

The Grove Patients Group
Sherborne
Minutes
29th.September 2021
5:30pm
(Meeting conducted via 'Zoom')

Present: Jean Bateman **(JB)**; Jane Carling **(JC1)**; Joan Cooper **(JC)**; David Crothers **(DC)**; Tony Gordon **(TG)**; Alex Kimber (Managing Partner) **(AK)**; Roger Marsh (Chair) **(RM)**; Tony Meehan **(TM)**; Arabella and Emily (Sherborne Girls – students).

Apologies: David Bartle (Vice Chair) **(DB)**; Dr Rob Childs **(RC)**; Bruce Duncan (Chair – Apples PPG) **(BD)**; Gill Foott (Engagement and Communications Coordinator [PPGs]) **(GF)**; Vicky Morland (Social Prescriber) **(VM)**.

Prior to the start of the meeting the Chair **(RM)** personally thanked both Arabella and Emily for the report that they had produced regarding eConsult and the fact that it was considered in such high regard by NHS Dorset – Clinical Commissioning Group.

1. Previous Minutes – 18th.August 2021

a. Matters arising:

Cancer Awareness Presentation Material:

(RM) stated he had included the Macmillan Cancer Awareness presentation material as Appendix 'A' to minutes of the August PPG meeting. **Action: CLOSED**

2. Practice Update:

General Update:

(AK) reported that the Practice was extremely busy with the situation not previously experienced. There were a number of patients who were genuinely ill waiting to be seen and other patients who were awaiting secondary care appointments. In addition there were a number of patients with severe mental health issues. Furthermore the Practice was experiencing a backlash from a small number of patients who were desperate to be seen face to face. These patients were becoming quite abusive with both the clinical and reception staff. However, the Practice continues to offer face to face appointments to patients and it appears as though the press is not helping by stating that in general practice face to face appointments are no longer available. The problem appears to be that everyone wants the 'same day' service, which under the present conditions is impossible to provide. Typically a GP workload pre-pandemic in the Practice was holding around 35 to 40 consultations per day and post-pandemic this has now risen up to 60 consultations per day.

The good news was that an additional GP would be joining the Practice from the first week in December and he will be working three long days per week.

In addition Dr Paul Armitage, who is presently working at the Practice, will be staying up to Christmas.

The Practice also has a bank nurse working at present and she is supporting the respiratory clinics. Furthermore, there will be a new nurse Aimee who will be starting full time at the beginning of October. The whole team is expanding with additional administration staff starting.

(RM) Felt that as a patient group we should make patients aware of the situation, both that there are face to face appointments available and also the fact that patient abusiveness will not be tolerated by the Practice. It was agreed that the PPG would put a note together to make patients aware of the situation. **Action: (RM)**

(RM) questioned the Practice on their experience of patients presenting at the surgery with minor injuries rather than attending the MIU at the Yeatman Hospital. (AK) stated that the Practice was receiving a great number of queries from patients who were unable to get a satisfactory attention by using the NHS 111 service, but in her experience patients were resorting to attending the A&E Department at Yeovil District Hospital.

(TM) commented on the fact that work was ongoing through the Friends of the Yeatman Hospital to not only secure a walk-in service at the MIU, but also to safeguard its future.

(AK) informed the meeting that Covid clinics were commencing at the Digby Hall on the 7th.October and that patients over 80 years of age were being invited by letter to attend for their Covid booster vaccination. The letters to patients also contain details for their flu vaccination appointment.

(TG) questioned whether it was possible for both vaccinations to be given at the same time, but (AK) stated that although this could be carried out it was not possible due to the non-availability of the flu vaccine. Additionally, both care home residents and carers will be given both their Covid booster vaccination and flu vaccination together during October once they had reached a period of 26 weeks following their second Covid vaccination.

Sherborne Town Council would be approached once again with a request to provide free parking for healthcare workers who will be working at the clinics.

3. Armed Forces Patient Participation:

(TG) gave a report on the initial 'scoping' meeting of military veterans that was held at the Raleigh Hall, Digby Road on Saturday 25th.September. The event was attended by around 30 ex-service military veterans from Sherborne and the surrounding area. The event was a low key get together with the aim of determining both the need and format for future events. Concern was raised by some that attended regarding the lack of available nearby parking, but notwithstanding that the event was considered to have been very successful.

On behalf of the PPG, (RM) thanked (TG) for the work that he had done behind the scenes to make the initial event a success.

Work was now ongoing to organise both the format and location for future regular meetings.

Action: All to note.

4. Cancer Awareness/Support Group:

(RM) updated the meeting stating that plans were in hand to hold an initial drop-in meeting on Tuesday 26th.October from 2.00 – 4.00 pm at the community room at Manor Court, Newland. The purpose of the meeting was to determine a need with the aim of setting up a cancer support group in Sherborne for both patients and carers. This event was being supported by Macmillan Cancer Support.

In addition (RM) stated that he had been in contact with other local cancer support groups at Dorchester, Weymouth/Portland, and Bridport who had all offered their support.

5. Sherborne Orienteering Project:

In his absence (DB) had provided a report on the project. He stated that he had attended the September meeting of Sherborne Town Council to support a funding application made to them in respect of the project. He was pleased to report that Sherborne Town Council had agreed to fund the project with a sum of £350. In addition the Sherborne Market had provided funds of £350 and Public Health Dorset had funded £500. This meant that the required total of £1,200 to kick-start the project had been met.

6. PPG Activities Since Last Meeting:

- 24 August – Meeting Vicky/Tony G/Roger – determine details of Military Veterans event
- 9 September – Health Champions meeting
- 13 September – Military Veterans – planning meeting
- 14 September – Cancer Support planning meeting
- 14 September – FOYH Executive Committee Meeting
- 20 September – Sherborne Town Council Meeting
- 21 September – Military Veteran – planning meeting
- 22 September – North Dorset PPG Chairs meeting
- 22 September – FOYH Annual Meeting
- 23 September – Health Champions meeting
- 23 September - Building Health Partnerships across health, care, voluntary and community sector
- 24 September – Meeting with Jon Sloper – Help and Kindness Dorchester
- 25 September – Military Veterans Support Group
- 29 September – Military Veterans – wash-up meeting

7. The Gove PPG Annual Meeting:

a) Approve PPG Annual Report:

The report on the PPG activities to be presented at the annual meeting had been previously circulated to committee members and subsequent amendments/additions made. On that basis the committee agreed to accept the report as updated.

b) Agree proposed time of Annual Meeting:

The committee agreed that the Annual Meeting should be held on Wednesday 27th.October at 5.30 pm using Zoom conferencing media.

c) Nomination papers:

(RM) stated that he had sent out nomination papers to members, but to date no nominations for the positions of Chair and Vice Chair had been received. **Action: All to note.**

8. Reports:

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

(TM) gave an update on the most recent activities of the FOYH. These covered those relating to the 70th.Anniversary of the founding of the FOYH and included meetings with the local schools to determine a timetable and schedule for their involvement in the activities. In addition it was intended to hold a service of thanksgiving in Sherborne Abbey on the 14th.May 2022 at which members of all local churches would be invited.

(TM) also reported that the latest FOYH Newsletter was about to be issued which included items relating to the support of young people with mental health issues as well as details of the financial support that had been made towards the breast cancer unit at Yeovil District Hospital. He also stated that the FOYH were looking to recruit more volunteers to help with the charity.

b) Newsletter Group Meeting

Since the last PPG meeting the newsletter group had met and subsequently Issue 7 of the Grove Newsletter had been published. It was noted that this edition had increased to 6 pages from the 4 pages of previous editions.

c) Sherborne Town Council (STC):

(RM) stated that he had attended the September meeting of Sherborne Town Council and reported on the PPG ongoing activities. In addition he had given a verbal update to the meeting on the following:

- Car Parking – volunteers parking behind the Manor House
- Flu clinic update

- Covid Booster
- Military Veterans
- Cancer Support
- Integrated Care System

d) North Dorset PPG Chairs Meeting Update:

(RM) reported that he had attended the latest meeting held on the 22nd.September. (See Appendix 'A' for a draft copy of the minutes of the meeting).

e) Health Champions:

In her absence **(VM)** had provided the meeting with an update report:
(See Appendix 'B' for a copy of the report)

f) CCG PPG Lead Report:

In her absence **(GF)** had provided an update on activities across Dorset.
(See Appendix 'C' for a copy of the report)

g) CCG Public Engagement Group:

No meeting – next meeting scheduled for 28th.October.

9. PPG Projects:

a) Ability to reach out to younger patients:

(RM) asked our student PPG members if they could investigate ways (social media and other) that the PPG could relay health related information to younger patients. **Action: (Arabella and Emily)**

10. Apples PPG Update:

In the absence of **(BD)** it was reported that the Apples PPG meeting was in progress at the same time as the current Grove PPG meeting.

11. Any Other Business:

a) Blood Tests:

(RM) asked for an update on the latest situation regarding blood tests being carried out by the Practice following the shortage of test tubes previously raised at the last PPG meeting. **(AK)** said that the ordering of tubes was back to normal but the practice had been asked to conduct the backlog of tests over the next 8 weeks such that the test lab was not swamped with sample analysis. The practice was giving priority to those patients suffering with a chronic illness.

b) Sherborne Health and Wellbeing Directory:

(RM) reported on a meeting he had recently with Jon Sloper - Co-Founder and Director of Alacrify Foundation CIC - #HelpAndKindness at which they discussed ways of getting health information out to those people who were not or did not want to be digitally connected.

c) eConsult:

It was agreed to monitor future activity relating to patients concerns over the use of eConsult.

d) Grove Practice Name Sign:

(JC) felt that the Practice needed to proclaim the fact that it was a medical centre by placing a name sign across the beam at the entrance stating 'The Grove Medical Centre'. It was felt that this could be looked into at some future date.

APPENDIX 'A'

North Dorset PPG Chairs meeting – 22 September 2021

Via Zoom

Notes of Meeting

Present:

Tony Bishop (TB)	Stalbridge community representative
Gill Foott (GF)	Engagement & Communications Coordinator, Dorset CCG
Ian Gall (IG)	Chair, Sturminster Newton & Marnhull PPG
Mark Hebditch (MH)	Chair, Gillingham PPG
Roger Marsh (RM)	Chair, Grove PPG
Charles Summers (CS)	Director of Engagement & Development, NHS Dorset CCG

Apologies:

David Bartle (DB)	Vice Chair, Grove PPG
Robert Cobb (RC)	Chair, Shaftesbury & Fontmell Magna PPG
Bruce Duncan (BD)	Chair, Apples PPG

1. Welcome and Apologies

Apologies were received from RC, DB and BD.

2. Notes of last meeting and any actions or matters arising

Matters arising from last meeting

Dr Yule has confirmed her attendance at the November meeting.

PPG online conference – GF has discussed with colleagues but following discussion we would prefer to revisit this possibility following the Covid vaccination booster programme.

CCG Estates update – an update had been circulated from Andrew Galpin at Dorset Council.

Pharmacies in North Dorset offering Covid-19 vaccinations – update circulated that Pharmacy South West has confirmed a pharmacy in Gillingham is due to offer these for phase 3 of the vaccination programme. These will appear on the National Booking system shortly. The new locations have been agreed with the Vaccination Team to ensure a PCN system wide network of delivery.

4. Introduction to Charles Summers, Director of Engagement & Development, NHS Dorset CCG

CS introduced himself and explained his role to those of the group who had not yet met him. He provided an excellent overview of the work of Our Dorset (<https://ourdorset.nhs.uk/>) as the CCG transitions into the Integrated Care System (ICS). There is a huge amount of work under way to develop the ICS board and the Integrated Care Partnership (ICP) so that communities are served as best as they possibly can be. The partnership workstream in terms of system engagement is led by Sally Northeast, Deputy Director of Communications and Participation at Dorset Healthcare

University Foundation Trust, and Frances Aviss, Senior Public Engagement Lead at the CCG. CS said that Jenni Douglas-Todd has been appointed as the first independent Chair of the ICS Board. The next appointment is likely to be to the role of Chief Executive Officer followed by a number of Non-Executive Director posts. It is incredibly important to ensure we engage with communities in meaningful and useful ways. CS reminded the group that all the arrangements under way were dependent upon the passing of the requisite legislation in time for the deadline of 1 April 2022. It was hoped that all appointments to the Board would be complete by the end of 2021. CCG staff had been assured they would have a safe transfer to the new organisation and that continuity of their work with their communities was vitally important.

RM thanked CS for the update. He expressed concern that the partnership work the town councils and voluntary groups had begun with the Health and Wellbeing Strategic Group had fallen by the wayside at the advent of Covid-19. This work needs to be started up again. RM attends Sherborne Town Council meetings and provides a report each month to ensure the Town Council is aware of what is happening with the development of the ICS. CS said it was so important the Health and Wellbeing Boards continued to work with the voluntary groups and PPGs. He would discuss this with Frances Aviss and Sally Northeast to ensure the work they are involved with includes partnership working with the voluntary and community sectors. IG said that internal communications had started within the local authorities, however better communication was needed in terms of what and why this matters to the people they serve. CS will take this back to the ICS communications lead who had connections into the local authorities.

MH endorsed IG and RM's comments. He said the CCG is brilliant in engaging with local communities however Dorset Council was very remote. Planning is one of the Council's biggest responsibilities however decisions were not discussed at local level. MH felt it would be a challenge for Frances and Sally to get the Council to emulate the communications work of the CCG. CS said that Dorset Community Action and the Community Action Network were very well connected within in their communities. He suggested inviting local councillors to one of the North Dorset Chairs meetings, to have these conversations they could then report back to their organisations. CS said that the two local authorities are fairly new organisations, and the ICS would also be a new organisation. It would take time to embed new relationships, but continuity was very important. MH said suggested linking in with the Dorset Association of Parish and Town Councils (DAPTC).

RM advised Sherborne Town Council has a new Town Clerk who is changing portfolios and asking local organisations to provide updates and reports to the Council as this was important local knowledge. It would be great to invite a representative from the Town Council to a future North Dorset Chairs meeting.

TB said that Stalbridge had previously had a Town Council but when the reorganisation took place all the local knowledge disappeared along with the stipend. IG was concerned that at the beginning of the formation of the ICS, there was to be a single pot of money, however this doesn't seem to be the case now with health and care sector having separate budgets. TB said it was very important to ensure there was sufficient scrutiny. CS said that his task was to secure the Non-Executive Directors for the ICS Board and there would be a requirement that one of the NEDs had financial and audit skills and experience.

MH agreed that co-design at local levels seemed to have disappeared. RM raised concerns about how well the Primary Care Networks (PCNs) would be represented on the ICS board. CS said this was a new chapter and the clinical leadership at board level was still being developed, however the organisation was working hard to ensure the clinical leadership and professional support continues into supporting partnership working. Dr Simone Yule sits on the System Leadership Team which is committed to retaining all the clinical knowledge and local support.

Before leaving the meeting CS expressed his appreciation of the work the PPGs do, he said it is invaluable to the organisation when informing how future services will be run and set up. He would like to attend another meeting in the New Year and asked GF to liaise with his personal assistant to set this up.

ACTION - GF

IG agreed it was clear that the CCG was committed to public engagement, it had a team of engagement and communication staff and dedicated PPG support roles which was rather unusual across the country.

5. Round Table Updates

Sherborne – updates provided by RM

The meeting noted RM's previously circulated report.



Grove Medical
Centre - Patient Part

RM added that there will be a “drop in” meeting for Military Veterans on Saturday 25 September, building on the fact that the surgery has “veteran friendly” accreditation. Rob Munro and Dr Sally Dangerfield (both veterans themselves) will be in attendance. The PPG is continuing to work closely with the Health Champions, and RM in his role as Chair has delegated some projects to members of the PPG. The PPG is continuing to forge a good relationship with the Royal British Legion.

RM continues to regularly attend Sherborne Town Council meetings. Grants had been received from the Town Council and local charities for the orienteering project, meaning that funding was sufficient to get the project up and running.

Lack of availability at the Yeatman MIU continued to cause great concern and the Friends of the Yeatman had organised a campaign, collating patient experiences as evidence for their discussions with Dorset Healthcare. Sherborne Town Council had passed a motion giving support to the campaign. RM and MH were due to attend the next meeting of the Building Health Partnerships group.

The next meeting of the Grove PPG would be held on Wednesday 29 September where a vote would be taken on approval of the annual report. The AGM would be held on 27 October.

Blackmore Vale Partnership (Sturminster & Marnhull) - Update provided by IG

The meeting noted IG's previously circulated report.



BVP Report -
Sept.docx

IG added that the steering group continued to meet online every six weeks. They were looking for a venue to enable them to hold face to face meetings, some members of the group were happy to attend the surgery as a meeting venue but weren't confident to meet in other venues.

As per IG's previous report, some of the eConsult submissions had been outsourced to external GPs due to a huge increase in use of the platform.

Information continued to arrive on a day-by-day basis regarding the Covid-19 booster vaccines.

The group discussed how best PPGs could help to counteract some of the negativity being seen in the press aimed at GPs. Although face to face appointments were still available when clinically necessary, there had been a lot of negative press and even a Change.org petition had been raised. MH said that medical staff had been very upset by some of the comments on social media. The group agreed that more positive patient experience stories were needed as a counteraction.

Stalbridge – update provided by TB

TB had recently had his flu jab at his local pharmacy as he felt it so important to support local businesses. He had asked the pharmacy whether they might be offering Covid-19 booster vaccinations, but the pharmacist didn't seem to think so. The pharmacy had administered 150 so far.

There had been a slight increase in patients asking for help from the Car Scheme, which was probably due to an increase in face-to-face medical appointments. No more drivers had yet been found.

TB confirmed he continues to feed relevant information to the Town Council.

Gillingham – update provided by MH

MH said that the PPG was looking at defining its relationships with HC and SPs. Discussions were under way with the practice regarding database management, how communications could be circulated to PPG members and whether there should be a virtual PPG.

The local car service was now up and running, a couple more drivers had been recruited but some drivers still expressed caution and didn't want to drive at the moment. Demand for the service had increased.

The practice continued to be under immense pressure. A second Social Prescriber had been appointed and the whole care team had taken a huge leap forward.

MH confirmed that a Gillingham pharmacy would be offering Covid-19 booster vaccinations, very positive news.

6. Any Other Business

IG said that Public Health England was due to close at the end of September and would be replaced by a new agency. RM said that the announcement had been made last year but very little heard since.

TB said he had seen that DBS certificates can now be applied for online.

7. Date of Next Meeting

Wednesday 17 November 2021 – via Zoom link previously sent.

APPENDIX 'B'

Notes for PPG Meeting – update from Health Champions

The Health Champions are continuing to meet and work on projects, though with the return to work and leisure activities there's been a slight drop-off in support for projects that require a regular long-term commitment. However, Health Champions, volunteers and the wider community continue to provide invaluable support for the flu and Covid Vaccination clinics, helping out in the carparks and indoors.

A number of new projects are being developed.

Cancer Awareness Support Group. The first meeting will be on Tuesday 26 October, drop in session, 2 to 4 at the Community Rooms, Magna Housing, Manor Court, Newland. Supported by Tracey Street of Macmillan, as well as other local groups, aiming to establish the level of need and interest in a cancer support group.

Military Veterans. First session planned for Saturday 25 September at the Raleigh Hall. This was to gauge interest and support in this as a regular feature. Update: excellent turnout, wide range of ages and military backgrounds, lots of very good feedback. Vicky was approached by two veterans with regard to issues that they needed help to resolve. We are meeting to discuss how to proceed.

Orienteering. Roger Marsh confirmed that David Bartle has got funding to proceed with the project of establishing a fixed orienteering course of different lengths in and around Sherborne. This is an excellent resource for the town and the community.

Sherborne Health Walks. These run every Friday at 2pm, from the Paddock Gardens (next to Waitrose) walking around Sherborne for up to an hour.

Chris Hardy reports that these are going well but really need a few more walk leaders as it is currently not possible to split a large group into Striders and Strollers and he is concerned that without this we will lose some of our regular attendees.

Health and Care Directory. We've had a number of updates about local activities and are looking at the best way forward.

APPENDIX 'C'

Report to PPGs, September 2021 – Gill Foott

Covid News: for the seven-day period up to 14 September Dorset's numbers had seen a drop in cases. Dorset Council area stood at 227 cases per 100,000 population (862 cases) and BCP council area stood at 212 cases per 100,000 population (842 cases). There were 28 people in hospital being treated. For the period up to 18 September vaccination doses stood at 1,153,984 which is very positive news.

Hopefully you will have seen the recent announcements of booster jabs for the high-risk groups and also vaccinations for children, so the vaccination programme will be continuing for some time to come. Information on the booster programme in

Dorset will be made available on vaccinations page of the CCG's website

www.dorsetccg.nhs.uk/vaccinations and latest news can be found at

<https://www.dorsetccg.nhs.uk/latest-news/>

The most vulnerable will be the first to receive the booster vaccination. Care home residents, health and social care workers, people aged over 50, those aged 16-49 years with underlying health conditions that put them at higher risk, adult carers, and adult household contacts of immunosuppressed individuals will be prioritised.

The Dorset Cancer Partnership has a free Chemotherapy webinar on 1 October 2021 at 2.00-3.15pm. It's aimed at NHS staff, carers or volunteers providing support to cancer services in Dorset and there will be a presentation by Sister Louise Watkinson from Oncology – link here: <https://t.co/fjhDJI93AJ?amp=1>