**Darwen Healthlink**

**Minutes of PPG Meeting**

**Thursday 17th July 2020 – 18.00pm -19.30pm**

**Zoom Meeting**

**Present:**

Christopher Mcilveen – **Chair**

Hamad Saleem – **Vice Chair**

Jenny Corke – **Secretary**

Frances Procter – **Practice Manager**

Lisa Molloy – **Advanced Nurse Practitioner**

Graham Kenyon **– PPG member**

Lilian Kenyon **– PPG member**

Eileen guy- **Treasurer**

**Apologies:**

Terence young – **PPG Member**

Tim Barlow – **PPG Member**

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| **Item** | **Summary of discussion** |
| **1** | **Welcome / Introductions / Apologies:**  Chris welcomed and thanked everyone who has joined the meeting.  He also welcomed back Eileen guy who had been absent at previous meetings due to illness.  Apologies from Terence young, who had other commitments at the same time.  Apologies from Tim. |
| **2** | **Minutes from previous meeting:**  Due to COVID 19, the previous actions are no longer relevant. |
| **3** | **PPG update / Chair’s report:**  Chris has been busy with East Lancs. related things as has Hamed.  There are a couple of vacancies for the Public Participation Panel, for the EL Trust. There is an advert on their website, which explains what it is all about, so if anyone is interested or knows of anyone who may be interested, please let Chris so that he can get them connected with the application.  There’s a lot going on due to ~COVID 19. Chris is quite heavily involved in a programme of work being driven by one of the medical directors at Blackburn, which is all about Post ICU Rehabilitation, so these are patients wo have been in either ICU or one of the acute respiratory wards and this makes sure that they receive the correct care for their ongoing symptoms. Although you can recover from COVID, you can be left with ongoing respiratory problems, mental health problems and much more.  Hamad has been involved with the COVID 19 111 service. He is currently involved with test and trace for Lancashire. |
| **4** | **Practice update: To include: ‘Back to Better’, New recruits – GP’s.**  **New Recruits:**  Drs S and E Ahmed have recently retired from the Practice, and due to this the Practice has been looking for new recruits. We are in the process of interviewing for two salaried GP’s and these have been taking place over the past couple of weeks, with some very good candidates coming through. Frances should hopefully be able to give a further update at the next meeting or before. Dr Khan is currently with the Practice as a Locum, but could potentially become a salaried GP.  **‘Back to Better’**  **not back to normal, but trying to get it back there and making improvements**  Since lockdown, services have been running in the background. What the Practice is now doing is to move forward with more technical services like Zoom meetings, GP and ANP video calling/consultations. The equipment that we have been waiting for has now arrived. These are webcams and extra laptops, so we are now able to start to put this in place moving forward.  The Practice is now starting to open up more services such as chronic disease but we are being very strict on who we invite into the surgery. We are currently holding block clinics. This means that the PN will do a full day of diabetics, a full day of COPD/Asthma and so on (Spiro testing is still not being done due to COVID). This is to help with infection control. Practice Nurses have also been keeping in contact with patients who have chronic diseases via the telephone. Learning disability reviews are still being done but with caution.  Joint injections are currently being assessed. This is due to inflammatory issues and patients need to be assessed carefully to ensure that they don’t have COVID or symptoms of COVID.  Really try to push the message that we are still here, we can treat patients. If anyone has concerns, to contact the Practice and we will be able to help.  **COVID Survey:**  This was sent out to patients to get an idea of how patients were feeling during Covid, what they had experienced, what they felt had worked well and what had not worked well. This enabled the Practice to have an insight into what was happening with our patient population currently.  **Seasonal Influenza Survey: This was sent to patients who are eligible for a flu vacs.**  This was to see how comfortable our patients would feel about having their Flu vac. Also, if they would prefer their flu vac in this area or in Blackburn in one big central area with all of the other PCN;’s. Whether they would prefer a drive through or still a walk in clinic.  The survey results showed:  The majority of patients would still want the Flu vacs.  The majority of patients preferred to stay local for their flu vac.  Most patients still preferred to have a walk in flu appt than a drive through.  There was a mix of age groups for the drive through and the walk in clinic.  **The plan for the flu vacs at the moment:**  We would like the Health centre to be the primary location, with a walk through downstairs. There will be a conveyor belt system to prevent people sitting around. Infection control will play a huge part of this.  There is also the option of a drive through which will take place under gazeebos outside of the main entrance of the Health centre. There will be a route for the patients to follow in their cars.  The clinics will be run over 2 weekends, sat and Sunday and all staff (with exceptions) will be asked to work for periods of time to be arranged and discussed. This will be over 3 hour periods.  There is also the option of holding satellite flu clinics in small areas such a Hoddlesden etc.  We are not sure on how we will promote this as yet. At risk patients may be targeted slightly different.  This is currently in the planning stage and a definite structure has not been agreed as yet.  The PPG have offered their help wherever they can be used.  Frances has asked if this could be kept between our selves until there is further information. Thank you. |
| **5** | **Pathology testing in General Practice – Lisa Molloy ANP**  General practice generates 2 streams of blood testing: one from the investigative process when people are unwell and we are unsure of the route cause and the other tests we do as part of routine chronic disease management. We found that patients with hypertension, with no other clinical problems were having 7 blood tests every year routinely.  The NHS spends about 2.5 - 3 billion every year on pathology testing, so although individual costs of tests are very minimal, the magnitude of the numbers that we do are really quite significant. We do about 2.5 to 3 thousand blood tests per month in this Practice, so any change that could be made was significant.  When Lisa looked into the evidence of testing with hypertension, there was no evidence in doing a full blood count or thyroid function test in someone who showed no symptoms whatsoever. If someone did show symptoms then a full blood count or thyroid test would be done so there is a safety net in place.  Lisa collected data for two years (Graphs unavailable), so that there were good comparisons. From Oct 2019 to March 2020, it showed a substantial decrease in full blood counts and thyroid function tests undertaken. We did 44.6% less FBC and 63.5% less thyroid tests over that period of time. When you break down the costs, it saves around £190.00 per month or £2.25k per year. It was just looking at a process change and the evidence base for the Practice we were actually doing. This was a very in depth process and even though we look at the number of test and the costs of tests, it’s also significant in terms of the patients time and clinician time.  Overall, it was a really successful change, and has become embedded in Practice.  Frances congratulated Lisa on how well she has done and how much work Lisa has put into this and how much potential this has for saving money.  Chris is involved in the Academic Health Science Network, a national NHS Innovation Agency, who consider things like this that individual Practices have developed that could be wider used across the NHS. He would like to raise this at the next meeting with them with a view of inviting Lisa to do a presentation. |
| **6** | **COVID-19 Survey**  This survey was done to try and get an understanding of how the patient population have reacted to the circumstances around Covid and the changes to services that have had to be put in place. This went out to everyone over the age of 18, bearing in mind that some of these will not have had mobiles.   1. **How satisfied were you with your virtual / telephone appointment?**   The majority of patients were happy with the service.   1. **Do you think your appointment would have received a better outcome if you had been seen Face to face?**   The majority of patients said that it would not have made any difference.   1. **Would you prefer to have a face to face appointment?**   60% said no, they were happy to have a telephone / virtual appointment.   1. **Would you be happy to continue to have a virtual / telephone appointment after lockdown?**   65% said yes they would be happy for this to continue**.**   1. **Do you find our process using new technology easy to use for booking online and accessing appointments or ordering prescriptions?**   50% said yes, 10% said no, 35% have not experienced it.   1. **Are you happy to receive invitations, appointment reminders and general information etc. via SMS message?**   A resounding yes for this question.   1. **What is your experience of using the services during lockdown?**   The majority were very satisfied. A small portion was dissatisfied. They were asked to submit a comment explaining why which will be assessed.   1. Are you aware that the Practice has a PPG and what they do?   75% said no.  **Would you like to receive more information?**  60% said no. 40% said they would like more information. |
| **7** | **AOB**  The PPG is promoted on Facebook, the Practice Website and on the board in the Practice reception area. The need is to try and promote the PPG in different ways. The idea of sending out further information to the patients who requested further info with a link to the PPG page on the website. There is also the thought of a monthly newsletter.  The online application form on the website should be made more viewable?  Update the PPG page on the website to be more inviting? (PPG to make suggestions on how they want to do this).  Newsletter to be decided by the PPG. Jenny has offered her help and assistance and will liaise with Ben (who looks after the Practice Website) for his help with web changes. |
| **8** | **Date and time of next meeting.**  Thursday 3rd September 2020 @ 5.30pm via Zoom. |