

**306 Medical Centre**  
**Minutes of PPG Meeting held on Thu 10 Mar 2022**

**Present:**       **Staff:** Mo Dawood (MD-PM), Patricia Giddarie (PG), Dr M Chawdhery (MC-GP),  
**Patients:** Kwame Ocloo (KO), Alan Robertson (AR), Tina Thorpe (TT), Richard Harwood (RH), , Khurshid Qureshi (KQ), Sandra Floy (SF)

**Apologies:**     **Patients:** Richard Cooke (RC), Kareen Isaacs (KI), Phillip Lipsidge (PL), Kathleen Lipsidge (KL)

|   | <b>Agenda Item</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Timings</b> |
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| 1 | <b>Meet &amp; Greet</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 12.15 - 12.30  |
| 2 | <b>Welcome &amp; Introductions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 12.30 – 12.35  |
| 3 | <p><b>Minutes of the last meeting and any matters arising</b></p> <p>The minutes of the last meeting were agreed to be uploaded on the website.</p> <p>No matters arising</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 12.35 - 12.45  |
|   | <p><b>Open Session - Topic: Appointments &amp; GP Practice Reforms document</b></p> <p>MD gave an update:</p> <p>Doors opened on 14 February 2022. Would have opened them sooner but there were concerns on sustainability of services and risk, as patients were presenting with covid symptoms.</p> <p>We will continue to maintain the current system and gradually adjust the ratios of telephone to face to face appointments.</p> <p>Face to face appointments will continue to be based on clinical need where it is necessary to examine a patients whilst we gradually transition.</p> <p>The practice population in 20-49 age group is 61% and telephone appointments are more practicable with this cohort.</p> <p>We offer online appointments which can be booked up to 4 weeks ahead and release appointments in intervals of 7, 5, 3 and 2 days, all available using online apps.</p> <p>We do not currently offer online appointments for nurses as we have nurses with varying competencies, as if a nurse appointment is booked for a procedure which the nurse is unable to perform then there is a risk of disappointment. Also there skills are evolving and hopefully they will all be at the same level of proficiency by June, when we will review the arrangement.</p> <p>We also have a linked pharmacist on two days a week and a social prescriber too.</p> <p>Masks must be worn on premises due to vulnerable patients being in the waiting room.</p> | 12.45 – 12.50  |

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|   | <p>Weekend opening on Saturdays from Oct 2022 on a PCN basis planned from Oct 2022. Arrangements under consideration with our local federation and practice clusters and how to best manage this.</p> <p><b>Questions?</b></p> <p>TT queried where Tessa Jowell stands. MD said they will continue to provide out of hours services and may take on this new weekend requirement by enhancing capacity. This will be based on agreed hours per population and will include nurses, pharmacists etc</p> <p>TT pointed out that the high street pharmacies offer minor ailments service.</p> <p>SF asked if Saturday appointments would be triaged. MD said awaiting specifications and design for this service currently.</p> <p>TT complained about the NHS 111 service which took 24 hrs to come back to her.</p> <p>TT said managing patient expectations and educating patients on appropriate use of services should equally be important and not just giving in to inappropriate or unreasonable demands. MD agreed that we should plan cost effective services based on practicable needs and on whims and fancies. There is a sense that practices may be overburdened and set to fail with unrealistic expectations and limited resources. Consequently this can then be considered as failing to be fit for purpose and maybe somehow reformed or even privatized eventually. An analogy that came to mind is having the funds to buy a small car but giving the impression to everyone it can do anything and everything.</p> <p>MD pointed out the document ‘ At your service - A proposal to reform general practice and enable digital healthcare at scale (<a href="https://policyexchange.org.uk/wp-content/uploads/At-Your-Service.pdf">https://policyexchange.org.uk/wp-content/uploads/At-Your-Service.pdf</a>) :</p> <ul style="list-style-type: none"> <li>• Digital Healthcare at scale</li> <li>• GP partnership model changes</li> <li>• Bloods tests ordered using App</li> <li>• The service may look very different after reform</li> </ul> <p>Our understanding is this is a think tank paper and it would seem that with escalating demands and patient expectations it is quite likely general practice may be very different in the future with emphasis on ‘digital’.</p> <p>MD explained difference between the commitment of GP principals who sometimes work longer hours and salaried GP work their scheduled hours only. With the change to all salaried GPs, inevitably the quality and continuity of care will change.</p> |               |
| 5 | <p><b>AOB</b></p> <p>TT attended the Integrated Care Systems (ICS) – patient participation event and felt it was an information overload with so many speakers and felt there would be more bureaucracy.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 12.50 – 13.15 |

MD explained how the system will work. MC said funding will depend on decisions of your ICS board which would be multidisciplinary. There was no clarity of general practice funding will be ring-fenced in the pot or how overspends will impact on primary care, secondary care and social services. There is obviously anxiety with any change or reconfiguration.

With Covid and long waiting times in hospitals has led to some service changes. An example being community physio clinic started by the federation to help manage wait times for physiotherapy services provided by secondary care. The new service will be assessed but sometimes there is a feeling that services may be eroded and may not have the same levels of specialisms or even scaled down sometimes to keep costs in check.

TT pointed out that whilst we need an orthopaedics referral often this is first triaged by physiotherapists, so we don't always get the experts we expect.

Another example discussed was general paediatrics referrals. We are now expected to refer to paediatrics multidisciplinary teams to review referrals and for advice as we can no longer refer a child to a paediatrician for a face to face appointment.

SF mentioned that some mothers felt that babies should be seen face to face. MD explained that most issues can be diagnosed by a telephone/video appointment and a face to face appointment is only necessary usually where an examination is required. Sometimes new parents and inexperience feel reassured if seen face to face. We are striving to at least offer video consultations to children initially. MD said that we empathise with parents and are reflecting on how we can best meet their expectations.

KQ asked about the present funding of the NHS and how it will change. MD explained that the funding would not change as the service will have to be funded irrespective.

TT asked going forward some years ago there was an initiative about how to access the services just before NHS direct and she wonders whether it would be appropriate to do a series of leaflets for the patient on the basic care and services available to them. MD said that everything is now app based or online. We have general signposting in place and there were NHS online resources which were standardized.

MD thought the idea of booklets was good in principal but lot of resources would be needed and these resources were already available in other forms. People may not necessary have these on them or may lose them but the internet is always accessible. TT happy to help.

TT said leaflets with tweaks – such as your new baby or your rheumatoid arthritis – leaflets specific to patients' conditions should be considered.

MC said good idea but leaflets can sometimes give false reassurances and she would not be keen as there is always risk of misunderstanding due to language skills etc. Sometimes even simple message can lack clarity so sometimes it is best not to qualify conditions but focus on pathways to access care, routinely, urgently or in an emergency and that is what our messages on our website and phones strive to do. Provide numbers to access services in situations.

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| <p>TT reminded everyone that chemists can provide emergency medication supplies but can sometimes be reluctant and direct patients to NHS 111. She suggested that people need to know their entitlement and where to get appropriate services<br/>MD asked for specifics.</p> <p>TT said practice was extremely efficient and unnecessarily. An example being the prompt issuing of medication on receipt of a consultant's letter. She suggested maybe the practice should await until the patient made the request. Sometimes patients may not realise or may not remember so our proactive approach meets the needs of all the patients, some who may be vulnerable.</p> <p>TT asked for photos of new GPs on the website. MD said she could request video consultations to see what they looked like but would consider the request</p> <p>MD advised for future meetings, members are free to come in or dial in from home. If they chose to attend to ensure they confirm so lunch can be arranged accordingly.</p> |  |
| <p><b>Date of next meeting agreed: 9 June 2022 at 12.30pm</b><br/>The meeting was brought to a close at 1.30pm</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |

**Proposed dates for future practice PPG Meetings**

**Thu @12.30pm: 9 Jun, 8 Sep, 8 Dec**