

**MINUTES OF THE MARDEN MEDICAL CENTRE PATIENT PARTICIPATION GROUP MEETING 18<sup>th</sup>**  
**March 2020 via ZOOM**

**PRESENT** John Haddow, Jane Annetts, Gill Tarry, Lyne and Chris Childs, Mo Clayton, Jill Nicholls, Judy and Carroll Taylor, Kate Tippen, Sian Burr, Eunice Doswell, Julia Addison, Peter Kershaw, Jenny Butler, Sarah Chapman, Liz Simmons, Carol Hogg, Annette Sealey, Bill Wallis, Valerie Hesketh, Julie West, Jenny Jones, Dr Julie Morgan, Practice Manager Mary - Jayne Bournes, Dr Justin Charlesworth and Katy MacMillan Weald PCN

**APOLOGIES FOR ABSENCE** Angus Boucher, Ann Boswell, Anthony Sampson, Catherine Alderson

**WEALD PCN UPDATE.** Dr Justin Charlesworth, a GP in Cranbrook and Clinical Director for the Weald PCN, spoke about the Wealden Primary Care Network (PCN). The PCN covers an area of 11 practices and approx. 50,000 patients, dealing with integrated care, social issues, health & wellbeing, and other relevant care matters. The PCN addresses local health needs and identifies future needs.

JohnH noted the term PCN had become better known during the pandemic. JohnH asked with hindsight what the PCN would have done anything differently done during October/November 2020, JustinC responded, smaller practices have different problems to larger practices, which have backup staff in the event of illness or absence. The PCN might, with hindsight, have made a different decision re vaccinations. Phase 2 of vaccinations – under 50s (18-50 age group) should be early May. Government wants GPs to do more ‘work as usual’. The CCG will decide how this programme will continue - pharmacies are applying for the right to administer vaccinations. Second vaccine appointments should go ahead as planned.

In answer to a question on patients undergoing chemotherapy and the vaccine. JustinC said those having chemotherapy should have had vaccination priority. Early vaccinations in Group 1 had been based on age and care home priorities.

In answer to a question about covid boosters. JustinC stated that covid booster jabs might be available in autumn but still early days – on the likely plan.

The aim of the PCN is to make Practices more resilient. Many elderly feel isolated and bus services to and from hospitals would help. Surgery based Physiotherapists, child health nurses, paramedics and associated roles are being considered, and the PCN may have more staff in a couple of years, which could help practices.

The latest Feb’21 health and social care White Paper set out proposals for a health and care Bill. Under the new plan CCGs will disappear by April’22 and will be replaced by an Integrated Care System (ICS). PCN’s are highly likely to continue in some form.

Justin Charlesworth and Katy MacMillan left the meeting.

**PRACTICE UPDATE.** The full Practice Update is included at the bottom of the minutes. A brief summary. Dr Julie Morgan said the practice has now reached **7,000+ patients** which will continue to increase as the new houses are occupied. There is also a ‘village’ baby boom’. More face-to-face appointments should soon be possible. The pandemic may have altered working conditions permanently. **39% of Marden patients have now received their covid vaccination as at 18/3/21.**

The new building is being commissioned. Friends of Marden Medical Centre were thanked for their help in fitting out costs. A contraception clinic will be opening. The practice is working with local organisations such as the Food Bank, Church, MPC, School, other groups etc.

Julie felt the flu jab will continue independent of Covid jab. Waiting times at hospitals are long due to Covid.

Julie and Mary-Jayne left the meeting.

**DECEMBER'20 COMMITTEE MEETING MINUTES:** Group were asked to approve the December'20 meeting minutes. Proposed by JulieW and seconded by JillN that these be accepted. **Agreed.**

**PPG ACTIVITIES UPDATE.** JohnH gave the following update.

1. PPG membership 258. Facebook followers 59. +10% year on year growth.
2. Regular PPG email & FB communications were increased as vaccine roll-out started.
3. Attended CCG West Kent PPG Chairs calls x 2. Copy of minutes will be made available to anyone who requests a copy. Weald PCN PPG meetings put on hold – I have offered to pilot chair the Weald PPG Chairs Group.
4. Attended K&M Council Covid-19 Community Champion calls and shared relevant updates with members.
5. Engaged with some members & the Public Health teams @ MBC and KCC. Sent email to local MP Helen Grant – to lobby for better communications about the vaccination roll-out & why Marden Medical Centre was not delivering vaccines.
6. Published the Spring'21 Newsletter.
7. Helped in creation of the Health & Wellbeing Contacts A4 handout - distributed with latest MPC Newsletter with the grateful help of a few members.
8. Attended community calls hosted by Dr Morgan to encourage more village collaboration generally & around better supporting vulnerable residents and non-digital patients. Julie West has kindly agreed to lead on behalf of the PPG going forward.
9. Attended the KMC and KCC Digital Champions Project kick off call to see what we can leverage @ Marden in the next year.
10. Continued to support Surgery Pharmacy deliveries (1/week approx.).
11. JohnH took over PPG website from Jane Annetts. Membership transfer ongoing to Annette Sealey.
12. Obtained a ward survey report from MBC. MBC Residents COVID Survey - July 31- Oct 2. Published end of Oct'20. 62 out of 1261 respondents were Marden & Yalding residents. MBC adult population 155,000. (1%). Not a large representative study but some interesting data. Will distribute report with minutes.
13. Census Day on 21<sup>st</sup> March.

KateT acknowledged the help of PPG members to help distribute the latest MPC Newsletter.

Discussion on the moderation of PPG Google groups forum. Group **agreed** to continue with the current moderation approach by the chairman and membership secretary – jointly. Medically sensitive or inappropriate mails would be moderated and redirected to the Surgery as needed. This means that only a few approved committee members can send mails to the MMC PPG mail group – without moderation. No one can 'reply all' – or post without an approved moderation. This maintains the Group's privacy policy which can be found on our website – [www.mardenppg.org.uk](http://www.mardenppg.org.uk)

Discussion on the potential of offering PPG volunteers to help patients get on-line to the Surgery – a basic digital hand-holding service to take the pressure off Surgery staff. Initially this would be a remote phone-based support offer only. JohnH to send an ask to all PPG members asking for volunteers. The PPG would set up some basic training for volunteers and aim to have something up and running for patients in the April-May timeframe. SianB offered to be the 1<sup>st</sup> volunteer to help.

KCC has various similar schemes in pilot and being setup to support residents in Kent with no or limited digital skills or broadband equipment/access. The PPG would seek to leverage these programmes where appropriate to support Marden patients.

AnnetteS suggested that the information on digital handholding be shared with Collier Street Parish Council, when launched.

Discussion on ideas for PPG activities over the next 6 months. The PPG members typically supported the Come & Sing Group, Living Memories and Walking Groups – when they are running. The plan would be to support the Dementia Friendly Garden in the new allotments – when they are approved and start. Ideas of new groups or areas for the PPG to support/attend should be sent to JohnH via email.

PeterK asked if members were aware of anyone having issues with pc-based Patient Access and the recent introduction of 2-factor authorisation with a memorable word requirement. To make any changes - a mobile phone is mandatory. JohnH offered to do some research. (Update: The position of Patient Access is that for patients without a mobile phone they will need to delete and re-establish their account registration – every time they change their memorable word. In which case a mobile phone is not required. JohnH will continue to investigate this limitation).

JohnH asked Committee members to let him know by the next meeting if they would like to seek Committee re-election for 21/22.

**DATE OF NEXT COMMITTEE MEETING THURSDAY 24<sup>th</sup> June 2021 at 7:00pm including the AGM.**

This concluded the meeting.

### **Dr J Morgan's Full Marden Medical Centre Update - March 2021: Looking to the Future**

There are so many adjectives and phrases that have been used to describe the last year: unprecedented, tumultuous, challenging, uncertain and frightening are but a few. It has indeed been a year like no other but as the country emerges from its second national lockdown we are cautiously looking to and starting to plan for the future.

Our list size is now 7000 and is still increasing; we would anticipate that there will be another 15-200 new registrations over the coming 6 months as the new homes on the Russet Grove development become fully occupied. Like many areas of the country Marden is also seeing a baby boom and at the start of this year we will have double the number of new births that we did last year (the consequence of a long lockdown perhaps!). Patients that kept away during lockdown are now contacting us and we are facing a definite surge in demand for appointments, with many of these patients unfortunately presenting with complex issues. The waiting times at local hospitals both for inpatient and outpatient care adds to the challenge of supporting and caring for these patients in the community. This is causing significant strain on all our team.

We continue to follow national guidance from the BMA, RCGP and NHS England and are maintaining our current system of triaging all patient requests for an appointment by phone. An increasing proportion, approximately 30%, of these requests is now converted to F2F appointments. Full PPE (mask, visor, apron and gloves) is worn for all F2F patient contacts. Any patient with a high temperature or symptoms suggestive of Covid is assessed in our dedicated "hot zone" which is separated from the main building and has enhanced infection control protocols. Video consultations and the facility to review photos have both proved useful and popular with patients and even as lockdown measures ease, we plan to continue with these. We have embraced remote working with secure laptops, and this has proved invaluable when staff have had to isolate because of family illness or Covid contact, or when we have not had space in the building because of the need to socially distance.

At present there is no suggestion that the national guidance will change soon, and it may be that the pandemic has brought about a change in our way of working that will never return to “normal”.

Over the coming months we will be to continue to care for all patients who present with a need, but we are also focusing on managing increasing frailty in our elderly population, dementia, mental health issues, safeguarding concerns, domestic abuse, learning disability and long Covid. We are working on improving uptake of screening services, early cancer diagnosis and prioritising immunisation services (children and adults). We continue to support the Covid vaccination programme, with 39 % of our patients currently vaccinated with one dose and 1 % with two. We phone those that appear not to have been vaccinated and encourage them to attend and facilitate booking of appointments in those that are having difficulties. Justin has already spoken about the Weald PCN’s position on the programme, so I won’t repeat that here.

With all this demand the much anticipated and planned for “portacabin” (although we feel it is much grander than this!) has arrived just in time. It will provide us with a meeting room, a small consulting room which will be used as our “hot zone” and has allowed us to convert our current meeting room into a larger teaching room which can also be used as a teaching room. We also now have a shower on site. We are very grateful to Friends of MMC for supporting us in funding the equipment for this additional space. (Photos distributed to PPG members via email).

Other priorities over the next few weeks and months:

- Staff recruitment and retention: we have a new dispenser and reception apprentice starting in April. We are also hosting student nurses and hope to benefit from some of the additional roles (e. physicians associate, clinical pharmacist) that are being recruited via the PCN.
- Provide a streamlined contraception service with the provision of a coil and implant clinic (one of our nurses has done additional training to provide this)
- Continue to increase patient use of online services (John will mention more about this later)
- Promote the use of e-consult (a digital consultation platform). Some of you may have noted this on our website.
- Improve our systems for chronic disease management. We are using to “month of birth” review dates and are making use of a system called Medlinks which enables patients to complete a template prior to their review to update us on any changes.
- Work together with the other community organisations (foodbank, school church, parish council, pharmacy, dementia and singing groups) to facilitate communication and collaborative working. We have already had 2 successful meetings.
- Planning for our seasonal flu campaign and considering how this may work together with giving Covid vaccination boosters (should this prove to be required)
- Collaborating with the PCN on new initiatives

One of the many challenges of the last year has been keeping up with the pace of change and communicating this to our patients, we have been very grateful for the support of the PPG in this and also for the work that has been done in helping at our flu clinics and delivering medication to those that are shielding.

The future does of course remain uncertain for us all but when we look back at how we were a year ago we are feeling much stronger and better placed to cope with the challenges. We may never return to “normal” and there is sadness in this, but we hope that we can work together with our patients to find a “new normal” that enables to continue to provide the high standard of care we always aim to achieve.