



Thursday 11th November 2021 at 7.30pm, via Zoom

Link to join Zoom Meeting will be open 5 minutes before the start time:

<https://wantagetc-gov-uk.zoom.us/j/81797418153>

Meeting ID: 817 9741 8153

Talk by Dr Rhodri Davies

‘Health Centre Expansion Plans’

Followed by

**Newbury Street Patient Group
Annual General Meeting**

AGENDA

1. Introduction and welcome by the Chairman
2. Apologies
3. Minutes of last AGM held on 12th November 2020 (attached)
4. Chairman’s Report & Treasurers Report (attached)
5. Changes to NSPG Constitution (2019 & 2021 version attached)
6. Standing down and Retirement of members of the committee
7. Election of members to the committee
8. AOB
9. Close of meeting

Included in this Booklet is the NSPG Terms of Reference



NOTES OF THE NEWBURY STREET PRACTICE PATIENT GROUP OPEN MEETING AND AGM THURSDAY 12 NOVEMBER 2020

In these unusual circumstances of lockdown, the meeting was held by zoom. 45 people attended including 10 Committee Members: Adrian Bodimeade (Chairman), Dave Fox, Sandie Helm (Secretary), Andrew Lewcock, Julie Maberley, Janet Parker, Rosemary Stickland, Tom Thacker, Una Findlay and Tresa Cooper. Dr Rhodri Davies also attended. The Chairman welcomed everyone and was pleased to see so many joining in on zoom. He introduced Dr Carrie Ladd to tell us about Delivering Healthcare in a Pandemic.

Talk by Carrie Ladd

This was in 3 parts:

1. The journey of the Practice in the last 8 months
2. The changes they have embraced
3. How the change will be with us for good

Many of the medical organisations were giving information and support right from the beginning of the Pandemic. The Practice had to restructure virtually overnight. Newbury Street Practice became the CALM Clinic and all the team moved into the Church Street Practice, with many working from home. It all happened very quickly, and the staff had to be trained in the use of PPE to ensure everyone was safe. They had to source PPE on-line as it was in short supply and everyone had to use it. They were expecting something very serious and also the risk for colleagues. They were scary times both personally and professionally. All the restrictions were to keep everyone safe including the patients. After a few weeks they were not seeing the numbers of Covid-19 patients they were expecting and moved the CALM Clinic into the Health Education Room and NS Practice moved back, but kept the waiting room closed as they didn't want a patient walking into the waiting room unannounced who might have Covid symptoms. They have now deescalated further so that each Practice has a dedicated Covid room. If a Covid patient can't be dealt with over the phone they can arrange a visiting service to visit them or they could be asked to go to a regional centre. They had to assume any patient may have the virus, so they have very strict infection control policies.

How it would work. Carrie gave three fictional examples, firstly a 25-year-old mum with a new baby, secondly a 46-year-old man, and thirdly a 91-year-old widow.

A lot can be done over the phone or by video, or the patients can send in a photo, so may not need to be seen at the Practice and advice can be given remotely. The use of video consultation will continue to be used. They can even look down the throat by video as it is still felt not safe to do this in the Practice.

Carrie is a member of the Royal College of Practitioners which issue a lot of policy documents which looks at what changes general practices have gone through and working with new technology and tools available to patients.

Patients can send in an e-consult form. Information can be found on the website. They try for a 24-hour turnaround. Carrie shared a document, highlighting various changes over the last 8 months. In February they had received 150 e-consult but by October they now receive around 500. The other tool they use is 'Accurate' which allows them to text from their internal system and allows patients to text back. It also has different links to websites and where to find information. Video consultation is also used more, especially now for those in isolation and when she was working from home. For those less technically able, or have difficulty in hearing or using video, the patient can be visited in their home by a colleague.

The Practice is developing and strengthening links with the community and supporting the vulnerable or shielding patients. Looking at special features identifying patients with special needs.

She thanked everyone of the team in the Practice and said they have all been amazing in the way they have embraced this new way of working. They had a steady stream of tea and cakes from the Community and people supplying masks and making gowns and bags to put them into.

The talk was followed by a short Q&A session.

Q. How many cases of Covid have been diagnosed in the Wantage area?

A. The Government have an on-line tool where you enter your post code and it gives details of how many have been diagnosed, and also how many deaths there have been in the area.

Q. Have you seen numbers increasing recently in the Wantage area?

A. Yes, they have seen a rise in numbers, however people are generally following the Government guidelines and advice.

Q. How are the changes affecting the plans the Health Centre Extension?

A. Since the pandemic it is clear the space may look different as we need more professionals, and the plans may need to be refined and be fit for purpose.

Q. What is the status of the Flu jabs?

A. They have vaccinated over 3500 of the over 65's in the remote clinics, the children's vaccination clinics and under 65 sessions are progressing.

Q. Are people still getting their regular check-ups?

A. Yes, they are. Diabetes is the highest risk group. Long term condition checks are now starting again. Trying to keep the routine checks going.

Q. What guidance have you received on the Covid vaccine.

A. We are working with Church Street and will be a logistical challenge. We have been asked to get ready. We will use social media to advertise it and text message, but will probably be by letter with a personal invite. We need as many people as possible to have this vaccine. The vaccines will come centrally and not sure which brand we will be using. It is possible we may use more than one option.

Q. What is the situation with regards to numbers of GPs in the Practice and increase of population in the area?

A. It takes a long time to train a GP and a lot of GPs are retiring. Practices have been asked to form collaborations with other neighbouring Practices and form Primary Care Networks. We have joined up with Church Street. Recruiting further staff who not GPs but can complement and support the work of GPs. The PCN have recruited a Clinical Pharmacist, a Social Subscriber, and a Physiotherapist. We are also recruiting for other roles. There will be a really diverse group of professionals that can give patient care.

Adrian thanked Carrie for her talk and excellent overview, and answering the questions. It was much appreciated and hoped everyone enjoyed her talk.

The talk finished at 8.15pm and was followed by the NSPG AGM.

NSPG AGM 2020

1. Introduction and Welcome

The Chairman welcomed everyone to the AGM. Forty people stayed on for the AGM. The Chairman thanked all members of the Committee for their support over the past year especially the work done by Sandie Helm (Secretary) and Andrew Lewcock. He also thanked Dr Carrie Ladd for her continued and much appreciated support on the Committee, who attends on a regular basis for discussion and to give a Practice update.

2. Apologies

There were no apologies.

3. Minutes of the last AGM held on 14 November 2019

These were included in the AGM Booklet and available on the Practice website. Dr Rhodri Davies had spoken at the last meeting. These were accepted.

4. Chairman's Report

Adrian Bodimeade briefly went over his Chairman's report also included in the AGM booklet.

He thanked all members on the Committee.

We only missed the April meeting this year and have been holding monthly meetings by zoom since then.

We are still looking at working more closely with Church Street Patient Group. We have been holding joint quarterly talks, we did one on Strokes and the last one being held in January this year on Dementia.

Unfortunately, all further talks have been put on hold due to the pandemic.

We had hoped to work more closely with Church Street Patient Group. We have only managed to get the Spring Newsletter out this year.

5. Treasurer's Report

There was no official Treasurer's Report. Adrian has been acting as temporary Treasurer this year. There had only been one transaction this year for the quarterly talk held in January. The Practice supports us with any printing required. Our funds are just under £300.

6. Constitution

The Constitution had been rewritten with Dr Carrie Ladd's input last year, along with a new Terms of Reference and was approved at the last AGM. We would welcome any comments on that. No further changes would be made until the new Committee had further discussions.

7. Retirement of Members of the Committee

Dave Fox is leaving the Committee as he is in the process of moving out of the area. He has been a very valued member of the Committee for many years and has also held the position of Chairman. He thanked him and wished him well with the move. Adrian also said that he would be standing down from the Committee after 8 years, 3 of those as Chairman. He would become a correspondence member instead. Bruce Child and Ron Coyle left earlier in the year. The Chairman thanked them all for their contribution to the Committee over the last few years.

8. Election of New Members to the Committee

We had two new members join earlier this year, Julie Maberley and Andrew Lewcock, who have been making a significant contribution this year. and two new members have joined very recently, Tresa Cooper (Social subscriber) and Una Findlay.

All other members were willing to stand again on the Committee: Sandie Helm (Secretary), Janet Parker, Rosemary Stickland, and Tom Thacker. All members were formerly elected on to the Committee. There were no further nominations. They were accepted. Adrian welcomed Julie Maberley as the new Chairman and wishes the Committee good luck.

9. AOB

Julie thanked Adrian for his leadership as Chairman of the group and will miss him, and was pleased that he was staying on as a Correspondence member and use the benefit of his experience. She also thanked Dave Fox and wishes him and his wife Helen well on their move and have been strong members of the community. She also thanked Carrie for her talk and answering our questions so openly.

She expressed that it would be nice to have some younger members join the group, as most of the members are over 60, so we could have representatives from all the patients and urged them to get in touch. It is not necessary for them to attend every meeting.

There were no further questions.

The secretary shared the slide from Carrie showing what the Practice has been doing this year. This will be shared on the Practice website.

Carried thanked the Committee for their help this year.

The Chairman closed the meeting at 8.35 pm.

Typed by S Helm
Secretary, NSPG,
November 2020

NSPG Chairman's Report for 2010/21

As you know this has been a difficult year for all of us and particularly for the Practice staff. It was also my first year as Chairman, so it's hasn't been a particularly "normal" start to my chairmanship.

The Patient Group (NSPG) is a requirement of the NHS. And as our practice continues to grow (over 15,500 patients) it becomes more important. Our group has comprised eight members excluding practice staff. All are volunteers and are registered patients with the practice, some have been members for many years, and all are willing to continue for another year. I would like to start by thanking them all formally for their time and effort. Particular thanks must go to Sandra Helm, our secretary, without whom life would be very difficult and Andrew Lewcock who took on the role of Treasurer this year for the first time and had to negotiate the intricacies of opening a new bank account during a pandemic after our previous bank stopped providing accounts to charities like us.

In addition, Dr Carrie Ladd and Karen Fido, Practice Manager, have attended many of the meetings and I would like to thank them for their continued support and helpful contributions.

As you can image, we have not been able to have physical meetings this year, but have continued to meet monthly via Zoom. We recently agreed to continue to meet via Zoom for at least the next quarter. Even without physical meetings, we seem to have been busy.

We started the year with a review of our aims, constitution and code of conduct and I would like to present these to the AGM for approval. Although the changes aren't significant, we wanted to ensure that our aims are clear and simple and that our constitution and code of conduct supported our work. After the success of the Zoom AGM last year, we have organised a number of evening talks via Zoom on topics such as:

- "Keeping a level head in Lockdown"
- "Health Hearts and Minds."
- "The Importance of Cancer Prevention and Early Diagnosis "
- "Stressed, Distressed, or even Depressed- how are you coping with COVID?"
- "Jumping through Hoops to Help You"

In common with many others, we have had some issues with the technology but details of some of the talks are available via the Practice Website.

Andrew Lewcock and Una Findlay have been working very hard this year on the technology and have been working with the practice to ensure that the website is user-friendly.

We have also been working with the practice to ensure that the installation of the new telephone system was as smooth as possible and to update the Patient handbook which should be available when staff resources in the surgery allow.

We have continued to produce a newsletter in the spring and autumn, and this is available as both a physical document and via the website.

We work with other patient groups in the South West corner of Oxfordshire and with Healthwatch. Janet Parker and I attend the Wantage Town Council Health Committee meetings and I attend the Oxfordshire Health Overview and Scrutiny Committee as an observer, raising questions on our behalf as necessary on topics such as the funding of the Health Centre Extension and the use of Wantage Community Hospital.

I'm sure we are all very pleased that the plans for the extension have been submitted and that the funding is agreed, now we just need it built and staffed! My fellow committee members don't seem very eager to replace me as Chairman for the next year so with your permission I will continue for 2022. We still have vacancies on the Committee so if you'd like to join us, please get in touch.

Julie Maberley
Chair
November 2021

NSPG Treasurer's Report for 2020/21 – Andrew Lewcock

I am pleased to report that the Patient Participation Group now has a Community group bank account set up with the NatWest Bank in March this year. A cheques book and debit card can be used for cash withdrawal. Balance queries and deposits can be made with the bank cards held by myself, the Chair, and the Secretary.

A donation deposited in September proved to my satisfaction that deposits can be made either via Nationwide or the Post Office in Wantage, removing the need to drive to the nearest branch in Abingdon.

The balance at the time of writing is £284.43.

Andrew Lewcock
Treasurer
October 2021



Newbury Street Patient Group Constitution

“Our purpose is to provide a forum for the exchange of information and views between patients and staff at the practice so improving collaborative working and delivering a better experience of healthcare at Newbury Street Practice”

1. All patients (over 18yrs old) & staff of Newbury Street Practice will be members of the Newbury Street Patient Group (NSPG).
2. The NSPG will hold an Annual General Meeting (AGM) once a year where a maximum of 12 members will be elected to form the NSPG Committee (NSPGC). The NSPGC will then elect at least three officers (Chairman, Secretary and Treasurer).
3. Members should usually serve no more than 3 years; however, committee members may be re-elected for a further 3 years if there is not a full complement of 12 members. Co-opted members must be approved by the committee. Members of the NSPGC who attend fewer than 3 of the meetings in a year, without good reason, shall be asked to resign from the committee.
4. All elected and co-opted members of the NSPGC will have voting rights, with the quorum of **four** ~~six~~ including one officer. In the event of a tie, the chairman of the meeting will have the casting vote.
5. The NSPGC will meet at least 4 times a year, in addition to the full NSPG meetings which may include a variety of forums (e.g. AGM, open meeting, virtual platform).
6. The NSPGC will observe normal committee procedures and will prepare minutes and reports. Any financial transaction should be authorised by at least 2 of the three designated signatories. The independently examined statement of accounts will be presented at the AGM.
7. NSPG members must declare any conflicts of interest (e.g. financial or political) regarding their membership of the committee.
8. The NSPG constitution may be altered only by a majority vote at an NSPG meeting, with the endorsement from the Practice.
9. Dissolution of the NSPG will require a two-thirds majority vote at a NSPGC meeting with involvement of the Practice, and with endorsement either at the next AGM or at an extraordinary meeting of the NSPG. In the event of any funds being held by the NSPGC at the time of dissolution, such funds shall be transferred to the Newbury Street Practice Charity.



Newbury Street Patient Group Constitution

“Our purpose is to provide a forum for the exchange of information and views between patients and staff at the Practice so improving collaborative working and delivering a better experience of healthcare at Newbury Street Practice”

1. Newbury Street Patient Group (NSPG) is open to all registered patients (or registered carers of patients) of the Practice over the age of 16.
2. The NSPG will hold an Annual General Meeting (AGM) once a year where a maximum of 11 members will be elected to form the NSPG Committee (NSPGC). The NSPGC will then elect at least three officers (Chairman, Secretary and Treasurer).
3. Members should usually serve no more than 3 years; however, Committee members may be re-elected for a further 3 years. If there is not a full complement of 11 members, co-opted members may be approved by the Committee. Two members of the Practice are also entitled to be voting members of the Committee. Members of the NSPGC who attend fewer than 3 of the meetings in a year, without good reason, shall be asked to resign from the Committee.
4. All elected and co-opted members of the NSPGC will have voting rights, with a vote requiring 5 members including one member of the Practice. In the event of a tie, the Chairman of the meeting will have the casting vote.
5. The NSPGC will meet at least 4 times a year. The quorum for a meeting will be a minimum of 5 Committee members.
6. The NSPGC will observe normal committee procedures and will prepare minutes and reports. Any financial transaction should be authorised by at least 2 of the three designated signatories. The independently examined statement of accounts will be presented at the AGM. Minutes of all meetings and reports will be made available to all patients either via the website or directly by mail or email on request.
7. NSPGC members must declare any conflicts of interest (e.g. financial or political) regarding their membership of the Committee.
8. The NSPG Constitution may be altered only by a majority vote at a full NSPG meeting, with the endorsement from the Practice.
9. Dissolution of the NSPGC will require a two-thirds majority vote at a NSPGC meeting with involvement of the Practice, and with endorsement either at the next AGM or at an extraordinary meeting of the NSPG. In the event of any funds being held by the NSPGC at the time of dissolution, such funds shall be transferred to the Newbury Street Practice Charity.

(NSPG Constitution updated February 2021)

Newbury Street Patient Group

Terms of Reference

The GP Partners at **Newbury Street Practice (NSP)** are keen to build on their existing relationship with **Newbury Street Patient Group (NSPG)**, to strengthen the communication links and to support the group to achieve their objectives as set out in the NSPG Constitution. In order to achieve these goals, both parties have agreed this code of conduct to ensure the best possible ways for this to happen and to avoid any misunderstanding about the roles and responsibilities that each party have.

The core values that have been identified as underpinning the work of both the NSP team and the NSPG members are accountability to the rest of the patient population, integrity in all personal conduct relating to the practice and visible activity to promote confidence in the practice.

The Newbury Street Practice team will agree to the following code of conduct:

1. The **NSP team** will offer facilities and time for the **NSPG members** to meet regularly.
2. The **NSP team** will support NSPG by offering a practice representative to offer a practice update at each meeting.
3. The **NSP team** will work with the NSPG members to deliver specific goals identified and agreed by both parties such as working to gain feedback from patients or holding educational health promotion events.
4. The **NSP team** will respond in a timely and professional manner to the minutes of the meetings, reviewing any comments or complaints raised by the NSPG (although any complaints the NSPG receive from patients will be initially directed to the NSP complaints procedure).

The Newbury Street Patient Group members will agree to the following code of conduct:

- 1) **NSPG members** will not discuss their own personal health issues in NSPG meetings or in email communication between the group unless illustrating a general point.
- 2) Confidentiality will be paramount and all **NSPG members** will respect this in relation to both the business of the surgery and to individual patient information.
- 3) When liaising with patients, **NSPG members** will not seek information about individual patient's health or personal circumstances.
- 4) **NSPG members** are expected to conduct themselves with courtesy and respect for others when liaising with patients, staff and other NSPG members.
- 5) NSPG members will support the Chair in leading the Group and accept there may be challenge to any inappropriate behavior that does not meet this code of conduct.

(NSPG Terms of Reference dated April 2021)