

Patient Participation Group
Minutes of AGM Meeting
20th September 2023

1. Welcome: The Chairman welcomed everyone to the AGM.

2. Present: Theresa Banks (TB), Julia Bateson (JB), Wendy Border (WB), Will Border (WBo), Jane Chase (JC), Sylvia Cliffe (SC), Kathy Foley (KF), Jasmine Fulcher (JF), Ian Gutteridge (IG), Stella Gutteridge (SG), Penny Hipkin (PH), Ann Lemmon (AL), Rachel Seakins (RS), Roger Smith (RS), Brian Thompson (BT), Margaret Worledge (MW)
SJMP: Kathy Foley (KF), Dr F Tchigelaar (FT)

Apologies: Enid Bright (EB), Richard English (RE), Pat Fraulo (PF), Jill Fysh (JFy), Karen Goult (KG), (PH), Sheila Johnson-Banks (SJB), Malcolm Powell (MP), Pat Simpson (PS)

3. Minutes of Previous AGM meeting:

MW proposed that these be accepted as a true record, seconded by JF and agreed by all.

4. Minutes of July Meeting:

MW proposed these be accepted as a true record, Seconded by SG and agreed by all.

5. Matters Arising:

TMB asked about Accurx and KF said this was working well.

6. Election of Officers:

There were no additional nominations and all the present incumbents were happy to stand so all were re-elected. RS proposed that IG be elected as Chairman and all members were in agreement.

7. Election of other Committee members:

IG explained the Committee constitution and meetings structure for the benefit of new members. The present committee with the addition of PH were prepared to remain. New members were invited to join and JB offered to become a committee member.

8. Chairman's Report:

IG presented the following report:

The last year has been a quiet one for the PPG. WE were pleased to have been able to resume face to face meetings this year and we hope that this will continue despite the resurgence of COVID this year. The group did run a Christmas cakes stall in December last year, raising £161.40 that was added to PPG funds. Unfortunately, due to an infection control audit the book sales had to be discontinued which reduced the groups income during the year.

It was appreciated that the practice agreed to pay for the PPG insurance again this year.

Kathy has kept the group apprised of developments regarding the new surgery building that it fast taking shape and we look forward to holding our first meeting there in January 2024.

We ran an open meeting in March to which all patients were invited. This meeting was held to update the group and other attendees on progress with the new surgery. We had a good attendance, and I am very pleased that some of the people that came along have joined the group as members since.

I should like to thank Theresa and Stella for the work that they have done through the year in producing the minutes and the accounts respectively. Also, thanks again to both for agreeing to continue in the roles for the 2023-4 year.

Finally, many thanks to all members for your support this year, and to Kathy and the practice team for providing the meeting venue, and for keeping us up to date with developments during the year.

Next year will be an exciting one for everyone, starting with the move to the new surgery and I am sure that we all look forward to settling in and using the new facilities.

9. Treasurer's Annual Report:

Reserve Account Balance (20/9/23)	£73.12
Current Account	£676.72
<u>Income:</u>	
Books/DVDs (26/10/22)	£26.88
Books/DVDs (8/12/22)	£28.50
Christmas Sales/Cakes/Tombola	£161.40
<u>Expenditure:</u>	
Hire of Methodist Hall for public meeting	£50.00
Current Account Balance (20/9/23)	£843.50
Total Balance of Reserve & Current Accounts	£916.62

10. Practice and New Build Update:

Newbuild: KF reported that all the colour schemes have been chosen and the chosen samples for feature walls have been selected. There has also been a revamp of the Practice logo. She passed around various logo versions to members and signage will go up at the front of the building with the logo. All the rooms need to be fitted out.

The roof has solar panels installed and the whole building is environmentally thought out. There will be electric car charging stations at the back.

The area designated for an endoscopy suite has had to be re designated because the Dersingham unit has had to be closed and moving it to SJMP will not be viable, economically. A combination of factors has contributed to this – low activity, no engagement with QEH, despite much longer waits there, and higher DNA rates since Covid. There has been no support from the ICB so there is no NHS funding. If any of the equipment can be used it will be returned to the Practice but the rest will be sold. The area which had been set aside for this at the newbuild will now comprise 6 consulting and treatment rooms, two of which will be lead lined. It will be a private facility and the Practice has had many enquiries from various organisations.

TB asked whether there would be any likelihood in the future of a private firm wishing to take over the new Practice but was assured by KF that this could not, and would not happen. The Practice would remain independent. She reported that the Practice is also, currently, in talks with a pharmacy.

KF was asked whether there would be suitable areas, inside, for PPG activities. She suggested that the Health Support rooms could be used for these.

A question was asked about new patients being able to register and KF said that the Practice could not refuse anyone unless they lived outside the designated catchment areas. KF was informed that a prospective patient had attempted to register online but had not received any acknowledgement or reply. KF admitted that the online registering system was

ineffective but that it would be much better in future. She anticipated that the prospective patient would receive notification soon.

The newbuild is on time and some discussion took place about welcoming patients when it is opened. It was suggested that, for the first two weeks, volunteers (2 upstairs, 2 downstairs) should meet and greet patients, and direct them around the new building. TB suggested that some Parish Councillors should be formally invited to the new Practice also as the South Wootton Parish Council had taken a keen interest in the progress of the new build.

Practice info: Flu jabs can now be booked via Accurx (the text link lasts for 7 days) but can also be booked via telephone. The Practice is not doing Covid jabs this time and these can be done at QEH Vaccination Centre (tel. 01553 214530). There is a new GP – Dr Munn-who started on the 1st September but the Practice would like to recruit more. Dr Antonia left the Practice in July and will be much missed. A social media campaign is underway with advertisements for Nursing Associates, Nurse Practitioners and GPS. A ‘Golden Hello’ is being offered to potential GPs for which they will have to undertake to work for a minimum of 2 years. Currently 19 GP sessions need to be filled (Full Time = 8 sessions)

Two new clinics – Menopause and Contraception fitting- are working well. Patients can self-refer to the Practice physios, also.

JF asked about the POD service for prescriptions. It is likely to be stopped in November, by Norfolk and Waveney ICB, and this is unfortunately out of the Practice control. There was much discussion about this and the PPG group expressed great dismay at the potential loss of such an efficient service. FT suggested that the PPG write a letter about the problems faced by some patients with the loss of this service. The PPG will contact Norfolk and Waveney ICB about this.

11. Queen Elizabeth Hospital Update (IG): Report from Sheena Johnson-Banks QE Governor

Update re The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

for St James' Practice Patient Participation Group

- The Trust recently held successful community engagement events at King's Lynn Pride and RAF Marham's Friends and Family Day.
- The Trust's Executives and Communications team have attended a number of events held within the local area, to give local people the opportunity to listen to a presentation about the New Hospital, and ask questions. We have had very good engagement at these events, and the general feeling has been very positive indeed. We are thrilled to have so much community support, and very much want to ensure the new hospital is "fit for purpose" and meets the needs of the community. We would love to see you at any future events, or receive your input.
- We recently held our Annual Members' Meeting at Downham Market Town Hall on 13 September 2023, which gave another opportunity for Foundation Trust Members to attend to hear about the exciting progress we are making, future plans, and again there was a question and answer session at the end. If you are not a Foundation Trust Member and would be interested in joining, please let Ian know and I can pass your details on.
- The Trust has recently welcomed a new substantive Medical Director (Dr Rebecca Martin) and Chief Nurse (Pippa Street). Both Rebecca and Pippa have distinguished career histories and are excited to join the QEH Team at a time when there is much upward momentum. We look forward to both of them making a real impact in their respective departments, and to having a fully-substantive Trust Board once more.
- The Trust has just launched its Patient Safety Incident Response Framework and Plan, which is a nationwide initiative which replaces the previous Serious Incident Investigation Framework. This is designed to identify themes in patient safety incidents, with a view to looking at how we can prevent these on a wider scale, rather than reacting to single incidents as they happen.

As part of this process, we also welcome Peter Brown to the Trust as our Patient Safety Partner. His role is to assist with discussing incidents and putting in appropriate next steps, and to be the voice of the patient in this process. He has been attending meetings as a patient advocate for several years on an informal basis, and we are very pleased to have him join us in a formal role.

- You may have seen increased awareness of RAAC (reinforced autoclaved aerated concrete) in the media, with a number of schools prevented from reopening after the summer holidays because they have no failsafes in place. We have a robust rolling programme of identifying problem areas and installing additional failsafes and props where necessary, and you may have seen footage of some of our props in the media as part of the wider RAAC story. We would reassure our patients and visitors that the building is safe, and these are not to prevent the roof from imminent collapse, but are part of our wider programme of keeping the building functional until the new hospital is built.
- As you may be aware there is still ongoing industrial action from our junior doctors and consultants. We fully support our colleagues and although there will undoubtedly be some impact on patient care, we are working hard to minimise this wherever possible.
- We are pleased to say that despite the impact of industrial action the Trust is meeting current targets relating to elective surgery, with no patients waiting longer than 104 weeks, and no patients waiting for longer than 78 weeks for elective procedures, with the exception of a few who have made the choice to postpone due to their personal circumstances.
- Urgent and Emergency Care remains very busy, with an average of 248 emergency attendances per day currently. We have been working with the East of England Ambulance Service NHS Trust, who manage ambulances in the Eastern region, to prioritise patient safety. We are now able to offload patients from ambulances, triage them and arrange for any radiology, tests or investigations to be requested, and then return them to the ambulance until we have an appropriate place for them to be admitted.
- We know that the Trust is behind other NHS Trusts digitally, and this must change to improve patient care and bring us into line with other comparable NHS Trusts. Over the past 12-18 months the Trust has been engaging in a joint procurement exercise for an Electronic Patient Record system (EPR) with the other Acute Trusts within the Norfolk and Waveney Integrated Care System, Norfolk and Norwich University Hospitals NHS Foundation Trust and James Paget University Hospitals NHS Foundation Trust. The benefits of this were twofold; by pooling the funds allocated to each Trust by NHS England it gave a wider range of solutions within the overall budget, and in the future all three Acute Trusts will have a compatible system which means easier sharing of patient information, and easier use by medical staff who often transfer between the three Trusts.

The Trusts have jointly entered into a 10-year contract with Meditech to implement an EPR system across the three Trusts. Meditech supply EPR to a number of NHS Trusts, including Alder Hey Children's Hospital in Liverpool, which is one of only four NHS Trusts to receive the highest national rating for their digital maturity. We are hoping the EPR system will be in place by mid-2025.

- Finally, there has of course been a great deal of media coverage around the Lucy Letby trial and conviction. This has been incredibly distressing to hear and our heartfelt thoughts and condolences are with the families and victims. There has been an increasing emphasis on honesty and transparency across the NHS in recent years, and our CEO Alice Webster has reiterated this in staff communications, encouraging staff to speak up where they are concerned and giving details of the Trust's Freedom to Speak Up Guardians. Freedom to Speak Up enables concerns affecting patient safety (either directly or indirectly) to be raised anonymously, and one of the Guardians is external to the Trust, which ensures we have that important independent oversight.

Additional information was provided by IG:

A new area is being built to take A and E patients from ambulances. It is being funded by The League of Friends and will be opened in October. The buggy service to ferry patients from the car park to the main hospital has started but, unfortunately, the buggy, which was parked in an open area, has already been damaged. A new, secure location, has now been found. The buggy operates a loop system around the hospital currently Monday – Friday 9am – 12.00 Noon.

TB asked about whether the Discharge Lounge newbuild is on track and IG will ask Sheena to report back on this.

12. A.O.B:

RS commented that when he enquired about having a shingles jab at reception, he was informed that he was not old enough. Apparently, if he had turned 65 by 1st September, he must then wait until he is 70 to get it. He felt this was senseless but the Practice is powerless in this matter as this is the NHS rules.

9. Date of next meeting:

15th November at 6pm
St James Medical Practice