

Patient Participation Group
Minutes of Meeting
17th July 2024

1. Welcome: The Chairman welcomed everyone, particularly our new members.

2. Present: Theresa Banks (TB), Julia Bateson (JB), Wendy Border (WB), Sue Burke (SB), Dominic Burke (DB), Jane Chase (JC), Jill Fysh (JFY), Ian Gutteridge (IG), Stella Gutteridge (SG), Roger Hailey (RH), Kathy Laurence (KL), Ann Lemmon (AL), Rachel Seakins (RS), Pat Simpson (PS), Roger Smith (RSm), Nina Stewart (NS), Janet Taylor (JT), Dr Frank Tigchelaar (FT), Joel Thewson (JTh)

Apologies: Will Border (WBo), Richard English (RE), Jasmine Fulcher (JF), , Karen Goult (KG), Penny Hipkin (PH), Ann Hornby (AH), Ann Lemmon (AL), Margaret Worledge (MW)

3. Minutes of Last Meeting: These were agreed as a true record.

4. Matters Arising:

KL reported that the Practice has a new logo and she will email this to IG. She also updated the group about the nationwide lung cancer screening programme. This is being gradually rolled out across the nation and currently screening is taking place in Peterborough. If it comes to King's Lynn, suitable patients will be contacted. More information can be obtained on the website eolunghealthcheck.nhs.uk.

5. Treasurer's Report:

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|-----------------------------------|------------------------------|
| Reserve Account Balance @17/7/24 | £74.39 |
| Current Account Balance @ 17/7/24 | £877.05 |
| Income | None |
| Expenditure | None (see insurance item 6) |
| Total Balance @ 17/7/24 | £951.44 |

6. Insurance:

SG reported that it was necessary to renew the insurance as, unfortunately, the enquiries of the practice insurance brokers were not completed by the time the premium had to be paid. As the insurance could not be paid by the practice this year it had to be paid out of funds. IG paid this personally so the PPG will have to pay a cheque to him for £135.84. Next year's insurance will be reviewed with KL in May 2025, once the practice has settled its own insurance policy. This was proposed by RS, seconded by JB with all in favour.

7. Practice Update

KL reported that staffing was as reported in May. Stress levels have been reduced as a result of the move and patients are generally happy. The practice has received an acoustics report. The balance of sound needs to be rectified. The improvements will be staged in order to get the balance right. Sample acoustic material is being considered in order to stop

the echoing in the building. Anti-bacterial fabric has been placed under the mezzanine area and wood has been positioned at the back of reception.

Grey film has been placed on the backs of outside doors to stop ducks attacking them. There have been other small changes such as a fix to the reception hatch.

KL said that the practice is still getting requests for new patients so some GPs will have sessions increased in order to meet the need. The loss of the POD prescription service has not created too much extra work as few patients used it. KL suggested that patients got the NHS app as this made everything easy and quick.

There followed a short question and answer session on various issues. RSm commented on the height of the speed bump at the entrance. He felt it was very high and because it is close to the road a driver encounters it very quickly. KL replied that it was part of the plan and no complaints had been received. RSm suggested that it should be more clearly marked to make it more immediately visible.

JB asked about appointments. She said relatives who could not get through quickly enough had to go to QEH instead as they required treatment. KL and FT replied that the practice tried to respond appropriately and quickly to urgent requests. Staff are trained to ask patients for the correct information in order to signpost to the correct place.

Online appointments cannot be reinstated as this created an inefficient system.

There are acute appointments and a duty GP on the day as well as physician associates. FT commented that it was the best system he had ever experienced as a GP of 27 years. IG added that patients need to be encouraged to give all relevant information when they ring in. KL said that if patients were unhappy at the way in which they had been dealt with, they should contact the Practice Manager to explain their concerns.

Other PPG members commented that the system had worked very well for them.

NS said that an elderly neighbour who was going through a big hospital procedure had experienced problems communicating via a telephone appointment. She asked whether there was a different route for patients who cannot manage phone systems. This patient had had tests and was given an appointment to discuss them. Whilst waiting, a problem occurred, resulting in the patient being hospitalised.

NS asked whether there was a quicker way to for such patients to get test results and discuss them? KL said urgent test results would be communicated quickly and added that other persons can be nominated to act on a patient's behalf.

RSm said special equipment can be provided by the deaf association and this works very well.

King's Lynn Health Hub (Nar Ouse Way)

This is a government promoted and part funded Health hub, not a GP practice. Kings Lynn PCN and the QEH will share the services, with QEH providing approximately 70%. The Hub will provide Maternity and Rehabilitation services and the PCN will place staff there. All PCN staff will move there, such as a clinical pharmacist, social prescriber, mental well-being and physiotherapy practitioners. KL said the services would be shared by all the practices.

SG asked how would one get to see the social prescriber. KL said that in the course of a GP appointment, if the GP felt there was another issue, they would refer to the social prescriber. Practice staff have also been trained to do that. RSm asked whether patients need to be informed of these services. KL replied that the practice screens are being updated to include new information and there is a new handbook. The website is being revamped and information has been placed on the practice Facebook page.

8. Queen Elizabeth Hospital Update: (IG,TB,PH)

- Volunteer therapy Ted dog joins team with owner Sara. He will be visiting wards monthly with the other pat dog Milo to positively impact patient's welfare.
- 140 volunteers donated 20,000 hours to the hospital last year. An event (afternoon tea) was held during volunteer's week in June to thank the team for their service.
- There will be an emergency exercise on Tuesday 24th July to test the hospitals response to a major incident. Staff volunteers to act as patients are being enrolled. Some have been put off as the "patients" need to wear swim wear.
- A music therapy programme has been introduced to help dementia patients that is proving to help improve their quality of life.
- A youth council has been established (6th June 2024) to give young people the opportunity of having their voices heard by decision makers and a recruitment campaign is now running. To find out more www.teamqehyouth.co.uk.
- The hospital has been selected to test and roll out "Martha's rule" to support patients and families to seek an urgent review if their or their loved one's condition deteriorates, and they are concerned this is not being responded to. This is considered a major patient safety initiative.
- The hospital buggy service is to continue following excellent feedback. New volunteer drivers recruited, and a small team is now on the lookout for a replacement permanent vehicle (or vehicles) to further develop the service.
- The ongoing safety work continues to address the RAAC issues.

TB asked about the completion of the discharge lounge. IG will find out about this.

9. A.O.B:

KL reported that the practice will be sending out text messages to patients if there are traffic problems outside.

Health Event: RSm will support this with the Breatheasy group. KL has put the executive PA, Chloe, in charge. The event will take place on the 14th August from 10-4 approximately. Respiratory clinics are on that day so Hannah, the respiratory nurse will be available. Lots of leaflets, banners and information will be available and there will be a promotional slide on the notice boards. RSm can liaise with Chloe before the day. There was a discussion about the potential position of the event but further decisions can be made on the day. It is hoped we can promote the PPG at the same time and that PPG members could support the event.

JC asked about the banner which directs patients to the arrival screens. It appears to be both fragile and unstable. KL said it would be taken down and the practice will be getting new screens but not yet.

The meeting ended at 5.20pm

The next meeting is the AGM on 18th September. IG will be asking members for nominations for posts.