

PPG MEETING 22ND March 2023

Held at Penmorvah Manor Hotel

Present- for PPG, David Barrow, Anne Clover, Pamela Gray, Viv Lavan, John Killick, Verena Mitchell, Roger Preston, Celia Savage, Elisabeth Watson

For Trescobeas Surgery- Dr C Hounsome, and Practice Manager Hannah Cole

1 Apologies for absence. None received by chair or secretary.

2 Opening Remarks. By Chairman DB who reminded all present of need for confidentiality of contents of meeting until minutes are agreed and published on Trescobeas Practice (TP) website.

DB welcomed the new members, PG, RP, EW, particularly as new ideas are always welcome and their presence enhanced the geographical representation of the PPG team.

DB referred to the sad news received this year of the death late last year of a former PPG member Sue Hughes. VL who knew and well remembered Sue led a moving tribute to her.

3 Practice Update

People/sites. HC confirmed that the Flushing branch surgery had officially closed 31/1/23.

Concerning practice staff, Dr Adami is now on maternity leave; her locum is Dr Lopez.

CH reported that the practice has now received official recognition from the ICB (Integrated Care Board) that TP is rated hard working

and presenting no concerns. The PPG team welcomed this news and congratulated the practice team on their achievements, especially as the last 2 years had been particularly difficult.

Concerning medical staff levels, CH described the team as short but not as bad as up country. DB emphasized the wide range of practice commitments, with medical care of patients continued along side many peripheral appointments and leaderships roles within the local Integrated Care System (ICS).

DB asked about levels of abuse of practice staff from unhappy patients. CH confirmed that though it still happens at times, overall the incidence has declined.

Concerning Klinik use. This appears to be bedding-in, with patients and staff overall welcoming it. Sadly the systems of Klinik System1 and Emis are still not integrated, which increases the data management load on staff. This is being pursued and hopefully integration will be completed this year. CH confirmed that overall Klinik is supporting the fundamental aim of staff to respond to all the requests submitted to the practice, whether by phone, or IT, on the day of receipt. Which means it is better and safer for all concerned than the prior telephone only triage system.

CS asked specifically if the Flushing surgery closure impacted on the previously discussed prescribing difficulties for Flushing residents affected by the NHS England 1.6 km dispensing rule. HC emphasized that these are 2 separate issues and the prescribing problem is due to government legislation that applies to all Flushing residents. It was noted that the latest PNA (pharmaceutical needs assessment) for Cornwall and Isles of Scilly, described the pharmacy resources for the area as sufficient for the local population. The latest review (they are usually 3 yearly), had been delayed by covid. It included an individual

submission by JK which explored the problems the 1.6km rule can incur for communities, like Falmouth and Fowey, that are located around estuaries. JK was congratulated for his research and submission.

Practice Projects. HC reported the imminent re-design of the gardens at the Trescobeas site which will benefit all who use it.

PG asked about the possible scope for help in practice concerns such as gardening, from willing patient volunteers. CH explained that sadly this is not possible due to insurance and health/safety liability issues.

4 Missed appointments.

All present shared their alarm at this continuing problem. CH and HC confirmed that no sort of penalty can be attached. The practice already sends text messages to all patients prior to booked nurse appointments. It was noted that practice appointments can be cancelled via Klinik

5 NAPP AGM

DB and AC had optimistically joined this virtual meeting hoping it would support relevant community interactions. However, both expressed their disappointment in finding the discussions limited in scope. It appeared to them to be run by people with other demanding commitments and therefore limited time for NAPP. DB had attempted to raise a question with minimal response.

The hope was shared that the FPICF (Falmouth and Penryn Integrated Care Forum) could facilitate more effective community support by involving groups such as Health Watch Cornwall. HC will pass to DB relevant details to enable contact with a representative of Health Watch Cornwall.

DB mentioned that he had submitted an idea to the PCN (Primary Care Network) about a possible event concerning Health and Well Being needs for local patients. This would offer basic health checks from relevant health care professionals, and input regarding services such as mental health support, social prescribing, fire service checks, foodbanks and available benefits, etc. DB has had preliminary discussions of this with the PCN manager who has also been in touch with a manager at the Dracena centre. If successful this venture could be a template for similar events in other areas within Cornwall. DB will pursue the possibility of this event when the relevant personnel return from annual leave.

6 Recruitment

DB thanked HC for her help in inviting Falmouth residents to join the PPG. Our 3 new PPG members are evidence of its success.

RP asked if there is scope to recruit suitably skilled volunteers to help with selected tasks within the practice. CH and HC reminded us that voluntary roles are not prohibited but are more complex due to confidentiality, safety liability concerns and legislation. DB commented that data protection legislation as well as employment law would also need to be considered.

7 AOB

CS asked about updating the pre-recorded message on the practice telephone. CH confirmed it has been done recently.

8. DoNM

It was agreed that 3/12 intervals are appropriate

C.H and HC will look at possibilities for second half June 2023