

Brocklebank Primary Care Network

Minutes of the Brocklebank Practice Patient Group Meeting (Internet and Phone Dial-In Meeting via Microsoft Teams)

Tuesday 28 April 2020, 2.30pm

Brocklebank Practice Staff Attendees:

Sue O'Donnell	Business Manager
Dr Nicola Jones	Managing Partner
Tina Pascoe	Practice Manager
Julie Walmsley	PA/Managing Partner

Brocklebank Practice Patient Attendees & Apologies

Names on file

	<p>The meeting was chaired by Sue and minuted by Julie. Intros and welcome (first 'virtual' Brocklebank Patient Group meeting!). Minutes of the last meeting (13 Nov 2019): On our website</p>
1	<p>Sue referenced her presentation (circulated with minutes / will be made available on our website):</p> <ul style="list-style-type: none"> i. Practice staffing model ii. Long Term Plan (NHS England) goals iii. Staff areas of work iv. Comparison of services before and during Covid 19 v. Appointment booking methods <p>Take-home points:</p> <ul style="list-style-type: none"> a) Not always necessarily a GP the patient needs to see. b) Same-day appointments may have previously gone those who know how to work the system, not those who necessarily need it the most.

2 Covid-19 Coronavirus Pandemic

- i. We already had a Risk Assessment Plan in place, including decanting into Brocklebank, as the largest of our practices, should closure of any of our 3 practices have been required through staff-shortages.
- ii. Most staff have now had and recovered from Covid-19.
- iii. Caused a steep absence of GPs which was resolved by them remote working from home with a laptop. At all times, our practices remained open with clinicians and receptionists available.
- iv. At the start of the pandemic, receptionists were screening patient requests for appointments over the phone based on recent travel. Those suspected of having symptoms were directed to phone 111 rather than entering the practice.
- v. Our practices have been open as much as before but have seen fewer patients.
- vi. A great debt of thanks to all our patients for adhering to the national 'protect the NHS' message by staying away.
- vii. Now we want to focus on those patients who have avoided coming in but have health concerns which need reviewing and addressing (suspected cancer, need for a scan/MRI, at risk of stroke or heart attack).

3 What will be our new normal?

- i. It is safe to assume that general practice won't be the same as before.
- ii. During this re-booting period, Nicola would like your thoughts on how we should re-set our programme of work and access to our practices to the benefit of all.
- iii. To consider:
 - a. How important is it you see a GP face-to-face?
 - b. Video consultations
 - c. Doctorlink (symptom checking service on our website)
 - d. Advance appointment bookings
- iv. Discussion points:
 - a. Want to redefine our systems and take advantage of technology but pay attention to those patients who don't have access to the technology to book online or be seen via a video.
 - b. Lots of members of clinical staff (pharmacists, social prescriber, mental health plus worker) other than GPs who can deal with certain issues better than a GP – need to help patients to better know about these and understand how to access them.
 - c. Reception staff have an important role to play in helping direct patients towards the right person-we call this Signposting
 - d. Video consultations are set up by the GP, who sends the patient a link to click. Can be used by anyone who has a smart phone, iPad or laptop (anything to which an email can be sent and has a web-camera attached or built in). Suggestion: demo added to website.

- e. Reassurance that if this means of consulting is cut-off, the GP would initiate re-connection or a phone call.
- f. Flagged that Earlsfield is poorly served by internet providers so connection is limited. Suggestion: Residents petition the Council.
- g. Our website (www.brocklebank-practice.co.uk) has been improved and contains lots of useful information about our services, ways to order repeat prescriptions and includes Doctorlink. This is a symptom-checking device which will advise the patient on other ways to manage their health concern or results in an email to the practice for a GP to contact the patient.
- h. Only urgent referrals have been processed since the start of the pandemic which has meant a backlog of minor operations, travel vaccinations, smears and B12 injections but routine referrals are now being dealt with. Might mean a longer-waiting list than usual but all patients who were referred during this time will now be contacted at some point.
- i. It was agreed that the best way to reach out to our patients for a larger input to the discussion would be via a text message with a link to a questionnaire.

4 Sue thanked everyone for joining and encouraged them to contact her should they have any further thoughts following the meeting.

Meeting closed 3.30pm.