

**Clarendon Lodge Patients Group**  
**Zoom Meeting**  
**12 June 2020 at 1pm**

**Summary of Meeting**

Present:- Michael Pearson (chair), Dorrette McCauslan, Bridget Winn, Maureen Hirsch, Martin Blows, Ann James and Stephen Gallagher

Apologies:- John Pickering, Gethin Williams and Marcia Davis

**Current situation**

Members reported that they were coping reasonably well with the lockdown despite one member having had a bad accident. Shielding for some had been problematic because of the requirement to stay indoors.

Stephen reported that the Practice was coping well and had no major incidents to report. Some services were now being resumed such as coil fitting and smear tests.

There was a concern however that patients were avoiding coming to the Practice for fear of catching the virus. A video had been prepared to send out to patients but this had been held up because of a new government directive. This directive now required all patients visiting the practice to wear a face covering. It would be the responsibility of the patient to provide a face covering. Patients without face covering would not be admitted.

The Practice front door was still being kept to be locked. Patients were required to press a button on the right side of the door and then wait for instructions. Martin was concerned that the button and speaker were too low and could cause problems in trying to hear what was being said.

Members who had visited the Practice said they did feel safe especially as the two metre markers were clearly visible in the reception areas. GPs and nurses wore full PPE when attending to patients.

Dorrette said she did have a problem when phoning in. Stephen explained that reception needed to fill in forms when receiving calls. The information gathered would enable the Practice to determine the best cause of action for the patient. He also explained that as some reception staff were working from home due to shielding a VOIP system had to be used which did not have all the facilities of the normal telephone arrangement.

The Practice also had a front door in – side door out so as to reduce contact with others.

Maureen reported that she had rung in to arrange for repeat medication and was told there was a 2 to 3 week wait. Stephen said this should not have happened. Although the Practice pharmacist was on maternity leave the PCN pharmacist and a locum pharmacist were working Mondays and Fridays respectively. In the meantime the Prescription manager, Kerry, was available and should be able to deal with any prescription enquires.

**Flu Jabs**

Stephen said that the flu jab programme would begin in September and the NHS now required the programme to finish in November which Stephen said would be difficult to achieve.

He said that flu jabs would take place off the practice premises and requested help from the PPG in identifying suitable external places. PPG members could act as stewards to ensure social distancing and maintain the throughput of patients. Ann said that there was a local group of Covid volunteers that may be able to help. Stephen said it was important that we get organised on this as soon as possible especially as the Pharmacies may also bid for the contract.

The group had a detailed discussion on this subject as there were a number of concerns. Stephen said that all he needed was ideas about venues and he would take it from there. There was also a possibility of using marquees in car parks including the practice car park.

There was also mention of a Covid vaccine. If this was available at the same time as the flu jab then there would be more logistical problems.

## **PCN developments**

Michael brought up the issue of the PCN. The Practice had recently renewed its contract and there had funding available for further staff recruitment. This funding can only be spent on recruiting the extra staff determined by the NHS and not for filling staff vacancies.

Stephen was pleased to announce that two further social prescribers had just been recruited by the PCNs (North and South Leamington) with input from the Clinical Directors. Both of these social prescribers had experience in Mental Health. The PPG welcomed these appointments and the fact that patients mental health issues will now become a priority.

Stephen also confirmed that another clinical pharmacist had been appointed as well as two care co-ordinators.

Some office space had been rented at Gainsborough Hall in Russell Street and this would become a Medication Prescription Hub and two pharmacy technicians had now been employed there.

This course of action had been taken to improve the prescription service to patients making it more efficient and effective. There would be no change for patients in the way they ordered repeat prescriptions or underwent medication reviews.

To sum up the extra staffing arrangements across north and south Leamington PCNs are now :-

Three Clinical Pharmacists  
Four Social Prescribers  
Two Pharmacy Technicians  
Two Care co-ordinators

The next meeting will discuss how these roles are progressing and benefiting patients.

## **NHS App**

Finally the group had a discussion concerning the NHS app and the Patient Access app.

Stephen explained that the NHS was pushing for all patients to use its NHS app. This app would be more sophisticated than the Patient Access and would gradually be added to with official NHS services and information. The NHS app can also be downloaded and operated without the need to visit the Practice with ID.

Patient Access would still be available although this is run through a private contractor and does contain links to private practices such as physiotherapy. The Practice has no control over this app. This situation has arisen because the NHS was late on the scene and the service was provided instead by various private contractors including Patient Access. Martin said that patients using Patient Access may get the impression that the private services listed were a recommendation of the Practice. He felt that the newsletter could perhaps offer advice to patients on the advantage of using the NHS app. He also requested that Stephen sent him a link to the video mentioned earlier so that he could include it in the newsletter.

Michael thanked everyone for attending the meeting. He felt that a lot of useful ground had been covered. The meeting closed at 2.10 pm.

## **Actions:-**

**PPG** members to send ideas about flu jab venues to **Michael** asap

**PPG** members to let **Michael** know whether they are able to act as stewards for the flu jab sessions

**Ann** to contact Covid volunteers to see if they could assist at flu jab clinics

**Stephen** to send **Martin** a link to the video

**Martin** to produce the next newsletter using information from this meeting and any Practice updates.