drugs)
- People who have recently started medication and need testing to see that it is being effective (eg medication for high blood pressure)
- People with long term conditions who:
 - missed annual routine testing due to Covid (not many of these as we barely stopped out long term condition monitoring and have caught up),
 - OR who last test was not to target
- If the GP suspects that cancer may be because of a patient's symptoms
- Other tests at the GPs discretion where prompt testing will change the management plan or outcome

Other tests are being put back and we are keeping careful record of how long the maximum they can be delayed for (as we do not know how long the shortage will continue)

Ongoing – for feedback

Move of the St Martins reception up to 2nd floor: still only received one negative comment from a patient and so unless something unexpected happens, this move will be made permanent.

One patient present told the group that he had missed an appointment as he was waiting on the wrong floor. Ie on the ground floor when we should have been on the 2nd floor. Camilla will review signage and put up a notice to remind patients that if they have been waiting a long time then they should go to 2nd floor reception or speak to any member of the team who appears in ground floor waiting room (which is the same sign we used to have in 2nd floor waiting room when it was not staffed.)

We await news of a funding application to purchase an additional check in screen to go in the 2nd floor waiting room.

Phone system answering: the improvements made last time have been sustained as we feel we are feeling on top of the incoming calls much better. The data for number of calls unanswered, and speed of response have both improved. No reports of problems from patients.

Data opt out: the deadline for submitting forms for this has been scrapped (it was 31st Aug to start with, then 30th Sept) and replaced with the need for 4 tests to be met. This won't happen till next year at earliest. We still have huge pile of forms to input (the delay in the deadline meant Camilla moved it down the priority list due to staffing pressures over the summer but we expect to have this done by end October.

Any other business:

One patient told the group that a St Martins HCA had told her during an appointment that she (the HCA) was not vaccinated, causing concern that patients are being put at risk. Camilla told the group that we only had 2 staff unvaccinated and the other one is a member of PST. All staff are doing twice weekly Lateral Flow Testing. As an employer we do not feel able to force staff to have their vaccines however all staff have been told we encourage it greatly, and we await news on mandatory vaccination with great interest.

Volunteering: a patient told the group she was happy to do more volunteering for the practice. Camilla mentioned the possibility of working at More than A Coffee Morning which is our coffee morning on a Thursday AM at the Polish Centre which has just got restarted recently with LCC funding.

Pharmaceutical companies: SMP has a policy of not working with pharma companies or accepting anything funded by them. Camilla updated the group on the most recent case of where we had been asked to accept funding from big pharma so had had to turn down a useful software tool. The Leeds CCG has arranged for all practices to get access to a software “dashboard” which displays data about their diabetes patients in a more useful and easier to use format. The data is about their 3 treatment targets (blood pressure and cholesterol as well as the blood sugar. It is now recognised as very important for people with diabetes that all 3 are kept under control, in the past there has been over emphasis on the sugar alone.). However, the software is funded by Lilly, a Big pharma company. So SMP will not be able to use it. This sort of useful tool should be funded by the NHS: pharma is stepping in to fill the

gap. The data in the dashboard is taken from our clinical system, and there other ways to extract and review it: just not as nice to look at. No concerns were raised by the group and several people indicated that they felt this was the right ethos to be taking.

Date of next meeting

7th Dec 2021 2 – 3 pm. We discussed the possibility of a face to face meeting but concluded it was too early to tell if this was sensible. Weather, Covid rates etc. may all influence it. Next meeting Gilda will do a short presentation on NHS governance / structural changes.