

New Folly Surgery Patient Reference Group Meeting

Minutes from the Meeting held Wednesday 10 July 2024

Attendees:

Christian Jennings MBE: Practice Manager
Dr Tahlil Rashid – GP
Josh Elias – Clinical Paramedic
Rachel Lee - Chair
Pauline Anniss
Pam Gooding
Mike Malyon
Hazel Honey
Pat Dedman
Tina Davey
Roma Woricker
Marilyn Marston
Martyn Hart

Apologies:

Dr Sheetal Bailoor - GP
Dr Santana Chatterjee - GP
Gail Anspack
Hazel Jarvis
Gordon Black

START

Rachel welcomed everyone to the meeting.

MATTERS ARISING FROM PREVIOUS MEETING That are not covered in the minutes.

Travel clinic, this had been temporarily scaled back because of staff issues (illness, vacancies, leave etc.) and will not come back until the practice has full staffing. Patients are asked to bear with them whilst this is the case.

Pharmacy First, Christian was to report how it was going. He said he had no statistics, but from what he had heard is that the Pharmacy was particularly busy and had to take on extra staff to cope.

Action Christian to talk to Florence at Shadforth's pharmacy and obtain an update.

Parking at Broomfield Hospital, Martyn reported that he had chased the Trust about using the Park & Ride for parking, but still hadn't had any response. Rachel reported that the Trust were proposing to charge staff for parking and had developed a set of conditions (for example distance from the hospital) that if the staff member didn't meet they wouldn't get a parking spot even if they wanted to pay. This might free up more spaces, Rachel would get back to the PRG with more details.

PRACTICE UPDATE

Staff Update

Josh Elias gave quick introduction on his role, currently he works for the East Anglian Ambulance Trust running an admission avoidance response car. Basically, he responds to 999 calls where it isn't life or death and urgent car can be delivered at the patient's home.

He is also working at the surgery with the team but not contracted. He can dispense non-medical prescriptions (that is a prescription for medicines that do not need a doctor's sign off) and has been working on medical issues such as chest, ear, infections etc.

There have been some staff changes, there is a new placement student Gio de Belen, he is a bio-med science student working with the practice for the next 12 months. He works with a GP doing tasks such as ECG, urine sampling etc. which will allow him to cover a wide range of subjects whilst working in Primary Care.

As mentioned above there have been quite a few nursing issues with staff illness, leave and training that has left the practice with reduced capacity. One of the practice's former nurses, Catherine Gregory is helping on Mondays in July.

The practice is hosting medical students from Anglia Ruskin University, in years 1, 2 and 3 each doing a couple of weeks, that patients may see when visiting.

There is a part-time Physician Associate (not a doctor but can support less complex procedures), Carla Jordan and she is working on Wednesdays culminating with a full 2 week placement weeks 15 and 22 July to complete her year 1 training.

The surgery is well supported by the PCN associated organisations such as VitaMinds, Allied Healthcare and Social Prescribing.

PCN Update

The PCN (Primary Care Network – a network that represents a group of surgeries in the area) is initiating an access capacity audit and demand, looking at operating parameters such as waiting times, call answering times, patient times etc. which will be carried out over the next month or so. The PCN is also looking at Health inequalities, this will be carried out by the PCN itself.

Action the PRG will be updated when these reports come out.

Also being instigated in September this year will be Integrated Neighbourhood Care Team (INCT) concept, covering surgery groups. It is expected that the New Folly will be partnered with Doddinghurst, Shenfield with Hutton and Brentwood is big enough to be on its own. The PCN looking at the health and wellbeing need of the community will inform the INCT of the range of proactive care and support services already available, which will in turn determine what professional skill sets, roles and training needs within the INCT are required.

Action, the PRG will be updated on the progress of this initiative at the next meeting.

The PCN (Primary Care Network), via ACE (Accountable Care Enterprise), will start Covid immunisation for the housebound around October. Flu injections this year will also start in October (later to give the vaccine more time over the winter months before it deteriorates).

ICB Resilience Meeting

Dr Rashid gave an update on this meeting with the ICB. They were able to show that the practice was growing (estimated an additional 800 patients in the next 2/3 years) and that the surgery needed to increase its physical capacity to handle patients and training.

Also, the practice was the only one in the area that offered the DMARDS service, which is prescribing and monitoring patients that suffer from Irritable Bowel Syndrome, Arthritis, and certain drugs (such as Warfarin).

There are options, such as making an improved New Folly building and put admin staff in Brentwood Community Hospital, but that would make the staff too remote, and it wasn't favoured.

Another option was to improve the New Folly building by building upwards and rent shop and office space in the village. It was noted that to have clinical sessions upstairs might make access difficult for some patients and that would have to be overcome.

Dr Rashid said the ICM listened and seemed to take the ideas favourably, they would hear from the ICB soon and hopefully will receive guidance so that they could start planning.

ICB Quality Assurance Visit

The surgery would be subject to an ICB quality assurance audit on the 30 July. It will only be for 2 hours, and all expectations are that it will go well. If the assurers want PRG presence Christian will let us know.

Any Other Business

It was mentioned that one patient came into the surgery registered at the computer on the front desk, sat and waited to be called. After her appointment was missed, she asked at reception and found the nurse she wanted to see was sick and her appointment had been cancelled! But she didn't get any messages, nor did the check-in computer warn her.

Another said a similar thing happened to another patient, this time the patient checked in, waited until an hour after their appointment and then asked, to find the appointment time had been moved, again she hadn't been told.

Dr Rashid apologised on behalf of the practice and said that the check-in computer on the front desk wasn't smart enough to know what was happening. He said that the staffing problems had left them with issues like that and he could only express his regret that patients have been inconvenienced. It is very useful if this happens to PRG members, or reported to them, that they get the date and time so the practice can look into it. Christian said that he would remind reception staff of trying to warn patients beforehand, there was a process, but of course it was vulnerable for cancellations or emergencies on the day for early appointments.

Action Christian.

Dr Rashid was asked if, given the new government's promise to pump more money into the NHS, the practice was ready with ideas, like working with the District Nurses who have really suffered due lack of funds. Dr Rashid said they had their own plans as mentioned above ready, but something like national ideas would be put forward by their professional bodies rather than at grass routes level. However, this practice, perhaps unusually did meet regularly with the District Nurses and would if they could help them as much as possible.

Christian was actioned to make sure the practice did have an event soon for District Nurses to see if they could work more effectively together.

One of the PRG said she had been at an Alzheimer's meeting in Raleigh Essex where she found that none of their GP practices had any Alzheimer's training. She heard the national Alzheimer coordinator say that the New Folly was the **best surgery** in the region!

Christian reported that the surgery had now had British Sign Language training. Martyn asked him if the surgery would be up for age related hearing loss training as he understood the local Business Improvement District (Brentwood Connect) were thinking about providing retailers with free training in this area. The answer was affirmative,

Action Martyn once the BID has an offering to inform Christian.

On the subject of hearing loss one patient had asked if she could leave leaflets at the surgery offering lip reading and sign language training? Christian said if it was to do with health and for the community, yes that should be no problem.

Action Martyn to feedback and update Christian.

One member wanted to know if it was true that Ingatestone's pharmacy was closing as she had signed a petition to try to stop it. Dr Rashid & Christian were sure that this was a petition to help stop closing all pharmacies nationally, particularly those in remote areas and they understood Ingatestone's pharmacy was under no such threat. However,

Christian was actioned to talk about this with Florence at Shadforth's when he speaks to her about Pharmacy First.

A number of patients had asked where they get sample bottles from as the New Folly web site warns about pushing them through the letter box but not where you get them. The answer is from the surgery or the pharmacy,

Action Christian to make sure it says so on the web site.

DATE OF NEXT MEETING. Wednesday 16 October 2024, at 7pm.