



The Peninsula Practice

Questions and Answers from Zoom Public Meeting 04.06.20

We apologise for the delay in answering all of the questions raised in relation to the Zoom Public Meeting on the 04.06.20. The surgery had some technical issues and the meeting recording crashed our computers. The staff present at the meeting have collated the answers from memory and have therefore also had the time to make a fuller response as some questions were not fully answered.

Q: The residents of Aldeburgh are worried that you are going to close the surgery.

A: We can absolutely reassure all residents there are not and have never been any plans whatsoever to close Aldeburgh Surgery. We had no idea that this was even a concern until it was brought to our attention recently. It is shocking to think that we would rescue a precious NHS GP service to close it down and we have no idea where this thought came from. We would put up a metaphorical fight to any suggestion or plan which threatened the service at Aldeburgh

Q: What is the long-term strategy for Aldeburgh surgery and how are you proposing to meet the needs of residents who are elderly, vulnerable and with complex medical needs?

A: The Peninsula Practice has a clear vision to strengthen and develop the Aldeburgh branch site to align with the rest of the highly awarded Peninsula Practice and shape it into a high quality centre for medical and holistic care. We want to develop relations with our patients and are currently working very hard with our community colleagues in health and social care to look at ways to improve the service to all.

Barriers to healthcare have included isolated working of teams in the past and we have exciting opportunities to break these down and truly put the patient at the centre of every development we make. Some of those relations include: - this is not an exhaustive list and please see our community page on our website for comprehensive and contemporaneous information of services:



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Community connectors (also known as social prescribers) currently have clinics to support those feeling vulnerable, isolated, lonely or in need of community support.

Mental Health link workers have weekly clinics direct from the surgery to support the emotional well-being for our patients. We have Citizens Advice clinics for those particularly needing financial benefit support.

Soon we will have a first contact physiotherapist for acute musculoskeletal conditions, and will be sharing a pharmacist with our neighbouring practices.

The Peninsula Practice has a bespoke compassionate community's project for companion support to those at end of life.

Our district nurses are working in integrated neighbourhood teams together with occupational therapists, physio and social workers to provide a wrap around the patient approach to team work.

Patients are being discharged from hospital with care packages from these teams to minimise their risk of getting COVID as quickly as is safe and also with an aim to reduce deconditioning which is a big risk with extended hospital stays.

We are working even more closely with Hospice teams in a 'hub' like way of working to provide immediate support and access to patients in crisis of acute need of end of life care.

We would like to work closely with Aldeburgh cottage hospital to see what we can develop to further provide local care

These are just some of the things we are working on to develop a most compassionate and patient centred service. The pandemic has actually enabled an acceleration towards our vision for integrating medical, social and mental health care.

We need more patients to join our patient participation group to help us develop this vision. If you are interested please apply via our website or call us.

Q: I cannot get paracetamol and ibuprofen on repeat prescriptions.

A: national prescribing governance strongly advises against GP's being able to prescribe medications that are available 'over the counter' (OTC).



However if patients suffer with long-term painful conditions where they require regular medications they are encouraged to discuss with a clinician to ensure they are not depending on over the counter medicines, especially also as they may well need a reassessment of the condition.

Q: Many patients are not all connected digitally can you do a mail shot for updates.

A: We have taken on board the criticism of lack of communication and are trying hard to improve here. One of the problems is that as soon as an update is published on paper the situation has probably already changed. There is a newsletter which we print and provide copies to those who have no digital access. Examples are our rapid development of an improved website with very up-to-date information we have developed a new Facebook page and we have our online newsletter available to all patients who prescribe.

We also have a designated patient liaison lead Sarah Fiddes. Patients are welcome to arrange to speak to her should they require any surgery related information that is not available to them otherwise. We are committed to developing good relations with our patients and wider community teams so any suggestions would be gratefully received.

Q: Hospitals and community healthcare organisations are preparing for a possible second wave of the COVID virus in July/August is The Peninsula Practice also operating on that basis.

A: Yes. Our population area is one of outstanding beauty as well as a holiday destination and a swell of people arrive to their second homes in these coming months. As such we are expecting a second surge of a significant number of cases. Working closely with our Clinical Commissioning Group and being constantly receptive and responsive to local and national data which comes in daily we are doing everything we can to prepare for this surge.

During this pandemic The Peninsula Practice has operated according to 3 overriding principles - the safety to our patients, the safety to our staff (so they can deliver the service) and the available resources. We are pleased to report that in the past several weeks we have successfully



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been able to open three of our four sites enabling improved access to medical care for all patients. However if we have a further outbreak that threatens those three principles we will adjust how we do things to provide a safe service of essential care. This may mean inconvenience and delay and we appeal to all our patients for their understanding and consideration.

It has been enormously helpful to us when patients have been able to use our wider services for things such as blood tests at Landseer Road and sometimes travelling to alternative Peninsula branch sites and we are very grateful to those who have been able to do and continue to do so. We have had very positive feedback from those who have used these resources.

It is critical that medical care is not compromised and patients will always be seen where there is a clinical need if they cannot travel.

Q: One of the features of this pandemic is a greater move to digital technology e.g. online meetings and consultations. Will The Peninsula Practice now be maintaining and developing this approach even after the pandemic is over?

A: This pandemic has accelerated the NHS England's digital plan for NHS care nationally. We are seeing significant advantages for individual patient care as a result. Meetings that would take us away for a whole afternoon are being 'attended' with more efficiency and with zero carbon footprint. Staff meetings were especially difficult to get full attendance which has been resolved by video means. Patients have their care managed within 12 hours of calling the surgery in the large majority of cases. Skin conditions are being diagnosed by patients sending in photos rather than having to be at risk by coming to the surgery where we continue to see unwell possibly COVID infected patients. Video consultations are taking place regularly enabling us to see our patients where appropriate who may be shielding for example.

We are supporting our care homes who have to be meticulous with infection control, by regular contact including video ward rounds.



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Q: There's been understandable supply chain difficulties with various medications over the last couple of months is this likely to continue for sometime? If so is there a need to review the contingency arrangements? Is there any way of creating a list of medications that are in short supply? Also rather than individuals having to phone around numerous pharmacies to source then organize collection of the medication would it be possible to utilize a mutual aid arrangement between the practice and other NHS/commercial pharmacies?

A: Currently this seems to have resolved however there will inevitably be times when medications are out of stock and we will always seek alternatives or source at other pharmacies. Producing a list would cause more confusion as it often changes from week to week but we are certainly looking into ways of optimising using digital means a better dispensary provision.

We appeal to our patients to bear with us and thank them for their patience and tolerance through this time as we need all eligible patients to use this service to be able to sustain it across the practice.

Q: What services are currently offered by Church Farm surgery to all the patients?

A: Church Farm surgery is now a branch site of The Peninsula Practice. The government via NHS England has and continues to guide surgeries nationally during this pandemic as to which services we can make available to patients. As such all available services are available to all patients and this has never changed throughout the pandemic.

For specific requirements please call the surgery but we are ahead of many local providers in opening up more services which others are not as yet - such as joint injections, long term contraception, minor ops, long term condition blood tests etc.

Q: On which days is the surgery open to patients in Aldeburgh?

A: The service has never been closed to patients in Aldeburgh as explained above during the first phase of this pandemic to keep patients and staff safe we had to have a contingency plan which was fair and



appropriate to all of our 8000 patients. All surgeries were operating but the doors had to be closed for infection control and we decided that the hot hub where patients were seen face-to-face with the most fair and equidistant surgery which was Orford.

This has now changed and for many weeks now we have resumed face-to-face services at 3 of 4 of our sites. We are operating a booked appointment only service, which is likely to continue through until at least autumn this means patients cannot walk into the surgery freely. This is for infection control and patients will be screened by the clinician or nurse who is seeing them and we are asking all patients to wear a face covering unless there is a medical condition preventing them from doing so or they are a child.

Q: When you're open fully could you please publish on your website the names of the GPs and nurse practitioners who are working in which surgery on which days.

A: Due to the rapidly evolving situation we often have to move our staff at short notice to different sites so publishing any timetable would only cause confusion We aim to provide a seamless surgery regardless of the clinician you speak to.

Indeed we are developing work to share learning and upskill each other to optimise this. However we also want to provide a consistent service to those who have complex care needs. If you have an episode of care that a particular clinician has been managing we will do everything we can to ensure that consistency is maintained by the same clinicians Please speak to our Care Navigators if you are having concerns regarding this point.

Q: Post virus will there be a daily GP presence at church farm?

A: There has always been a daily presence at all but Hollesley site and our 40+ work force have never stopped being available to provide the service at each of those sites. Please see above detailing and our website explains the temporary contingency provision and rationale for, at Orford during the first pandemic surge.



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Q: In view of the apparent move to move to two more phone consultations can they outline how they propose to engender confidence in patients regarding GPs ability to diagnose without examination?

A: Firstly it is important to highlight that every medical practice in the UK has been instructed to manage their patients in this way. Furthermore we are seeing hospital patient consultations also being performed by telephone.

On August 5, 2019 under Dr Ball and Dr Jones, Church Farm Surgery switched to a telephone triage service. In November 2019 as The Peninsula Practice were preparing to take over, the decision had to be made as to which service to offer - the former Peninsula Practice patients were still used to the traditional booking themselves for a face-to-face Appointment.

However the Church Farm approach had been considered so successful that the decision was made to take on this approach and it was serendipitous by the time the pandemic arrived because we had the previous months of experience in how to efficiently manage this

There is huge amount of research into telephone triage and telephone consultation that shows the patient care is optimised over and above how it was delivered with the traditional approach of patients effectively triaging themselves for an appointment Patients can contact the surgery and within 12 hours a plan will be made to manage their care. Previously patients were waiting 3-4 weeks to be seen and in many cases this was unsafe.

The research shows not only that the majority do not need a face-to-face appointment with a clinician, but that delays to getting the right medical care are substantially improved by a clinician performing the triage.

Diagnosis is largely based on the history - the symptoms that a patient reports but importantly the consultation managed by the experienced clinician. Face to face consultations are necessary when for example a patient needs close clinical contact such as needing an abdominal examination or mental illness support in some cases.



Q: You say there are a lot of complaints on social media about your service may I suggest you use the Aldeburgh COVID Facebook page?

A: We are very sad to have put in massive efforts to support the previous Church Farm partners by rescuing Aldeburgh surgery to have then received multiple complaints about the telephone triage, which was running for 6 months prior to The Peninsula Practice taking over. We are also upset but the negativity regarding our contingency plans to keep our patients safe and service sustainable in this unprecedented tragic time. A lot of negativity has been published in social media and we will not enter into dialogue using this stage. We urge our community to take responsibility for finding out the facts before they inform others and that is why our website is kept so updated and we have made a role of patient liaison lead - Sarah Fiddes who is also available where there are concerns.

Patients have in fact suffered by believing the gossip (such as Church Farm is closing down to be developed as housing - which is nonsense) and we need this to stop. That is only possible by our patients recognising their responsibility to their community and ensuring they report fact not heresy or gossip. Our website provides the facts not social media.

We have recently developed our own FaceBook information giving only page, which will also provide factual information.

Our staff have been worn down by such unnecessary damaging negativity and we are genuinely proud of the outstanding care we strive to deliver even during this extreme adversity. If you can support us with understanding and kindness it would help enormously to staff morale and resilience.

Finally a statement from all the staff;

We are committed to our patients and every day we live and breathe our professional responsibility to you all. This pandemic affects each and every one of us. There are no NHS heroes but here we do have a job to do. I cannot think of anyone in any line of work who is not a key worker whether paid or not. Parents, carers, drivers, farmers, fishermen, recycling and refuse collectors etc etc.



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Certainly we do not determine any single person as being better than another nor less deserving than another. We do not believe in '...but they had underlying medical conditions' as being an acceptable compromise for the pain that losing a loved one to COVID or indeed any other illness causes.

We will continue to devote our energy in providing care - medical and compassionate care. We are sorry it has come at a time that that we intended to grow relations and improve and extend the services to you all with us doubling the size of the surgery on January 1st. We are sorry that we had to temporarily close Alderton, Hollesley and Aldeburgh sites, and we are sorry that Hollesley remains closed for the time being. But we feel it was the right thing to do and we hope you understand why.

We are utterly overwhelmed with the extraordinary kindness, compassion and time that our communities across our over 100 square mile patient population have provided to so many of our vulnerable patients - those who have been shielding; those who are housebound, who have been suddenly bereaved, those unable to visit their loved ones at hospital etc.

Our Good Neighbourhood schemes and our Compassionate Community initiative with our companions have been invaluable and you are the unpaid heroes.

We are very grateful to all your supportive cards and letters and comments and words when you come to collect your or others prescriptions, or drop off samples. The statements of gratitude outweighs those negative comments mentioned above and they keep us going on days when we feel low, when keeping up with the changes and balancing our home lives gets the better of us.

We will get through this together. Stay well, wear a mask when you go out and maintain physical distance.

With sincere best wishes,
On behalf of all the staff,
Dr Lindsey Crockett and Linda Deabill
Partners