

FULLWELL CROSS MEDICAL CENTRE PATIENT PARTICIPATION GROUP

MINUTES OF A HYBRID MEETING HELD ON MONDAY, 28 APRIL 2025 @ 3.00 pm

Present: Jennifer Hobbs-Hurrell (Chair), Caroline Adeagbo, Judy Berkowicz, Denise Ingamells, Karen Kent, Harold Moth, Graham Sturt, Adele Trainis, Francine Warren, Andrew Watson

Apologies: Ruth Diamond, Lynn Murcutt, Natasha Taylor,

No	Item	Action
1	<u>Welcome & Apologies for Absence</u> The Chair welcomed everyone noting apologies as listed above.	
2	<u>Minutes of the last meeting</u> Were accepted.	
3	<u>Matters arising from previous meeting</u> <u>Item 3 - premises</u> The three rooms continue to be used for telephone consultations, new sinks are to be fitted to bring the rooms to standard for use as face to face consultation rooms. <u>Item 3 - accessibility</u> A mirror has been fitted to enable staff to see the queue and identify if any patients with mobility issues or wheelchair users are waiting. AT reported that she had encountered an issue with the self check-in machine not recording her attendance but she alerted staff to her presence once her appointment time had passed. AW explained that on some occasions this happens because the final stage of using the touch screen has not been completed and if the machine is being used then the queue is kept fairly short. Receptionists will be reminded to be alert to patients waiting a long time. <u>Item 6 – staffing</u> The practice is no longer recruiting an additional administrator/receptionist due to the costs involved in the increase in employer's national insurance taking effect this month. <u>Item 7 - community diagnostic/treatment centres</u> AW confirmed that patients have been referred to these and no negative feedback has been received. <u>AOB GP Contract</u> AW confirmed that this is still at the draft stage and is unlikely to be finalised until October but will then be back dated. There are some conditions that will have to be met such as keeping online access during core opening hours - although this could cause problems of triaging close to the end of day. One feature is that the Additional Roles Scheme is to be extended to include recruitment of newly qualified GPs or those who have not worked during the preceding two years. There is currently a situation where many GPs just want to be employed as locums which pays substantially more than a salaried post and does not require time to be spent in management/administration of patient records, test results etc.	AW

4	<p><u>Practice Manager's Report</u></p> <p><u>Staffing</u> - no change</p> <p><u>Appointments 1/4/25 – 28/4/25</u></p> <p>Appointments Available 6732</p> <p>Appointments Booked 4815</p> <p>Did Not Attend 650</p> <p><u>Complaints</u></p> <p>no new complaints – previously reported 2 complaints are still being investigated</p> <p><u>Immunisations</u></p> <p>The only currently data available relates to the Spring Covid Immunisation which has had 26% take up. This is for those aged 75+ years, immuno compromised and care home residents. AW confirmed that the first batch delivered was Moderna but the next batch is likely to be Pfizer.</p>	
5	<p><u>Advice & Guidance Scheme</u></p> <p>This scheme had recently been in the media but AW confirmed that it had been piloted in some areas of the country, including Redbridge, over the past three years. GPs do receive payment for using this but it does involve additional work. A GP can email a BHR consultant to request specialist guidance for a patient with certain medical conditions – the consultant replies usually within 48 hours to advise if the patient should be given medication, or be sent for tests or they require a referral to the hospital. In which case a direct referral can be made which is much quicker. The scheme is working well and continuity of supervising GP is offered whenever possible.</p>	
6	<p><u>Any Other Business</u></p> <p><u>Letter to Wes Streeting</u> – The Chair had written to WS on 28.1.25 and a reply was received from the Dept of Health & Social Care on 3.4.25 and had been circulated to PPG Members. It gave information about the Elective Reform Plan but was very general. After discussion it was decided that the Chair would contact WS again with an invitation to attend our September PPG meeting.</p> <p>Members raised the following matters:-</p> <p><u>Blood tests</u> – several PPG members mentioned confusion as to whether or not blood tests which they have been asked to have require fasting. Staff seem to have been giving different guidance to patients – AW said that monitoring blood tests do not require fasting but diagnostic tests do in which case patients will be told in advance that fasting is required.</p> <p><u>Physiotherapists</u> – the practice physiotherapists are excellent and can refer for scans but are not allowed to prescribe. One PPG member had been told following a consultation with the physiotherapist who had recommended medication that the wait would be over 2 weeks to have an appointment</p>	JHH

	<p>with a clinical pharmacist for a prescription to be given. AW confirmed that any of the GPS could issue a prescription for medication so it was not necessary to wait for an appointment with a pharmacist.</p> <p><u>Staff name badges</u> – PPG members agreed it would be helpful if staff reverted to wearing name badges again.</p> <p><u>Covid Vaccination Centre Banner</u> – A PPG member reported that this banner (displayed outside the premises) has been misunderstood by a resident who was under the impression that the practice operates a walk-in service. On walking in and requesting this service he was told it is not available.</p> <p><u>Notices/Posters on display in the building</u> – some of these are out of date. The Chair suggested that if any PPG members notice these when in the building they can report back to AW so that these can be removed or updated.</p> <p><u>Approval of Prescriptions</u> – there was some confusion about the situation if a prescription request has not been approved. One member only became aware when going to the pharmacy expecting to collect the full prescription to find some missing as it had not been approved. AW said he would have to investigate the circumstances but it is possible to check on the NHS App to see if a medication has been approved for prescription. If a medication is not on repeat prescription it would have to be requested each time anew and it can be complicated if the medication has been originally prescribed by a hospital and not the GP practice. It can take several weeks for the practice to receive a letter from a hospital trust confirming a change of medication as letters are sent by internal mail not email. Some medications are no longer able to be prescribed on NHS.</p> <p><u>Whooping cough</u> – the media has reported an increase in rates of this amongst young babies as mothers are not having the vaccine in pregnancy. AW confirmed that ante-natal care is provided from Hainault Health Centre and vaccine would be offered there - vaccine would be given at FXMC if requested.</p> <p><u>Promotion of the NHS APP</u> – NHS England in partnership with Redbridge Vision had been running some workshops at local public libraries but had been disappointed with attendance. KK asked if this would be something that could be done at FXMC and will follow up with Vision & AW. AW confirmed that a text message had been sent to all FXMC patients informing them that in future messages would be sent via the NHS App providing the feature had been turned on. This is a real cost saving for the practice.</p>	<p>AW</p> <p>ALL</p> <p>KK/AW</p>
7	<p><u>Date of Next PPG Meeting</u> (Hybrid Meeting to be held virtually over Zoom plus option to attend at FXMC) - Monday, 9 June 2025 at 3.00 pm Looking ahead it was decided to keep both September 15th and 22nd free for the September meeting with an invitation going to Wes Streeting MP</p>	ALL