

Knebworth and Marymead Medical Practice

Patient Participation Group

Meeting held Tuesday, **16th March 2021** at 7.00 pm – 8.30 pm by Zoom

Leader: David Wilkinson Minutes: Joy Hall

1: Welcome, Introductions, Apologies: Ken Spooner, Pam Hill, Sharon Smith, Tony Stowe, John Townend

Present: Janet and John Bell, Ros Sherry, Brenda Davies, Sally Elliott, Mike Pye, Jane Walker, Lynne Drake, Sheila Stowe, Angela Dormer, Graham Dormer, Jan Burt, Clare Biddle, Robert Sprigge, Penny Berry, Kay Loveless, Malcolm Cooke, Chryssie Cobbold, John Stead, Tony Dollimore, Graham Fothergill, Mandy Preedy, Rosie Chisnell, Kim Wilkinson, David Wilkinson, Joy Hall, Barry Hall, Georgie Webb, Phil Lumbard (in part). (29)

2: Declarations of Interest - none

3: Minutes of Previous PPG Meeting: 16th February 2021 and Matters Arising that will not otherwise be dealt with in this agenda - none

4: Presentation by Phil Lumbard. NHS 111 First

Phil is the Assistant Director of Urgent Care at the East and North Herts Clinical Commissioning Group. His message was: **Call 111 when it's less urgent than 999**. Through a PowerPoint presentation, he explained how this NHS Service has developed since 1998 and said that Herts is now a forerunner with the programme.

If you call 111, you will be asked a series of questions, through a computer generated algorithm. At the end, you will be offered appropriate advice. This may be a telephone or video call to determine what to do next – for example, appointments may be made for you to visit a GP, A&E or Ambulatory Care.

Phil showed that this was an opportunity to modernise and refresh their approach to delivering same day urgent and emergency care and to embrace the technology being used elsewhere in everyday life. It will improve patients' experiences of using urgent services and continue to improve making the best use of our health and care resources. In italics following are extracts from his slide presentation.

Benefits of Think 111 First: For patients

Calling NHS 111 first means people get the advice they need quickly. If they need to be seen by a medical professional they are directed to the right place, first time. Being given an appointment means patients can wait at home, rather than in a busy waiting room. Many patients can get the help they need without leaving their home – for example with a video consultation

Benefits for the NHS

They can minimise person to person infection spread, including of COVID-19, in waiting rooms and can help keep emergency departments available for the patients who are most unwell. They can support our busy hospitals in times of extreme pressure brought about by winter or COVID. They can better link the NHS 111 system to existing GP practices. NHS 111 can book a GP appointment for people during the day if that's needed

The National start date was 1 December 2020 and it went live as planned across all **three** acute trusts in HWE. It is planned to increase public awareness by publicising the system more, especially by word of mouth and social media. Much work is being done to improve the system further.

A Healthwatch Survey has found that 84% of people are aware that they could call NHS 111 for urgent medical advice and 70% agreed that they were more likely to call NHS 111 than go straight to an emergency department.

Almost three quarters (72%) of those that have used the service agreed that they generally had positive experiences when they called NHS 111, while 12% disagreed and 13% were neutral.

Phil was very encouraged by these data.

Phil concluded that:

- *NHS 111 is a well-known service, and the new option of pre-booked timeslots at A&E and other urgent appointments is useful to patients when it works well.*
- *Its full potential for improving patient experience can only be unlocked if more people are aware of the offer and if people consistently receive high quality care and advice through NHS 111*
- *Reassuring people that they always have the right to be seen at A&E, but emphasising that contacting 111 first could mean that they can wait in the comfort of their own home and be seen more quickly when they arrive at A&E, should be part of a stepped-up communications strategy of promoting NHS 111.*

Phil was thanked for his excellent presentation. Graham asked how many appointments were allotted each day: GPs have 24 and the Lister 2 per hour (24 in 12 hours.)

Robert told of a contact who had been sent to a hospital some distance away when there was one within walking distance. Malcolm and Sheila praised their experiences of the system.

5. Local Covid-19 Vaccination Programme & Practice Update. In Ken's absence, Joy summarised Ken's last report based on the [Minutes of the Officers' meeting on March 2nd](#).

Dates of the vaccination clinics for March were issued on Facebook and emailed as a newsletter, together with information on the groups and ages of patients that would be treated. The clinics would all be at the Roebuck surgery and the patients receiving the vaccine at the Roebuck were not necessarily of the same age or in the same groups as those being vaccinated at Robertson House.

Towards the end of the month, patients would start to receive their second doses. They would be notified of their appointments by the Practice and they would generally be given about two weeks' notice. Ken suggested that patients should only contact the Practice if they thought they had been missed out.

Ken reported that the half-day vaccination clinic at Knebworth for patients with learning difficulties had gone very well. He reiterated that patients who felt that they were "special cases" must still meet the JCVI guidelines and such patients will be assessed on a case-by-case basis.

Ken indicated that the vaccination clinics continued to cause problems in relation to routine clinic appointments because nurses and GPs were required to man the Roebuck clinics from time to time. This was particularly affecting the efficacy of the management of patients with long-term illnesses such as COPD, asthma and diabetes; the PCN is looking into the possibility of hiring additional clinical staff.

Practice Update. Ken reported that the final handover of the Knebworth Surgery by the developers was imminent. As a result of an incident along the pathway from the car park, PPG Officers had surveyed the location and suggested they approach the landlord with a view to making improvements in this area; this would also include improvements to the signage at various points around the building. Ken agreed and the Officers have now been in touch with Assura, the Landlord.

6. Cancel out Cancer Update –Rosie and Mandy are continuing to do roughly one presentation a week. They praised the support from the Surgery who had sent text messages to alert patients. They have received requests from a Men's group and other groups like Carers in Herts and the Trefoil Guild.

7. PPG Quiz 7.30 pm 20th March – Graham said that non-members were very welcome. There will be 50 questions and a couple of prizes!

8: Relocation of Defibrillator – Clare Biddle is working on the relocation of the defibrillator and hopes to finalise it soon.

9. Future Speakers for Full PPG Meetings – no further suggestions

10. Any Other Business

Mandy offered to email Phil's slides to everyone.

Jan mentioned that St John's Ambulance volunteers were manning other Vaccination Centres and queried why, if they are trained in giving injections, they are not being used to do Covid vaccinations. (Note: since the meeting, Jan has spoken to St John's volunteers and given a contact name which Mandy has passed on to Matthew Charles, for his consideration.)

John (Bell) asked why there was no porch for people to shelter while waiting to enter the new surgery. It was suggested that Covid precautions had been responsible for patients having to wait outside, which had not been anticipated at the planning stage.

Mike and Robert had questions which they will save for the next meeting.

Georgie Webb, from Woodbridge, Suffolk, attended the meeting as an observer. She has been on her local PPG for 12 years and was very impressed to see how many PPG members were present at our meeting!

David thanked everyone for attending.

Next Meeting Tuesday April 20th at 7.00 pm on Zoom

Leader: Rosie Minutes: Graham

Dates for Meetings in 2021 from 7 – 8.30: May 18, June 15, July 20, September 21, October 19, November 16, December 14