

Sothall and Beighton Patient Forum

Minutes of the meeting Wednesday 18th October 2023 at 6:30pm

Chair: Michael Lyall (Practice Manager)
Practice staff: Dr Deirdre Leonard (Joined meeting part way)
Minutes: Michael Lyall
Visitors: Dr Linda Muzin (Hero of Health)
Members Present: JF, RF, CL, JM, RCE, AT, JS, BS, DE, DH, PH, FR, JW
Apologies: JF, DR, SR,

All present members agreed the Minutes from the Wednesday 2nd August 2023 meeting.

Michael started the meeting by thanking everyone for attending and noting that there was more than usual in attendance today. Thank you to all the new attendees who will hopefully continue to contribute to future meetings.

A member of the group asked that we minute that the forum were grateful for the excellent planning and organisation of recent Flu and Covid clinics. All the staff were very friendly and professional throughout, and the process was very quick. Michael thanked the member for his comments and added that Keeley our assistant Practice Manager was responsible for most of the planning and organising and has done an excellent job of matching capacity and demand. The group asked if Keeley would be available to attend a future meeting which we will try and arrange.

- 1) **Hero of Health** - Dr Linda Mizun attend this meeting to explain a new initiative starting soon at Sothall, more information available here; [Hero of Health | health and wellbeing](#) . Although we don't have an exact start date yet, we are hoping to start this initiative within the next few weeks. The programme will include patients, volunteers, and a Hero of Health lead, all meeting in the practice car park at 10am on Thursday mornings. The Hero of Health lead, will explain the plan for that day which will usually consist of a 45-minute walk in the local area, ending ideally somewhere (a coffee shop etc.) to have an informal chat afterwards. Some of this chat would ideally be around improving health and building relationships between local people. This initiative has already started in other local practices and has proved extremely popular as well as improving the health of many patients, some of the best examples have reversed diabetes and been able to safely come off heart medication. Throughout the programme advice will be given to patients on how they can improve their health with exercise and diet (without necessarily stopping treats). The programme starts by bringing people together, making new friends within the community and caring for each other. There is also a Hero of Health App [Available here](#)

There were a lot of questions and suggestions from the group:

- a. Who will be invited? Michael and Linda explained that the group walks are open to anyone who would like to join. The aim is to help anyone who is lonely, would like to meet local people and make friends in a safe environment, patients with various health conditions which may be improved with moderate exercise or healthier eating habits. Anyone who would like to support this project by helping to lead and support other people attending. The longer-term plan is that volunteer supporters (with a little additional training), could become future leaders ensuring that this initiative carries on indefinitely.
- b. How would you invite everyone? Michael explained that we can search our clinical system for a specific set of criteria, a recent search for target patients identified over 1000 patients.

Obviously, we could not cope with this number of people attending and therefore intend to select suitable number of people to invite initially as we gauge the local interest. It will be open to anyone who is interested, and although it may be difficult to manage but we would be aiming for around 20 – 30 patients initially. We will also publicise the event on our website www.sothall.net and social media <https://www.facebook.com/SothallMC/>

- c. What about people who have mobility issues? Linda explained that we would ensure that all mobility levels were catered for, the walks will not be strenuous, and someone will ensure that those with the least mobility will not be left behind.
- d. What about bed bound patients? Unfortunately, this is a group of patients that would not be able to access all this initiative however, there is help and advice on the website and if this allows them to attend Sothall car park the Hero of Health will accommodate their needs.
- e. How would you manage poor weather / rain? Linda explained that the hero of Health will attend regardless, and they have had some of their best walks on windy and rainy days, obviously this may need to be reviewed in snow when it may not be safe.
- f. It was suggested that we could add a message to the prescription return slips which we will do when we need to increase exposure.
- g. It was suggested that we could poster local notice boards which, assuming we have difficulty recruiting sufficient patients we would be happy to accept this offer.
- h. There was some interest in volunteering to support from the forum members. Michael plans to attend the first one walk and talk then rotate staff who wish to attend, hopefully having a different staff member on each walk.
- i. How long will this last? The plan is that this will continue forever although ideally it will be led and managed by local people. Hero for Health will lead and stay for as long as is needed.

2) Primary Care Sheffield (PCS) Merger / takeover– discussed at several previous meetings [Minutes « Sothall Medical Centre](#), the technical issues causing a delay to this process which have been previously discussed have now been resolved and momentum in this has now resumed. We are as confident as we can be that this will be completed before the end of 2023. As there were some new members at today's Meeting Michael reviewed why we are here and who PCS are. GP surgeries are essentially, small businesses sub-contracting from the NHS. Sothall Medical Centre 10 years ago had 8 Partner GP's who worked as GP's whilst also planning and running the business. This model has been in place in almost all UK surgeries since it was introduced in 1948. At this time, most GP surgeries were single handed practices which often ran from the GP's home. As GP's surgeries worked more at scale the plan was that new partners would join replacing those who retired or left. Unfortunately, the role of a GP partner over the years has become less appealing and it is now difficult to recruit a salaried GP, even more difficult to recruit a partner. At Sothall we now only have 2 Partners, Dr Leonard, and Dr Welch. Both partners would like to plan for their retirement at some time over the next few years but as things stood there was little prospect of new partners which could have left the practice vulnerable. We have considered several options and decided that the best all round solution is for PCS to take on the running of the practice allowing our partners to retire when they wish to.

Who are PCS? Primary Care Sheffield is a social-purpose organisation set up by GPs in Sheffield to help support the delivery of world-class primary care in the City.

<https://primarycaresheffield.org.uk/>.

We are in no doubt that Primary Care Sheffield is the right fit for Sothall. As a not-for-profit organization, they are owned and run by Sheffield's GP practices. The organisation was set up by practices to provide support in improving the quality of patient care.

Primary Care Sheffield already run seven practices in the city. These practices have continued

to improve the quality of their services despite being in some of the most deprived areas of Sheffield. The hard work of the practice teams alongside the PCS infrastructure have led to them improving from being rated as 'requires improvement' by the independent Care Quality Commission to being awarded 'outstanding' and 'good' ratings in their most recent inspections. This is part of the reason that Primary Care Sheffield was named as Primary and Community Provider of the Year 2022 at the national Health Service Journal Awards

Earlier this year the Chief Executive of PCS Dr Andy Hilton (also practicing Sheffield GP) attended our Patient Forum with other PCS staff to explain in detail who they were and what this would mean for Sothall staff and Patients. Our staff have the option of remaining on their current contracts or moving to a PCS contract. Many of the admin roles which are completed by Michael (Practice Manager) will be managed centrally and the current plan is that Keeley, our assistant Practice Manager will take over the day-to-day management of the practice but will have a lot of support and advice available from the wider PCS team. PCS are currently negotiating another role for Michael as there is not a requirement for the usual aspects of a Practice Manager in the new structure. All other staff will remain which is why Patients will see little if any difference. It was asked if PCS could make changes later, the answer to this is yes however our Partners could also do this. It should reassure patients that PCS are a not-for-Profit organisation therefore will not be seeking to maximize income at the expense of patient care, any profit made is reinvested into various patient care initiatives. Our Partners and I as Practice Manager are confident that this is Sothall's best option, and the service provided to patients will not decline because of this merger.

3. **STAFFING:** Dr Umer Rehan has left (4 sessions). Dr Tifase has started as a salaried GP on 17th October (4 Sessions). Dr Sona Bird returns from Maternity on 18th December and Dr Katherine Gane returns early January. The reception team lead has resigned, and we have a new lead (Laura). The current team is stable however as they have a lot of inexperienced staff, require time and support to learn the complexities of the reception role before they start to perform more effectively. There was a comment from the forum that the team of reception staff we have now seem to be happy and the patients feel they are doing well and are especially friendly and helpful.
4. **FLU/Covid vaccines** Our Flu campaign is going very well; we have administered over 1000 flu vaccines and 800 Covid vaccines. As mentioned at the start of the meeting patients are feeling that it is well managed and run. The 50 – 65year old cohort who were eligible last year have not been included [but this might change.] and will be unable to have a Flu or Covid vaccination here unless they are eligible due to specific underlying health conditions. We have sufficient flu and covid vaccinations for all eligible patients. Michael pointed out that there were comments on Beighton forum stating that we only did this work for the income. We put a lot of effort into this campaign for the health of our patients. We need to order Flu vaccines over a year in advance (next year's Flu vaccines are already ordered). Unused stock would mean lost revenue / income however this revenue is not a profit but is added to the practice revenue and goes towards improving services for our patients. This year we can give Flu, Covid, Shingles and Pneumonia for patients who are eligible, these can be administered at the same time or on separate visits as preferred. You can have them all at the same time or separately. You can check your eligibility here. [National flu immunisation programme 2023 to 2024 letter - GOV.UK](https://www.gov.uk/government/news/national-flu-immunisation-programme-2023-to-2024-letter) (www.gov.uk)
5. **PQIS funding**, we have around £7,000 to spend on items that will improve patient experience.

We felt that an updated patient call screen (integrated with tv and including a voice call). Also replacing the old lighting in our waiting room, this will also improve our carbon footprint. It was agreed that this would be a suitable use of this funding.

6. **From Forum member** – How does the practice deal with Lasting Power of Attorney (LPA)?
Lasting power of attorney forms - GOV.UK (www.gov.uk) . Dr Leonard explained that once this is in place a note can be added to the patient's home screen alerting staff that this is in place.
7. **National Advertising Campaign** 'Recovering Access to General Practice'. Michael explained that there is a National Advertising Campaign starting on 19th October. This campaign is aimed at explaining to patients how the Government are proposing to improve patient access to General Practice and remove the 08:30 rush for appointments. There are 6 steps to their proposal and Michael explained that at Sothall most of these solutions were implemented some time ago. Although they have improved access there has always been more patients wanting appointments than we are able to provide with the allocated resource. Demand is continuing to rise and although we will of course engage with all potential improvements, we feel the promise may be more than can be achieved.
8. **AOB** A forum member suggested, when a patient attends for a GP appointment and they require a blood sample, would it not be more efficient for the GP to take the blood sample rather than ask the patient to see a phlebotomist creating another appointment. Michael conceded that, were all clinical staff equal this would be the most appropriate. Unfortunately, GP time is in high demand and GP's taking bloods would take time which is currently allocated to consulting with patients. Dr. Leonard also suggested that, as Phlebotomists practice this skill more than a GP, they are often more skilled than a GP at this procedure. GP's will take bloods when required but this is usually when bloods are required more urgently than can be arranged with a Health Care Assistant (HCA).

There being no further discussions, the meeting closed at 20:45

Next meeting – Provisionally Wednesday 6th December 2023, 6.30pm – 8:00pm
in the Practice waiting room.