

HOWDEN MEDICAL CENTRE

PATIENT PARTICIPATION GROUP

WEDNESDAY 13TH NOVEMBER 2024

MINUTES

In Attendance:

Dr D Rose – GP Partner
Joanne Jennison – Practice Manager
Christine Shearer
Anne Bell
Robert Pickersgill
Susan Glass
Sarah Boggitt
Irene Dance
Shirley Stanley
Victoria Townsley

Apologies:

Dr R Harrison – GP Partner
Wilfred Bahadur
Valerie Ellerington

1. APOLOGIES

Apologies were received as above.

2. MINUTES OF THE LAST MEETING

Accepted as a true record of the meeting.

Pharmacy Services – Joanne confirmed that Oral Contraceptive Services are now up and running at all local Pharmacies and patients who fit the criteria were sent a text with information and are now directed to Pharmacy if they come to reception.

3. MEMBERS

The group welcomed our new member Victoria Townsley to her first meeting.

Terence Harford has resigned from the group.

Another patient is interested in joining the group. Once Joanne has spoken to her she will pass her details onto Christine Shearer to contact her from a member perspective.

4. PRACTICE UPDATE

4.1 Practice Staffing

- Dr Silva has now joined the practice as a permanent Salaried GP.
- We currently have a Registrar who is going on maternity leave in January, we are awaiting to hear if we will get a replacement.
- We have Year 5 Medical Students in the practice for 8 weeks at a time, the most recent one has just started with us recently. Christine fed back her experience of the new Year 5 Medical Student was excellent which Joanne will feed back to him.

- At the last meeting we were expecting to get an extra day of a PCN (Primary Care Network) MSK Practitioner per week – it was confirmed this was put in place and we now have three days per week of MSK. It was fed back from the group what a good service this is to have in the practice.
- Our PCN Pharmacy Technician who has been with the practice for four years is leaving at Christmas, a new Pharmacy Technician has been recruited and will be in post for a three week handover prior to the current employee leaving.
- The PCN are expecting a Paramedic back from maternity Leave in December, as yet we don't know how this will affect paramedic clinics in practice, we may get an additional clinic.
- Nurse Fenella has undertaken her Respiratory and Spirometry courses, taking this work over from when Nurse Sally retired and is now doing her Nurse Prescribing Course.
- Nurse Natalia is part way through her 2 year New to Practice Nursing Course and will gradually take over some of the roles currently being done by the other Nurses which require further training courses to undertake.

4.2 COVID Vaccines

COVID Vaccines are well underway, uptake has been around the same as last year for the groups included. Clinics have gone well and feedback is positive. There is one more clinic planned to use up the remaining vaccines. Any vaccines not used will then be taken back to the national system and we will receive no further deliveries.

4.3 Flu Vaccines

Flu Vaccine clinics are almost completed with one more evening tomorrow for under 65's at which point all but a few under 65s vaccines will have been used. All over 65s vaccines have been used. Any patients coming forward for Flu Vaccine will then be directed to Pharmacies. Uptake is the same as last year.

4.4 RSV Vaccines

RSV Vaccination clinics were done in September prior to the Flu and COVID Season. All eligible patients were contacted. Those eligible who did not come forward can come forward at any time now to be booked into normal clinics. As patients reach the age of 75 they will be invited for vaccination.

4.5 North Howden Development

Work will start properly with the ICB to start mapping out expected population growth and planning capacity requirements for a new build, the process will then roll on from there and the developer will be more involved once the mapping has been done. This is expected to start in April when new funding is available for this work to be undertaken.

Patient Group involvement will be needed in this development in various ways at different stages.

4.6 Building Capacity

In the New Year Joanne will be taking forward further work on the plans for extra consultation rooms with purpose built units on the car park. This will help identify the electrical requirements to enable an application for a new/increased electricity supply to the building.

Patient Group involvement may be needed with communication around this to patients.

4.7 New Phones

The new phone system was installed in August and reception opens for appointment booking from 8am. The install was extremely easy, the practice is very happy with the new system which has been installed in the majority of practices across the area. There have been no complaints about the phone system since the install which is very positive.

4.8 Practice Bandings

Joanne tabled information from the Primary Care Practice Indicators Dashboard detailing the achievement of the practice which is in the Achieving Practice banding which is very positive. The practice will be looking at these reports more closely when the data is up to date at end of year, although most of the data is pulled from indicators which we manage on an ongoing basis through different targets and systems.

Printouts were also provided for different Regions/ICBs around the country detailing numbers of practices in each banding in each region.

4.9 GP Collective Action

Joanne explained, GP Collective Action is not Practices going on strike. Practices over many years have taken on doing extra work which has not been funded, phlebotomy isn't funded along with doings ECGs, Spirometry, Shared Care Agreements where the drugs being prescribed should be done through the hospital but we can agree to take this on under an agreement with them, doing all the associated checks. Running pilot programmes for eg the ICB, audits and searches for the ICB and other organisations, administering contact with our patients on behalf of other services, and the list goes on.

GP Collective action is practices saying either individually or as a PCN or ICB area that they aren't going to be doing some of these any longer and the ICB or other services must find alternative provision or take back to do themselves. Or they don't happen anymore.

Enhanced Services which we sign up to do over and above the standard contract such as COVID and Flu Vacc, along with other immunisation programmes, Anticoagulation, Learning Disability Health Checks, Minor Surgery and many more, haven't been funded appropriately for many years now meaning practices do not cover the costs in providing these services. Many practices have given their notice on providing enhanced services meaning the ICB will have to find alternative provision.

As a result of this action, a review of Enhanced Services Contracts is currently underway with some of the services previously not funded at all being added into these contracts. These contracts will be released for us to see and review in the early new year and will come into effect in April 2025. We await the outcome to see what the new contracts hold.

Some of the other areas of work practices are likely to not start doing again unless funding is provided.

4.10 Darzi Report Comments on GP Services

Summary had been distributed to the group prior to the meeting. The report highlights huge variations in access to GP services across the country stating:-

'GPs are seeing more patients than ever before, but with the number of fully

qualified GPs relative to the population falling, waiting times are rising and patient satisfaction is at its lowest ever level. There are huge and unwarranted variations in the number of patients per GP, and shortages are particularly acute in deprived communities'

Howden is lucky in that we are fully staffed, many areas cannot find GPs or Nurses to fill positions. All the data from national and local sources puts Howden Medical Centre at the higher end of the scale for access, service provision and achievement against targets and indicators but the demand on primary care services has significantly increased without increases in funding to staff this.

This is a lot bigger issue nationally but is one of the reasons GP Collective Action has been taken, practices can't keep doing more and more with no more capacity and no more funding.

5. SECONDARY CARE UPDATE – ROBERT PICKERSGILL

Goole District Hospital comes under North Lincolnshire and Goole NHS Foundation Trust (NLAG). NLAG and Hull University Teaching Hospitals NHS Trust (HUTH), although not formally merged together, are run under one management team.

The Intermediate Care Board (ICB) is working with a 7% cost reduction to be achieved across the ICB footprint and are looking currently for this to be achieved equally by all trusts. NLAG and HUTH management team have got to find a 7% reduction in costs across the trusts.

The future of Goole Hospital is under discussion and the Governors are pushing for a Public Consultation on the future of Goole Hospital.

The group all agreed they would be involved with a consultation. Joanne confirmed she would help in advertising in the practice, on face book and on the website and would share with the neighbouring practices in the PCN to try and ensure there was a lot of public involvement in this and support for Goole Hospital.

6. ANY OTHER BUSINESS

Diabetic Eye Screening

This service can no longer be run from Howden Medical Centre. They are not replacing the current screening van which is beyond repair. They used to bring the screening van and use our meeting room a number of Fridays a year. They have now said they cannot use the meeting room any longer and require 2 clinical rooms to run the clinic which we do not have available. With other practices having the same issue with shortage of room availability, we have no indication currently where the venues for this service will now be., neither will we advised of that. Patients will receive invitations to attend wherever they are able to run the clinics from.

7. NEXT MEETING

A date for the next meeting will be sent out in due course.