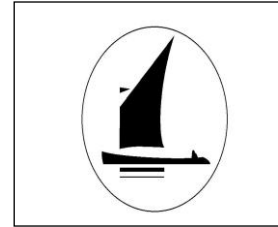


**HOVETON & WROXHAM MEDICAL CENTRE  
PATIENT PARTICIPATION GROUP  
MINUTES OF THE MEETING  
HELD VIRTUALLY ON 15<sup>th</sup> February 2022 at 5pm**



**Present:**

Carol Hastwell (Chair)	(CH)
Carole Eason	(CE)
Helen Houghton	(HH)
Alex Howe (Minutes)	(AH)
Jane Hutton (via Microsoft Teams)	(JH)
Dr. Clare Singh (via Microsoft Teams)	(Dr.CS)
Chris Stace (Practice Manager)	(CS)

Due to CS awaiting a Covid test result it had been agreed to meet virtually once again.

1. CH welcomed those present to the meeting.

2. **Apologies:** Tony Emes, and Lydia Spight.

3. **Minutes of Meeting on 14<sup>th</sup> October:**

The Minutes were agreed but could not be signed by the Chairman until a face to face meeting was convened again.

CE advised she was liaising with a possible new PPG member but family commitments prevented her joining at the moment. CE would keep the contact going.

4. **Matters Arising not on the Agenda:**

**4.i (item 6) Reported Reduction in Service for over 75s**

TE had expressed concern regarding those healthier patients who still required regular check-ups. CS advised that there were two types of check-ups provided by the Centre:

- Aged 40 to 74 for whom the Surgery was formally contracted by Norfolk County Council. This had been a lower priority during the pandemic but a ‘catch-up’ programme is now being led by NCC with support from general practice;
- Over 75s, within the core General Medical Services contract, which had been paused before Christmas 2021 until April 2022. Clearly the number of patients over 75 is quite high but most already have regular contact with Hoveton & Wroxham Medical Centre. A review and catch-up programme is being put in place.

**4.ii (Item 7) Improving Communication with Patients**

TE had reported to the last meeting that patients in his area of Rackheath were experiencing communication problems with the Surgery. It was therefore agreed that TE should log the feedback he was receiving so that the quantity and trends could be reviewed and possible solutions discussed. **(Action: TE)**

**4.iii (item 10) Website**

CS had been given the PPG notice board’s key and had dealt with putting up the Minutes of the December meeting; the Minutes were also visible from a link on the

Surgery's website. The website needed to make it clear that the PPG should not be used as a forum for personal agendas or individual complaints; these should be taken forward through other appropriate channels.

JH suggested a dedicated online email address for patients to use rather than personal telephone numbers: CS to look into this. **(Action: CS)**

#### **5. Covid-19: Update**

CE advised the following. Cases in Norfolk had been increasing slightly but the 'big spike' was tailing away. By the 10<sup>th</sup> February vaccinations and boosters had reached 90% locally. Next week would see the focus on 5/11 year olds and the clinically vulnerable. The 4<sup>th</sup> dose had already started to be administered across Norfolk.

The future was in the hands of the Joint Committee on Vaccination and Immunisation (JCVI) but it was a complex picture and the situation remained on-going and unrelenting.

#### **6. New Clinicians at the Surgery:**

The current five year contract had started in 2019, but with a restricted 'menu'. However, central funding had grown and enhanced services were coming on stream. These services included Advanced Nurse Practitioners, First Contact Physiotherapists, Mental Health Nurses, and Social Prescribers. The Surgery also has the benefit of a Mental Health and Well Being Coach.

A list describing the individual roles is attached to the filed copy of the Minutes and CS was planning to put a copy on the website, plus circulating to FB pages and parish magazines etc. **(Action: CS)**

CS also showed a slide, "What Matters to Me" and would share the slides with the PPG after the meeting. It was important that patients knew all that is now on offer from the NHS. The Receptionists could be relied upon but it would be helpful for patients to know the individual pathways. **(Action: CS)**

#### **7. Amongst others, it is World Kidney Day on 10<sup>th</sup> March, and Diabetes week in June. HH offered to obtain posters etc. for the latter.**

There were so many dedicated 'days' held during the year that it was difficult to respond to them all but it was agreed to hold a formal event at Hoveton Village Hall, on 14<sup>th</sup> May during Mental Health Awareness week. Dr.S. advised that colleagues had a lot of resources which could be used; the website could also spread the word. Despite NN4 meetings being halted by Covid would the network be interested in taking part?

A sub-committee was needed to pull the loose ends together. CE/AH/JH volunteered to join CH in forming one. Watch this space!

CS would like to start and Hearts and Minds campaign but would wait to see how the 14<sup>th</sup> May goes. **(Action: CH/CE/JH/CS)**

#### **8. Rackheath Surgery – update:**

In the absence of TE, CS reported on the following:

The location for the Rackheath Surgery was now waiting for the result of a full business case review by the NHS and others. It was anticipated that the Architects, Chaplin Farrant, would be presenting their designs in a couple of days' time. The steering group would be meeting again sometime in March.

CS referred to the consultation and confirmed that Muck Lane would be in the middle of the development. He also confirmed that the new surgery will be a branch of the Hoveton & Wroxham Medical Centre.

**9. Looking Forward: Future plans**

This had been covered in previous items.

**10. Any Other Business:**

**i. Integrated Care System**

*'We tend to meet any new situation by reorganizing, and a wonderful method it can be for creating the illusion of progress while producing confusion, inefficiency, and demoralization.'* (Petronius). It was generally agreed that this quote could be attributed to life within the NHS!

Integrated Care was going to happen but the formalising of statutory bodies had been put back yet again to July. The detailed changes and impact had not been made clear to date. This will follow in due course but there is already a good amount of integration between general practice and other parts of the NHS.

ii. AH to check out whether or not Dr.S. is on her mailing list as Dr.S is not receiving any PPG related emails. **(Action: AH)**

iii. CH queried the Healthwatch survey that CS had circulated to the PPG. She wondered if it was a true representation of patients surveyed. CS advised that the Healthwatch website – NHS choices and GP survey – showed a random selection of reviews and was only intended as a 'snapshot'.

**11. Date of next meeting:**

**Tuesday 5<sup>th</sup> April 2022 – 5pm at the Medical Centre (hopefully!)  
(Dr.S. gave her apologies in advance).**

**Signed .....** **Date .....**