

# **Patient Participation Group Meeting**

**By Videoconference**

**Tuesday 13<sup>th</sup> April 2021, 6.00 p.m.**

**Seaford Medical Practice**

## **Minutes**

**Attendees:** Sue Smith (Chair), Susan Hewer, Penny Lower, Sandy Richards, Des Prichard, Steve Machan, John Edson, Charis Isted, Zena Gibbs, Myrtle Kracke, Dr Dan Elliott (SMP), Phil Abbott (SMP), Lorraine Downey (SMP), Nadia White (SMP)

**Apologies:** David Burleigh, Pam Burleigh, Christina Machan, Peter Norman, Roy Dobson, Maggie Chitty, Min Stone, Ruth Mitchell, Gill Allen, Val Callon & Jean Cash

### **1. Welcome:**

- 1.1.** SS welcomed everyone to the meeting. LD will take brief notes of the meeting, which will be circulated to members and posted on the Practice website in the usual way
- 1.2.** SS welcomed NW, the new Business Manager at SMP. NW introduced herself to the group. Her background is in NHS Community Services, including working closely with general practice. NW is looking forward to her new role at SMP and to working closely with the PPG
- 1.3.** the notes of the previous meeting were agreed as a true and accurate record of the meeting
- 1.4.** Update on action points from previous meeting:
  - Add wording to the Practice website regarding criteria constituting “extremely clinically vulnerable” (2.2.5): DE advised that the criteria and advice had changed in the period since the last meeting, including the stopping of formal advice to “shield”. On this basis, no specific comment was added, but a link was added to the Sussex Health & Care Partnership Vaccination Programme website

- Discuss with DP, Vaccinations Champion, how to share information in a timely, informative and succinct way (2.2.7): actioned. See update below

## **2. COVID-19 Issues:**

**2.1.** Update from DP, Seaford COVID Vaccinations Champion: DP gave a detailed update, including:

- He has weekly calls with NHS Sussex Commissioners and agrees current key messages to share
- He has a weekly call with DE at SMP and also liaises with Old School Surgery
- He has recently been in touch with Mark Cannon, Chief Executive at South Downs Health & Care (SDHC) GP Federation about how the Federation's COVID vaccinations work can be improved
- DP keeps an eye on local social media to identify any current or emerging issues and concerns
- From information gathered, DP provides regular updates to PPG members and to other Seaford community groups
- Current key messages include:
  - the vaccination programme across Sussex is going very well (information previously shared with the PPG by SS shows that at the end of March, Seaford Primary Care Network had the highest vaccination rate in East Sussex and the 4<sup>th</sup> highest in Sussex)
  - if any PPG members know of a patient locally in the Priority vaccination groups who wants a vaccination but has not had one, please let DP know
  - SDHC's main vaccination centre has moved from the Sovereign Centre in Eastbourne to the Crumbles in Eastbourne; this is because the Sovereign Centre has reverted back to being a Leisure Centre. DP has spoken with NHS Sussex Commissioners on whether a main site can be set up in Seaford. The response is that all main sites have been planned and set up, so

Eastbourne will continue as the main vaccination site for Seaford residents

- DP is liaising with SDHC about how to improve access and service at the Crumbles site

## 2.2. Update from PA:

- PA advised that SMP had worked hard to contact patients who had not come for a vaccination in the Priority Groups, including individual conversations with those in more vulnerable groups
- There is a vaccination clinic in Seaford on Saturday 17<sup>th</sup> April to provide 2<sup>nd</sup> vaccinations to those that received their 1<sup>st</sup> vaccinations in Seaford on 30<sup>th</sup> January. The approach is to provide vaccinations in Seaford to those that received their 1<sup>st</sup> vaccination in Seaford and to those who for clinical reasons cannot travel outside of Seaford

## 2.3. Members felt the update was very helpful and largely felt reassured. Members felt that DP's regular communications are very helpful and well-received. Questions raised included:

- If patients had received their 1<sup>st</sup> vaccination at the Sovereign Centre, could they book elsewhere for their 2<sup>nd</sup> vaccination via 119? This could alleviate issues some patients have / may have re getting to the Crumbles. DP will speak with NHS Commissioners to understand the formal position and will update members – **action DP**
- SDHC's voice mailbox regularly seemed to be "full" and not able to take further messages. PA will raise with SDHC – **action PA**

## 5 Update from the Practice:

### 5.1 Return to "business as usual":

5.1.1 PA advised that guidance had been issued to general practice from both NHS England and from East Sussex Clinical Commissioning Group. Some services will be reintroduced as from 1<sup>st</sup> April, for example face-to-face Diabetes annual reviews, COPD annual reviews (examples of areas falling within the Quality and Outcome Framework). Other services will be introduced after 1<sup>st</sup> July, for example ear irrigation, annual health checks (examples of areas falling within locally commissioned services)

5.1.2 SMP is closing on the afternoon of Tuesday 27<sup>th</sup> April for a whole-Practice planning event, looking at the phasing of reintroducing services. The event will take into account the guidance received

5.1.3 NW will share the plan from the planning event with the PPG – ***action NW***

**5.2** Government changes to the health & care landscape: PA explained the changes that the current Government White Paper will make to the health and social care sector. Key changes will be for health and social care organisations to be legally required to work in an integrated way. This will result in the creation of an Integrated Care System (ICS) in Sussex and the whole of England as from 1<sup>st</sup> April 2022, with Clinical Commissioning Groups (CCGs) ceasing to exist as from 31<sup>st</sup> March 2022. The full implications of what this means is still be worked out

**5.3** Primary Care Network update: DE updated members of current areas of focus, under national direction, for the Seaford PCN. This includes work to coordinate healthcare provision in care homes, work on enhancing the early diagnosis of cancer and developing the provision of advanced physio services (First Contact Practitioners) in Seaford. DE asked whether any members of the PPG would like to be part of the early diagnosis of cancer project work, to act as the “voice of the patient”. Anyone who is interested to let SS know, who will the advise DE – ***action PPG members***

## **6 Questions from PPG members:**

**6.1** What are the current wait times for specialist referrals: current waiting times at East Sussex Healthcare Trust are listed at the end of the minutes. This is a link to the ESHT website showing up to date information [Average wait for routine first Outpatient appointment – East Sussex Healthcare NHS Trust \(esht.nhs.uk\)](https://www.esht.nhs.uk/average-wait-for-routine-first-outpatient-appointment)

**6.2** Comparison of now to pre COVID re methods of appointments: DE advised that currently the GPs are seeing approx. 6 patients a day face-to-face, compared to approx. 25 pre COVID. The same number of patients are “seen” each day as before, by the other appointments are by phone or by videocall. The Staff Planning day on 27<sup>th</sup> April will

consider the balance between face-to-face / phone / video appointments going forward

**6.3** Are there any changes to the types of problems patients are presenting with: DE advised that his experience is that more patients are presenting with mental health concerns and issues. This includes patients newly presenting and patients whose symptoms have worsened. There is also increased contacts from patients concerned about delays in hospital treatments (which there is little GPs can do about)

**6.4** How does SMP use LIVI: LD explained that the LIVI GP phone service provides helpful resource for patients and GPs. It allows patients to discuss issues more quickly with a GP by phone than if they waited for a call with their usual GP at SMP. Currently over 2000 SMP patients are signed up for the service and SMP patients are one of the highest users of the LIVI service in East Sussex. SMP's Reception team routinely advise patients of the LIVI option. After discussion between PPG members, it was agreed to reduce the number of "alerts" on the SMP website, which would have the effect of the LIVI information being more visible on the home page – **action PA**

## **7 Any Other Business:**

**7.1** Lecture on 14<sup>th</sup> April by Sarah Gilbert, a developer of the AZ COVID vaccine: SH will share the webinar link with members, should they wish to view the webinar – **action SH**

**7.2** Farewell to PA: SS and CI, on behalf of the PPG, expressed their thanks to PA for his involvement in the PPG since its inception and wished him all the best for his retirement. PA thanked SS and the PPG members for all their work and support over the years and how much he had enjoyed working with them

**8 Date of next meeting:** the next meeting has been arranged for Tuesday 6<sup>th</sup> July 2021, 6.00 p.m. by videoconference. NW will send out a link for the meeting via SS two weeks before the meeting. It is hoped that subsequent meetings can be held in person at the Health Centre – **action NW**

Minutes: *Phil Abbott, 14<sup>th</sup> April 2021.*

### **Average wait for routine first Outpatient appointment**

**The table below details the average waiting time (in weeks) for a routine first outpatient appointment (80th percentile waits) at East Sussex Healthcare NHS Trust, when referred to one of the specialties listed:**

Speciality	Average wait
Anaesthetics	10.0 weeks
Breast Services	8.0 weeks
Cardiology	10.0 weeks
Care of the Elderly Medicine	20.0 weeks
Dermatology	15.0 weeks
Diabetes and Endocrinology	21.0 weeks
Ear, Nose and Throat (ENT)	21.0 weeks
Gastroenterology	24.0 weeks
General Surgery	20.0 weeks
Gynaecology	26.0 weeks
Neurology	24.0 weeks
Obstetrics	7.0 weeks
Ophthalmology	23.0 weeks
Oral and Maxillofacial	8.0 weeks
Orthodontics	20.0 weeks
Palliative medicine	0.0 weeks
Respiratory medicine	22.0 weeks
Rheumatology	27.0 weeks
Stroke services	5.0 weeks
Trauma and Orthopaedics	19.0 weeks
Urology	32.0 weeks