



Precis Notes of the PPG meeting Thursday 3rd October 2024,

Present: PPG Becky Collins (BCo), Lyn Davis (LD) Sandie Helm (SH), Andrew Lewcock (AL), Julie Mabberley (JM), Janet Parker (JP), Tom Thacker (TT), Janet Parker (JP) Rosemary Stickland (RS),

Apologies: Lisa Auchinvole (LA) Bernard Connolly (BC), Helen Carter (HC),

Practice Dr Carrie Ladd (CL)

1/ To Approve notes from NSPG Meeting 5th September

Removed drafting comments in yellow, and JM confirmed the donations agreed and ICB of BOB.

2/ Actions

- Julie to invite the new MP to visit the practice and meet the patient group; JM to discuss with CL
- Kellie to amend notes to remove AGM designation as appropriate Completed
- Andrew to send precis of July notes to Kellie for the website Completed
- Julie to draft AGM poster and circulate (poster attached) Completed
- Andrew to circulate a summary of the NHS App Development plan Completed

3/ Approved Precis note from August ; Approved

4/ Receive Monthly Update from Practice

CL advised the Respiratory syncytial virus (RSV) vaccinations have already been started ; Flu and Covid vaccines starting now.

TT asked for the clinical reasons are for the RSV not being given to over 80s. CL responded the new vaccine is proven for the age group targeted but the immune response on the more elderly was not sufficiently well established. This may change as more data is gathered. The Shingles vaccine started out with a small cohort and this has now expanded. BCo confirmed this was not unique to RSV , for any vaccine the over 65 response is different from the under 65s and so there are different formulations to address this in the older age groups. LD asked if the older age group could pay to get it ? CL said not on the NHS, and was not aware of any Private Providers offering RSV but would expect this to happen soon. Accurx Total triage 238 submission on the last Monday, system working well. CL asked for advice on how to get Patient Feedback during a week some time before Christmas

TT asked why he cannot submit Admin requests in Accurx outside office hours, CL noted the practice had concerns over clinical risk of patients using the system for something that needs prompt medical attention thinking they will get a response just because the system is "open" and not recognising that outside the "office hours" such a response won't occur. (not all patients recognise these differences, so it is safer for the system to be off when no response will happen).

"1st October marked the move to start a Paperless Prescription drive, and this has prompted more people to come and ask for help to get the NHS app. Abi (one of the Patient Coordinators) has become a digital champion with helping people to get set up on the NHS App. This has just started but will continue twice per week for the next month. SH asked what is happening for the elderly who are used to paper Prescriptions. CL responded that the reception team are saying can you do it via the app, can you request it via the website, or if you are with Cleggs, Allied or Bretts, you can go in and they can request it electronically for you. (these pharmacies have visibility of live prescription sections of patient records, so up to date prescribing information) . Patients with no access via these routes are having their prescription attached to a paper triage form, and then the practice is processing the prescription via the Total Triage system. Stats are being collect this month and a significant reduction in the number of paper prescriptions is already seen. Boots is missing the "digital platform" (software called Proscript) that allows them to review (in EMIS) the patient prescribing records. A temporary email work around is currently in place with Boots, to avoid disadvantaging patients who use Boots but this will be reviewed by the end of the year. The Practice recognises there are a lot of people to support during this transition. The message about prescriptions is both Practices are in a transition phase, but there is a now a consistent pathway for this process. (NB Draft text for newsletter jointly with Church Street as they made the same move) The practices are reassuring people about the support for the digitally excluded, but find a lot of uptake for Proxy access to help in this transition." RS commented that she found the NHS app fantastic, and asked about proxy access process; CL said a form is available at the Practice to make this happen. Completion may require submission of some proof of identity. SH asked for some training on how to access it, CL indicated it was a walk in on Tues /Wed LD was told by a friend that she can stay logged in to the App and does not need to use the password; after lengthy discussion it was concluded that the "fix" referred to may be Face ID recognition, which removes the need for a password. Locum cover for one of the doctors (on Maternity leave) should start next week. CL advised she had asked Kellie and Abi to join her at the AGM to talk about their work.

5/ AGM Arrangements

AGM Poster drafted, now time to get the posters out. Check the "normal poster" distribution on John's list, NSP to cover the areas listed as being done by CSP people. SH suggested to put a note about the NHS app on the poster and in the newsletter.

(Action JM and AL)

JP requested some posters to be printed, (**Action JM**) all others can print their own.

ACTION All to feed any suggestions /amendments for the Poster in the next day or so.

CL commented we need to check the Zoom preparation, and wondered about how to video the meeting without breaching privacy rules.

Recording via zoom with no people showing other than the speaker might be a problem ; it was not clear to JM how to hide people to only see the speaker and present. After some lengthy detailed discussion it was decided to investigate separate video; it was also noted that people at the back of the audience could not hear and a small PA would help.

CL, SH, and JM would consider a short practice session on a mutually convenient Monday early evening. To be arranged.

Also agreed.

a/ To have a small PA at the AGM loaned by SH for use by the speakers in the meeting area of the Health Centre.

b/ To try and separately video on a webcam showing only the speakers for recording and posting on the NSP web site, to avoid any issues with people on zoom not giving approval for them to subsequently appear in the video on the NSP web site. (Robin Somers to help ?)

c/ To have a short pre-meeting in the Health Centre preparing at 2.30pm on the afternoon to check the technology is working.

Treasurers report to be drafted by HC /JM

SH offered to prepare a booklet for the meeting as before accepted by JM

Action SH prepare a booklet for AGM. SH has minutes from last time.

6/ Health and well being event Nothing new to report.

7/ Systems Note on changes in the NHS app that patients see, can now be notified to PPG.

8/ SOPA JP to attend meeting on 9th October

9/ Hospital Progress. No update ; sub committee meeting due on 17th October JM hopes there is something to report next month.

10/ Liaison with CSP

Plenty of correspondence, much of it stemming from the outreach work and issues raised by care homes. Key issue seems to be loss of Paper prescription and Boots inability to take electronic prescriptions, and possible impact on digitally excluded patients.

AL had circulated a draft Distribution list (Drafted by John C at CSP) for newsletters, posters and QR code posters, with any amendments to be sent to John C so an up to date correct (Agreed) list would be ready by late October for circulating the next issue of the newsletter, and enabling the correct numbers of newsletters to be given to each distributor.

11/ Treasurers report

No activity on the PPG account this month.

12/ AOB

BCo offered to take on some newsletter deliveries to help out; JM asked if BCo could help fulfil HC list as HC recuperates.

Next Meetings

Thurs 7th Nov at 2.30 pm (prep for the AGM)

Thurs 7th Nov at 7:30 AGM

Thurs 5th Dec at 7.30 pm

Tues Joint CSP NSP meeting 2.00 pm (NSP to Host)

END.