

Knightwick Surgery PPG

Date of meeting:

17/08/21

Present:

(CS), (TD), (JC), (SS), (DM), (RH), (GMW), (RG), (SN), (KP), Deb Arnold (DA) & Kirsty Ward (KW)

Apologies:, (JB)

Chair:

Dr Kirsty Ward

Agenda Item	Action
<p>1. Minutes of previous meeting These were agreed</p>	
<p>2. Matters arising KW will contact other surgeries about medication delivery services and report back at a future meeting.</p> <p>The Surgery Partners are due to discuss the adoption of the RCGP Military Veterans Toolkit later this week. KW feels it offers some useful pathway links, with gateways to mental health, financial advice, hearing loss/tinnitus support etc. It was proposed that patients who are military veterans are asked what they would like to see implemented for them. GMW will liaise with his contact groups regarding this.</p>	<p>GMW to feedback</p>
<p>3. Covid-19 Future Planning / Vaccination update The vaccination program has gone quiet with no news on the covid booster rollout. There has been a rise in covid positive cases but not hospitalisations. Knightwick hospitalisation cases have been in unvaccinated patients only.</p> <p>The number of people attending for testing has remained steady and people are able to collect lateral flow tests from various locations in our area. Of eligible patients, less than 300 have declined the vaccine.</p> <p>The surgery will press ahead with flu vaccinations, which will probably cover the same variants as last year and patients are encouraged to attend.</p> <p>A surge in the incidence of Respiratory Syncytial Virus (RSV) is anticipated as well this year. This is a common, contagious infection causing bronchiolitis in young</p>	

<p>children and cold like symptoms in older children and adults.</p> <p>Social distancing and mask wearing are still mandatory at the surgery for the protection of patients, staff and to ensure a continuation of services. The surgery is now seeing more patients face to face but these appointments are still authorised by the GP prior to booking. Where possible patients are seen outside. It is felt that we need to get another winter out of the way before measures are relaxed further.</p> <p>Annual health checks are now being carried out, although a national shortage of blood bottles has led to a decrease in some of the tests available. Spirometry appointments and ear syringing are not yet available due to the higher risk nature of the procedures and capacity issues for appointments of 20mins or more. However, micro suction services are available at St John's House surgery or privately for approx. £40.</p> <p>Moving forward there will continue to be a mix of F2F and telephone consultations. Although this means the phone lines are much busier now, the phone system has the capacity to cope with the increase without creating an increase in waiting times.</p> <p>Online consultations are not being utilised as much as expected and it was suggested that this is promoted more widely on social media and the website. It was noted that some of the links on the Patient Access online consultation page are for pay as you go services, although this is not always made clear. DA will investigate to see if these can be switched off.</p>	<p>DA to promote on Facebook/Website</p> <p>DA to investigate switching off</p>
<p>4. PCN PPG Meeting</p> <p>GMW attended the PCN PPG zoom meeting on our behalf. Although this was not well attended, there was general agreement that the previous CCG meeting and subsequent information was not particularly helpful. There appears to be a lot of variation in how the different PPGs are working but it is felt we have got off to a good start. GMW is happy to attend these meetings for us, which currently are being held monthly.</p>	
<p>5. Parking / Traffic Flow</p>	

<p>TD attended the recent Parish Council meeting to see if there would be support for plans to improve the traffic flow and parking for the surgery. The PC suggested that a proposal backed by the surgery is submitted. There was general support from the parish, district and county councillors, but the final decision will rest with the Highways Agency.</p> <p>It was agreed that the ramp is the main cause of congestion, so a 30m drop off only zone will be suggested to enable those with limited mobility and delivery/emergency vehicles to gain easy access. TD and KP will draw up the proposal for the surgery to endorse prior to submission to the parish council.</p>	<p>TD & KP to liaise on this</p>
<p>6. Replacement for JB 7. Chairperson Role</p> <p>These items were discussed together. As the committee has 11 patient members it was agreed that at this time, there was probably no need to replace JB who has moved out of the area.</p> <p>While KW has been happy to chair the meetings, she does feel it would be better for a patient representative to chair and steer future meetings. KW will still attend and provide information and share knowledge. After discussion, it was agreed that Julie (JC) will chair future meetings. Many thanks for volunteering Julie!</p>	
<p>8. AOB</p> <p>KP informed the group that her NHS email will be closed soon. She can be contacted either via the Patient Group email patient.group1@nhs.net or her personal email address katequil@aol.com</p>	
<p>9. Items for next agenda</p>	
<p>10. Date of next meeting</p>	<p>Tuesday 16th Nov 2021 7.30pm</p> <p>Face to face / Zoom format to be decided 2 weeks beforehand</p>