The Grove Patients Group Sherborne Minutes 14th.April 2021 5:30pm

(Meeting conducted via 'Zoom')

Present: David Bartle (Vice Chair) **(DB)**; Dr Rob Childs **(RC)**; Joan Cooper **(JC)**; David Crothers **(DC)**; Dr Sally Dangerfield **(SD)**; Bruce Duncan (Chair – Apples PPG) **(BD)**; Tony Gordon **(TG)**; Roger Marsh (Chair) **(RM)**; Tony Meehan **(TM)**; Vicky Morland (Social Prescriber) **(VM)**; Alan Woodward **(AW)**;

Apologies: Gill Foott (Engagement and Communications Coordinator [PPGs]); Alex Kimber (Managing Partner); Vicky Russell (Social Prescriber); Arabella and Emily (Sherborne Girls – students).

The Chair opened the meeting by welcoming everyone to the eighth 'virtual' meeting of the group and welcomed the guest speaker Nicky Murdoch MBE - Independent Chair of the Armed Forces Public Patient Participation Involvement Group.

Resignations: The Chair reported that he had received notification from Vicki Addey tendering her resignation from the group due to increased commitments associated with her voluntary work at The Rendezvous. The Chair reported that he had responded to Vicki thanking her for her involvement with the PPG and noting that she still offered to remain available to volunteer her services in an ad hoc way.

1. Previous Minutes – 20th. January 2021

a. Matters arising:

i Health related project - Sherborne Girls students:

(TM) stated that he had recently met with Mrs. Mackintosh (Sherborne Girls School) along with students Arabella and Emily to further define the student's health related project. It had been agreed that the students would interrogate the various online digital services presently offered to patients for their usefulness and difficulties of use. It was anticipated that this project would be completed by the end of the present school term.

Action: (Arabella and Emily)

ii Sherborne Local Plan:

(RM) reported that he took part in a special meeting of Sherborne Town Council that was held to discuss their response to the Local Plan. He had made a case for additional healthcare facilities to be included in the Town Council's response which was readily accepted. Furthermore, the Blackmore Vale Magazine carried a full report on his input to the meeting. (See: Attachment 'A') In addition he also responded directly to Dorset Council on the Local Plan as agreed at the March PPG meeting.

Action: CLOSED

2. Practice Update - AK

a) General Update:

(RC) gave a short update on the work level within the Practice. He stated that the Practice was really busy and he felt that coming out of lockdown had resulted in many patients now approaching the GPs with health conditions that they have been holding back on. He asked for forbearance with the Practice as waiting times have increased due to having to cope also with the additional work relating to the Covid vaccination clinics. (RC) also stated that patients were being directed to eConsult which was proving to be very time consuming for GPs to deal with. However eConsult was in the process of being re-procured by the CCG and he would probably be involved in that process.

b) Covid-19 Vaccination Clinic:

Total Cohort: 18,176

Firstly (RC) stated that the Covid vaccination clinics run by the Sherborne Area Primary Care Network were going very well. He then shared some figures with the meeting showing the number of patients who had received their vaccination to date:

```
1<sup>st</sup>.Dose given:
                   14,468
2<sup>nd</sup>.Dose given:
                   4,046
Declined:
                   238
Invitation sent:
                  8,443
Not given:
                  444
All cohorts 1-12: 18,176
All cohorts 1-9:
                  13,035
Cohorts by group (% uptake – 1<sup>st</sup> dose):
   All cohorts 1 -12:
                                                         78.7%
   All cohorts 1 - 9:
                                                         96.6%
   Residential care home patients:
                                                         97.7%
   Age 80+ years:
                                                         99.4%
   Health and Social Care Workers:
                                                         99.3%
   Age 75 – 79 years:
                                                         99.0%
   Age 70 – 74 years:
                                                         97.9%
   Clinically Extremely Vulnerable:
                                                         98.6%
   Age 65 – 69 years:
                                                         97.3%
   Age 16 – 64 years underlying health conditions:
                                                         93.3%
   Age 60 – 64 years:
                                                         96.8%
   Age 55 – 59 years:
                                                         93.7%
   Age 50 – 54 years:
                                                         91.4%
   Age 40 – 49 years:
                                                         79.2%
   Age 30 – 39 years:
                                                         22.1%
   Age 18 – 29 years:
                                                         6.3%
Cohorts by group (% uptake – 2<sup>nd</sup>.dose)
   All cohorts 1 -12:
                                                         21.3%
   All cohorts 1 - 9:
                                                         29.3%
```

The supply of vaccine was slowing with no further 1st.dose vaccine expected at the present stage for a couple more weeks.

There had been no noticeable drop-off of patients relating to the blood clotting issues although some patients had raised queries.

(JC) queried what the surgery would look like post-Covid regarding face-to-face appointments following the increased use of digital technology during the present Covid pandemic as she was considering writing an article on the subject for the next Practice Newsletter. Following discussion regarding the ease of use of the NHS App she felt that she might reconsider and postpone the subject to a later date. However, (RC) stated that GPs had to be very mindful of care and there would still be a place for face-to-face consultations with patients.

Returning to the NHS App (AW) raised concerns that it was difficult to complete to process to obtain full information and that patients may request additional access information from the Practice and maybe some form of notice could be added to the Practice website. (RC) stated that he understood the problem, but requested that patients did not contact the Practice at present during this time of heavy workload. He agreed to investigate a suitable note for the website.

ACTION: RC

Going back to the use of digital technology (TM) questioned what Apps the two Sherborne Girls students could use for comparison. It was agreed that he would email Amanda Mackintosh at Sherborne Girls and then co-ordinate the student's project with (RC).

ACTION: TM

3. Armed Forces Public Patient Voice Group:

Nicky Murdoch MBE as Independent Chair gave the meeting a detailed presentation on the purpose and intent of the group. (See: Attachment 'B'). She completed the presentation by stating that the PPG could help by identifying forces patients from the south-west area who had lived experience. She was also pleased to see that the PPG had ex-military people on it. In addition the PPG could highlight what services were available for Armed Forces personnel including the 'Forces Connect App'.

(TG) opened the discussion by relating to his experience from service life stating that he felt that there were two areas of support, one for serving members and the other for their families. Nicky Murdoch stated that both service personnel and their families would receive equal parity.

Nicky also stated that certain health related problems that concerned veterans, such as prosthetics would fall outside of the NHS GP remit.

Nicky also felt that it was sometimes the case where forces veterans felt that they should be able to obtain priority treatment from the NHS, but this was a misunderstanding that probably stemmed for the forces covenant that states 'no disadvantage'. However this refers to those with mobility issues. (SD) stated that in her experience she did not encounter patients demanding a higher priority for treatment on the basis that they were military veterans.

Regarding the further work that both the Medical Practice and the PPG could do was for the PPG to identify what additional help there is in the wider community for veterans and also for the Practice to identify who among their patients were military families of service personnel and also who were military veterans.

ACTION: SD and PPG Members

4. PPG Activities Since Last Meeting:

- Attendance at CCG Public Engagement Group meeting
- Attendance at North Dorset PPG Chairs meeting
- Production of report for March and April STC meetings
- Attendance at workshop on cancer awareness Communities Against Cancer

5. Reports:

a) Yeatman Hospital – Friends of the Yeatman Hospital (FOHY):

(TM) gave a brief update on the activities relating to the Friends of the Yeatman Hospital stating that they were basically in three areas:

i) Funding:

Although capital projects had been on hold during the Covid pandemic the FOYH had provided a new piece of equipment in the Physiotherapy Unit and work was ongoing in relation to the conversion of an area into a kitchen for the stroke patients. Other activities had been in relation to Valentine's Day messages of appreciation for the hospital staff and flowers for patients on Mothering Sunday and Easter etc.

ii) Minor Injury Unit (MIU):

Lobbying for the reopening of the MIU had continued involving the local MP and Sherborne Town Council which had resulted in confirmation that the MIU will reopen but no definite date had yet been established.

iii) FOYH 70th.Anniversary:

As previously reported plans were underway regarding events through 2021/2 to mark the 70th. Anniversary of the FOYH which officially starts in July and will be ongoing for twelve months. A programme was under discussion with the local schools and a 6th. Form student from the Gryphon School had been approached to produce a film relating to the activities and the wider Sherborne. In addition discussions were taking place with Sherborne Town Council about holding a celebration garden party in one of the council owned gardens.

b) Sherborne Town Council (STC):

(RM) reported that he had attended the March meeting of Sherborne Town Council and requested that they record the fact that the 11th Covid vaccination clinic held by that date had been manned by around 50 clinical and clerical staff from the Grove, the Apples and Yetminster Practices, along with 30 volunteers from the local community and a staggering 1,926 vaccinations were carried out in a 12 hour period bringing the total number of patients vaccinated to 12,361. He felt that this required recording to show the great effort that was played within our local community. Subsequently the Town Council wrote a letter of appreciation to the PCN.

c) North Dorset PPG Chairs Meeting Update:

(RM) reported that the most recent meeting held on the 7th.April consisted of a presentation on the work of Dorset County Hospital Research and Innovation Group by group head Dr Zoe Sheppard. In addition Sara Stringer - Social Prescribing & Wellbeing Coordinator gave an update on her work at Blandford.

d) Health Champions:

(VM) stated that local health walks were starting on Friday 16th.April from the Paddock Gardens in Newland and these would become a regular weekly event.

She also stated that the Health Champions were investigating ways of supporting other local projects such as the 'community fridge', 'Sherborne Community Kitchen' and the 'community outreach pod' being set up in Cheap Street.

e) CCG PPG Lead Report:

Although Gill Foott was unable to attend the meeting she had provided a report. (See: Attachment 'C').

f) CCG Public Engagement Group (PEG):

(RM) stated that the PEG held a meeting Monday 12th. April at which the subject of the Health & Social Care White Paper was reviewed. Sherborne Town Council had agreed that in his capacity as a member of the CCG Public Engagement Group that (RM) would give them a presentation on the subject at their next meeting on the 19th. April. This would allow the work that was started in November 2019 by organising a meeting of interested parties held in the Digby Hall, which was sadly brought to a halt by the Covid Pandemic, to be built upon

6. PPG Projects:

a) Cancer Awareness:

(RM) stated that he had attended two workshops in March that were run by the Hampshire based group 'Communities Against Cancer' and as a result he had received an offer of a presentation to the PPG by Vikki Andrews — Cancer Matters Wessex. This could probably be the basis for a future local cancer awareness campaign run by the PPG.

ACTION: All to note

7. Apples PPG Update:

No meeting.

8. Any Other Business:

a) Practice Newsletter:

It was agreed that an updated newsletter should be produced and a meeting arranged between (JC), (TM) and (RM). It was agreed that (RM) would suggest some suitable meeting dates.

ACTION: RM

b) General Practice Awards 2020:

(RM) stated that last year both he and (TM) had nominated both Dr Rob Childs and Alex Kimber for awards in the General Practice Awards for 2020. These were national awards with hundreds of entrants from right across the country. Although not outright winners in their groups, it was well deserved that Rob was one of seven finalists for the General Practitioner of the Year award and Alex was one of seven finalists for the Practice Manager of the Year award.

c) Weekly Covid Vaccination Update:

(TM) stated that he found the weekly updates produced by (RC) very informative and although they were circulated on Facebook and the Practice website etc., he asked if they could be sent to the local media for further publication. (RC) stated that he had no objection to this.

ACTION: TM

9. Date of next meeting:

Wednesday 26th. May 2021 at 5.30 pm. via Zoom video conferencing.