Bewick Crescent Surgery Patient Participation Group

Notes from the meeting held 13.11. 2023

HS welcomed 2 new prospective members – Sue Hairsine and Lorna Drury and there were introductions all round.

PRESENT Hilary Stoker HS Chair, Marion Midgley MM, Tony Armstrong TA, Pat Armstrong PA, Sue Hairsine SH, Lorna Drury LD, from 4.15 Ruth Lee RL, Brian Cockayne BC and Bob Adamson BA

APOLOGIES were received from Jean McCready JMc, Allison White AW ,Sue Cooke SC and David Taylor DT.

The Group accepted the resignation of Kathryn Garnett.

The notes of the last meeting were reviewed and confirmed as a true record. There were no matters arising.

REPORTS

HS gave a resume of the CPRG, HCEF and PCN meetings attended by her (the papers had previously been circulated). There were no questions.

BA gave verbal reports on the following:

GAMP 18 07 2023

The housing conversation in the Durham area.

Delivery of housing for older persons housing was in line with Co Durham plan.

ASBOs on the increase.

Police Station had received an extension from the Fire Service stating they could continue operating in their existing premises until Dec 2023.

GAMP 26 09 23

Durham County Council’s budget for the year.

Durham County News to go online.

Increase in house and garage burglaries.

PCSO intake delayed.

Police Station situation not resolved but PCC Joy Allan promised a station in Newton Aycliffe town centre however this was proving difficult.

There were no questions.

PEOL 07 09 23 (Palliative and End of Life)

This was an interim meeting prior to meeting in October.

The group were in discussions with Sunderland and South Tyneside PEOL with a view to sharing ideas and solutions but they would remain separate groups.

Voices Survey run by St Cuthbert’s Hospice now up and running unfortunately a similar survey also being done by The Kings Fund.

PEOL 19 10 23

Self Assessment update still ongoing. This checks how individual organisations are delivering the required level of service including the six ambitions.

CQC(Care Quality Commission) are currently inspecting Willowburn Hospice (Lanchester) and St Cuthbert’s Hospice (Durham).

Macmillan End of Life Care – there were some reservations as to whether this was a good investment.

There were no questions.

CANCER REPORT GROUP

AW unfortunately had a hospital appointment but had forwarded 3 issues – these to be raised later in the meeting when the Practice Staff were present.

AGE CONCERN – TA nothing to report

CDDFT Darlington(Co Durham Foundation Trust – Hospitals Dton, B/A, Durham, Shotley Bridge, Chester le Street, Barnard Castle, Sedgefield, Weardale,Community based settings plus providing care in patients homes)) DT tendered his apologies as he had work commitments having just returned from holiday but he forwarded the report on maternity services at Darlington which has been forwarded to members. Thanks David for your report.

SPCN1(Sedgefield 1Primary Care Network) Joint Meeting was reported upon.

The practice staff of Alison Kitching AK, Dr Kim Hardy KH and Janice joined the meeting 4.30

Apologies from Julie Carter JC.

AK went through her report which had been circulated.

There were several queries regarding how to make appointments both by eConsult and by telephone. There was a long lively discussion and AK explained how the system worked also the Enhanced Access appointments facility at Jubilee Medical Centre (6-8pm Mon – Fri and Saturday mornings). These appointments to be made via Bewick Crescent and the staffing comes from the 4 practices in our PCN area (Peaseway, Jubilee, Hallgarth and Bewick). AW raised 2 queries by email regarding appointments but they were heresay so no further action could be taken however we would monitor the making of appointments and discuss at our next meeting. The other issue raised by AW re the completing of a form was to be dealt with by KH directly with AW. Patients who lived in areas of poor mobile phone reception experienced difficulties with the call back service – on occasion the phone gave the impression of being engaged or no response when in point of fact the problem was lack of reception. The software only allows1 call back and patients should be made aware that the call back will be made to the phone number used to make the initial call. Representatives from the areas of poor reception were asked to make people aware of this problem and to use their landline if possible. The non availability of various drugs was raised and the difficulty if there was one on a script with several others.

Janice gave an update on the Administrative team and their various roles in the practice.

HS reminded members that personal issues were not to be brought up at meetings.

HS concluded the meeting by asking the 2 prospective members if they wished to join the group to which they agreed.

The meeting closed at 5.50pm and the date of the next meeting to be arranged probably February.