

## **Dukinfield Medical Practice Patient Participation Group**

### **Minutes of the meeting held on Tuesday 19th January 2021 at 1.00 pm via Zoom**

**Present:** Marion Higgins (Chair), Geoff Hill (Secretary), Amritlal Mistry (Treasurer), Sheila Frith (Notetaker), Julie Pregnall (Practice Director), Joanne Clere (Practice Manager), Joyce Jones, Roger Acheson, Ted Davenport (part time), Chris Chesham, Brian Malpas, Keith Haresceugh, Ann Wright, Jacqueline Parry, Shama Saleem, Bhikhubhai Mistry, Judy Hearnshaw, Colin Hearnshaw, Dawn Alston.

**Apologies:** Chris Eckersall, Christina Andrew, Gillian Eckersall, Hilary Dewhurst, Joan Drummond, Kathleen Morris, Kath Ratcliffe, Patricia Bradshaw.

#### **Minutes of the last meeting**

Approved as a correct record.

#### **Receptionists' greeting**

Keith outlined an issue that he believed could improve communication. Receptionists rarely identify themselves when contacting patients, instead referring as being from Dukinfield Medical Practice. Keith said there are times when further contact is required and that having the name of the person previously spoken to would be beneficial. Jo agreed that this would be a good idea, and would be discussed with the admin team. It was acknowledged that if agreed, it would be limited to first names. The benefits would be clear but it was also acknowledged that patients themselves can ask for the name of the person they're speaking to. Julie or Jo will report back to a future meeting.

#### **Patient Access**

Keith further questioned the need for additional security requirements on Patient Access. A "memorable word" is now part of log in. This is information that cannot be "stored" and added automatically. The user is asked to supply 3 varying characters of the password. There was general support that this could be problematic for a section of the patient population but was necessary for the ever-increasing need to secure online information. Julie referred to assistance that Health Champion, Roger, had been able to offer to groups and individuals previously and wondered if it was possible to devise a way of reaching out "virtually" to those who might be having problems. It was acknowledged that there was a mis-spelling of Dukinfield in the system but it was a mistake in the original program and cannot currently be changed.

#### **Why did you join the PPG?**

Marion felt it was important to revisit this issue; to look at our individual reasons for being involved. There was a general discussion and sharing of motives, and it was acknowledged that there were similar themes therein.

#### **Updates**

***Building:*** Julie reported the latest situation regarding planning approval for the building alterations. The Practice is still waiting but there has been some progress and she is hoping that by 21st January the situation will be clearer. Site surveys are necessary and remain outstanding. She's still waiting for the "yes". The project will have funds contributed by the NHS which requires quotations from 3 companies. However, this has limitations. Bids for funding must be received by 31st March 2021. The building work is anticipated to last 9-12 months.

Triage: Due to other pressures, Julie had been unable to finalise the information. It was agreed to defer to a later meeting but was able to report that the outcomes are largely positive.

Covid vaccine roll out: Both local and national comments have recorded that Tameside has made excellent provision for the vaccination programme and is meeting its targets. Julie reported that vaccination is now being offered to those aged 75+.

She further reported that separate arrangements for health and social care staff who need to register with their employers to get the necessary registration to receive their inoculation.

The Astra Zeneca vaccine is now available and this has made reaching out to housebound patients easier as it's stored differently to the Pfizer one. Most people who have had to travel to vaccine centres have been able to arrange personal transport but Julie reported on several transport organisations who are offering assistance, some of which is free of charge.

She went on to confirm that everyone who is eligible for vaccine will be contacted by letter, text or telephone.

Newsletter: Geoff reported on the newsletter production and distribution and there was general agreement that it had been well received and appreciated, containing useful information. He said he was happy to do further issues, next one probably in March but would need assistance. He particularly wanted to know if one of the partners would be prepared to include a piece, as had happened in the past. Julie said she would pass the request on. Although the newsletters are available online, we know we cannot reach the whole patient population via this means. There were several volunteers to hand deliver copies. Julie said she could provide addresses, not names, in order to protect people's privacy. Geoff also confirmed that he has set up a Facebook page for the PPG. The practice already has one and finds it a useful communication tool. Jo said that Twitter was used occasionally.

Christmas Hampers: Julie thanked everyone who'd helped in this exercise, especially given the short notice. She'd received several thank you cards and it was clear that they had been well received. The Group also wanted to acknowledge Julie's role. It had been her idea and she contributed significantly to its success. It was agreed to schedule it for PPG meeting in June.

Logo: Geoff outlined the concept of producing a logo that both the Practice and PPG could use for its marketing purposes. Some work had already been done and he showed one that had already found some appreciation. A general invitation was made for anyone to look out for possible designs on clip-art or similar and to submit them to Geoff who would contact everyone by email.

Online guide for triage: Julie asked for volunteers to assist with compiling an online guide to using the triage system. Colin, Judy and Marion put their hands up. Julie asked Geoff to arrange contact.

GP changes: Julie outlined the changes in staff rotations. Dr Sim will be leaving at the beginning of February to take up a GP post in Oldham. Dr Martin, an ST2 doctor, will also be moving to his next placement. Dr Wolstenholme is returning from maternity leave. Dr Anis will be staying till the end of March. As the replacement doctors will not be in post until May-August, locums may be required in the meantime.

### **Any Other Business**

Chris Chesham asked for clarity on the procedure for reporting test results. The reporting of results is done by a clinician and an appointment is necessary to do so. There can be a delay between the call and the appointment itself which can be stressful. Julie said she would consider how to improve this but emphatically confirmed that if blood test results need urgent action, then it is done immediately. For those who use Patient Access test results are available to view.

It was agreed that the concerns of future “open” surgery arrangements would be discussed at a future meeting as discussed at the earlier Annual General Meeting.

**Date and Time of Next Meeting**

It was agreed to hold the next meeting on 2nd March at 7pm. Although this wasn't universally convenient, it was felt to be worth at least trying to see if it attracts others who are available at this time. It was suggested that the information be posted on the Facebook page.

The meeting closed at 2.45 pm.