

**RAINFORD HEALTH CENTRE**  
**Patient Participation Group**  
**Minutes of Meeting held on 22nd March 2022**

In attendance:

Dennis Cowley, Linda Burns, Sandra Corfe, Patrick Conachey, Lynn Conachey, Wendy Webster, Helen Sansbury, Dr J Lowcock

Apologies:

Bob singleton, June Marten (resignation), John Rosbotham, Pauline Highton, Cathy Turner, Richard Jones

Helen Thanked the Group for attending and wished them all well.

Helen and Dr Lowcock spoke at great length about the changes that have been made over the last 2 years.

Since the start of the pandemic our GPs and wider clinical team have been working tirelessly to master new ways of working. We have become experts in consulting our patients remotely: triaging each person's unique situation and managing it appropriately. This means that patients who need face-to-face assessments can easily receive it- whereas those who can effectively be treated by phone, video consultation or email are able to access high quality clinical care conveniently and safely. Patient and staff safety is our top priority, and we have a responsibility to make sure that the crowded waiting rooms of the past (which were a breeding ground for infections of all sorts) remain a thing of the past.

Helen highlighted the fact that the Health Centre has always been 'open' to patients - we have been seeing patients who do not have covid-19 symptoms in person from the very beginning of the crisis back in early 2020 and continue to do so. Patients with respiratory symptoms have been seen by our partner services St Helens Rota at the "Hot Hub" based in Albion Street Clinic. We are continuing with this service in an expanded form, as they will now see any infectious diseases, for the foreseeable future.

Dr Lowcock explained that we have found that many of our patients prefer the remote model of consulting doctors and nurses, whereas some prefer the more traditional in person meeting with the clinician. As we begin to move out of the pandemic, we are offering a hybrid arrangement of appointments which honours the variety of wants and needs of the population we serve. We are currently offering around a 60:40 split between telephone and face to face appointments. The initial contact with the surgery will usually result in the offer of a telephone appointment with a clinician but if it is felt that there is a clinical need or if the patient really wants a face-to-face appointment this can be accommodated. More emphasis is being placed on some of the new roles in general practice. Helen explained how our highly trained care navigators take pride in signposting patients

to the very best available healthcare solution. As well as the usual doctors and nurses the practice has a range of other clinicians who may be better placed to help you depending on your medical or social need:

Mental Health Practitioner- can help patients with mental health issues.

Social Prescriber – He can help connect patients with community-based sources of support which can work alongside clinical treatment to improve health and wellbeing.

Physiotherapy - We have a physiotherapist working in practice 1 full day a week offering face-to-face consultations to patients with new back and joint pain problems. Our physiotherapist can offer assessment, management plans, follow up and onward referral if necessary. We are looking to increase this resource by another day a week in the not-too-distant future.

Frailty Nurses who look after the most vulnerable in our community.

A home visiting service is still available to patients who are unable to leave their home

Dr Lowcock outlined how we are moving into a phase which will be the new normal. We spoke about the continued vulnerability of the service we offer as covid restrictions are reduced but the covid infection is still quite intense currently. Helen spoke of the current situation with 2 doctors self-isolating and a nurse off with covid quite recently. Staffing issues have been more problematic in the last 6 months than they were over the previous 2 years.

Dr Lowcock explained about the policy to continue to ask patients to wear masks when they enter the building and how we may ask patients presenting for a face-to-face appointment to undertake a lateral flow test before seeing the doctor. The practice reassured the PPG that they have procured enough face masks and LFTs to offer to patients so that the patients were not out of pocket when covid testing kits are no longer available for free.

Dennis Cowley challenged the ability to specifically book a face-to-face appointment as he felt this was not happening. Dr Lowcock explained that the reception staff had been advised that they could book a face-to-face appointment with a doctor if the patient requested this but only for a routine appointment i.e., if the patient is prepared to wait for the next routine appointment in say 5 days' time. Patients requesting a same day appointment would not be given a choice. This would be inappropriate because the doctors had to decide who NEEDED to be seen and what could be dealt with over the phone rather than patients demanding to be seen.

Dennis also expressed concern about the long wait for phlebotomy clinics both here and at other venues. The other members of the PPG also expressed concern.

Helen answered by saying that the Trust that runs this service is experiencing staff shortages like the ones we have experienced in general practice. However, this problem had already been highlighted to us as we remind patients to attend for blood tests and they ring us to say they have received a second reminder for non-compliance before they have been able to get an phlebotomy appointment. Discussion took place and generally it was felt that this situation was unacceptable. The PPG requested that the practice write to the Managers of the phlebotomy service to express their concern and how they feel that the service should be expanded in Rainford to at least what it was before the pandemic i.e., 3 mornings per week.

Helen informed the meeting of two imminent retirements, that of herself the Practice Manager and Dr Lowcock. They explained that Dr Morgan would now become a partner at the practice and how they were advertising for a replacement female Salaried GP. Because of the lead time before someone can commence the practice was using the services of a couple of very experienced locums to cover the position until we could recruit someone suitable. The practice was also using a female

Advance Nurse Practitioner for those wishing to see a lady clinician. The PPG were aware of the shortage of good GPs. The PPG members wished both Helen and Dr Lowcock and long a happy retirement.

Helen introduced the new Practice Manager, Wendy Webster. Wendy gave a brief resume of her career to date. The PPG members welcomed her and wished her good luck.

Helen and Dr Lowcock thanked the PPG once again for their valued support and understanding as we all adapt to a new way of working while being true to our practice vision "Working together to provide a brighter future through better healthcare".

Next meeting to be decided.