



## The Brimington Surgery - Patient Participation Group NOTES

Thursday 11<sup>th</sup> November 2021- 10.30am

### AT The Brimington Surgery

1. **Attendees:** Sue Hague (Chair) Martin Liddle; Pam Smiley, Pam Wright, Dr R White, Paula Elliott (Practice Manager).
2. **Apologies:** George Morris, Lynda Hewitt, Sandra Bridge, Joan Bramley, P Chambers, Margaret Breeds

Everyone was welcomed to the first face to face meeting since January 2020 and all were happy to finally meet up!

### 3. Area Network Meeting Feedback - (standing item) –

George Morris reported (via email) that, at the Area PPG, there were "no developments of great excitement - really just folk reporting that they are still chugging along / getting slowly back into normal operations".

The main event at the recent Area PPG meeting, was Dr PJ Flann the Clinical Director of the Primary Care Network giving a talk on his thinking regarding PCNs and George kindly forwarded the slides which were then viewed in the meeting and are attached.

4. **Primary Care** – Dr Rupert White (Current Lead Partner) – joined the group and gave some background regarding what is happening in Primary Care currently. He explained that we are (and have always been) seeing patients face to face.

Whilst the core work of a GP is to engage with people face to face and the reason why many doctors choose to work as GPs, lots of people no longer want this and prefer to be able to use technology including land line telephones.

The offer of a face-to-face appointment will always be based on a clinical judgement or a patient request.

There was a short discussion about issues in the press (e.g. suggesting that General Practice is not working hard enough or are closed) which have not been helpful for patient perceptions nor for hard working staff.

Dr White used two slides to illustrate what goes on in General Practice and also showed statistics regarding how the number of appointments has been growing.

There was a discussion about the "new normal" and how things have been altering even prior to COVID when issues of capacity in the NHS had been discussed.

## **5. Pt feedback - (standing item)**

We have had lovely feedback from our patients for which we are very grateful. There are a few less complimentary engagements which are upsetting because we want to provide the best for everyone.

We no longer run the Friends and Family Test but always invite feedback and comments - through our website and our new comments bubbles in reception.

## **6. Surgery update – (standing item)**

For the first time ever, we have a GP vacancy that we have been unable to fill so we are currently short of 5 sessions. We have had some locums GPs and we will continue to try and fill this post. There are a lack of GPs and some of this is due to the current climate, not helped by the afore mentioned issues regarding the press.

Dr Simon von Schreiber has retired and Dr Louise Bellingham has joined the Partnership.

Nursing – one team member is on long term sick and hopes to return in the New Year. Sorèle who spent some of her nurse training with us several years ago has returned to the team and has settled in well.

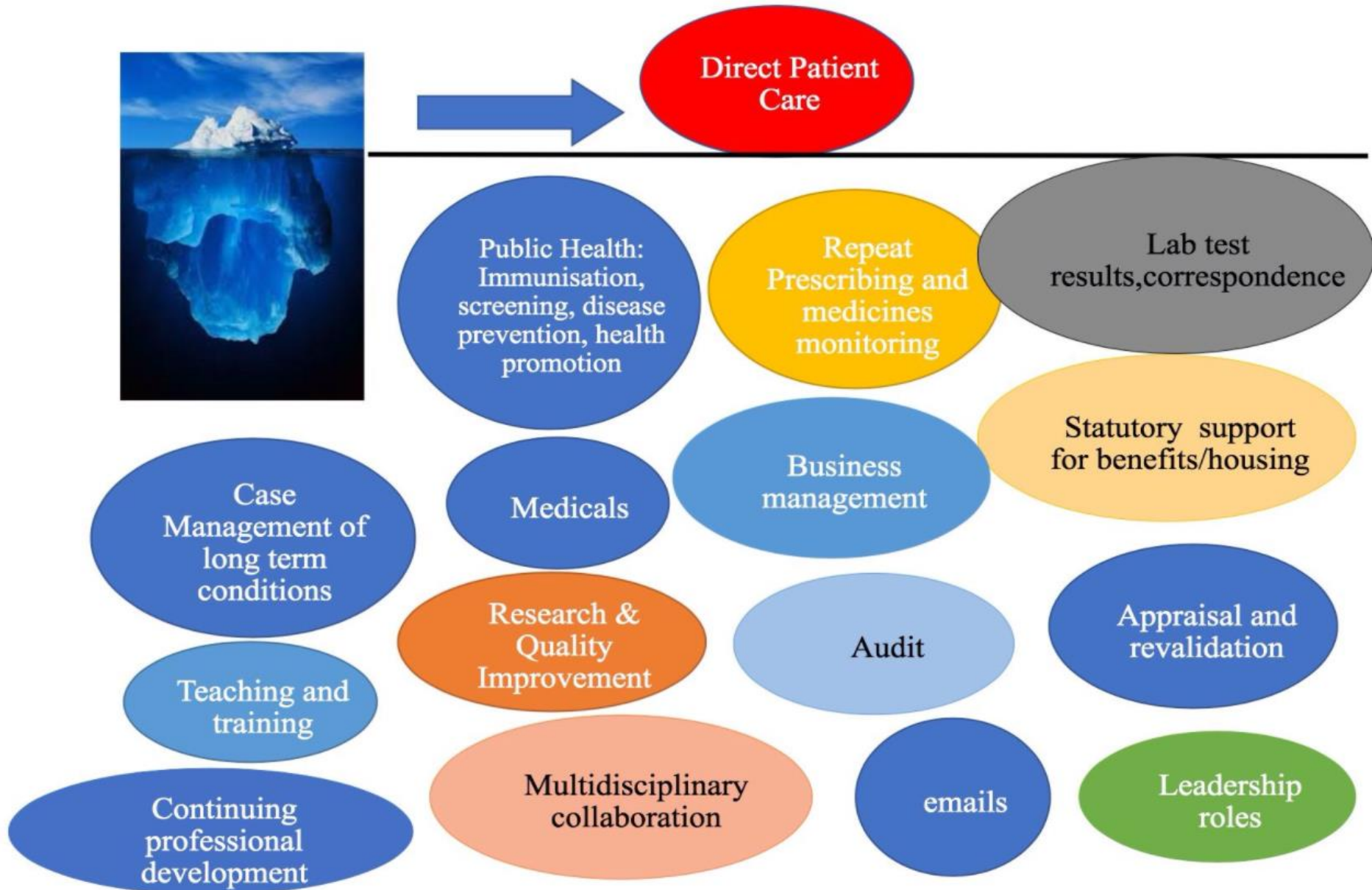
We are proud of the fact that we have not been hit by many staff covid cases and where we have it has been caught via families and not passed around at work. However, we have suffered shortages because when a staff member feels ill, we ask them to stay off until they have a PCR test to be on the safe side.

## **7. Any other business**

- Medicines Order Line – we looked at a slide George had forwarded and discussed this service. The Practice has found the services very helpful, and it is due to continue.
- Community Pharmacy Consultation Process – Paula explained that staff have been trained (and follow a GP approved protocol) where they can refer certain patients to local pharmacies. There is a list of conditions that can be referred and a list of exclusions, (e.g. issues such as conjunctivitis but not for patients of a certain age). It is safe because if the pharmacy is not able to deal with the referral they phone a direct number and speak to the practice. Whilst all pharmacies should be signed up it has become apparent that this is not currently the case. This has been referred back to the team who are managing this project.
- Pam Wright informed the group of the charity work she had been doing for MacMillan via the bowls club and Pam Smiley shared the story of her open garden fundraising.
- Martin Liddle kindly agreed to investigate how we might obtain a "green" parking space with an electric car charging point.
- We discussed how a second publicly accessible defibrillator would be good for the village. Paula wasn't sure how to go about this however the group thought it would be something that funds would have to be raised for.

NEXT MEETING – FACE TO FACE IF POSSIBLE, FEBRUARY 23<sup>rd</sup> 2022 10.30am

The "Iceberg" of General Practice Workload – @KramerGraham



# YOUR GP SURGERY

All the media and the public ever see...

Face-to-face appointments

Busy phone lines

Medication requests / reviews  
Covid vaccs  
Dealing with results  
Flu jabs  
Supporting vulnerable / high-risk patients  
Home visits  
Completing tasks  
Phone consultations  
Meeting clinical targets  
Care home ward rounds  
Keeping everyone safe  
Online consults  
End-of-life / palliative care  
Reviewing care & treatment escalation plans  
Tackling staff sickness / stress  
Video chat  
Repeat prescriptions  
Dealing with secondary care requests  
Cancer referrals  
Running the business  
Student training  
Working with network neighbourhood practices  
Updating our patients  
Long-term disease reviews  
Safeguarding meetings  
Team training  
Actioning letters  
Nursing care and procedures  
Working with multi-disciplinary teams

But just some of what actually happens...