

Minutes of Board Meeting

24th November 2020

1) Present:

Paul Charnock (Chair of Board), Jane Hurd (Board), Stephen Manning (Board), Penny Penn-Howard (Board), Catherine Fuller (Coordinator), Karen Hodgkin (Coordinator).

Apologies:

Chris Douglas (Board)

2) Approve minutes of 29.09.20

Minutes from 29/09/20 were approved as correct.

3) Matters arising from minutes

No matters arising from previous minutes. The actions from the previous meeting were looked at and confirmed all complete.

4) Work Plan

MTTG work stream - JH said that KH and CF have followed up Xray and Physio appointments and Xray now takes place on a Thursday. Physio are trying to come over on Thursdays where possible, but this depends on flight and staff availability.

Hospital discharge still seems to be a problem at times. We are currently looking into this and have just collated results from our hospital discharge survey. The survey report and all community feedback will go to Patient Experience.

JH said that each ward should have a manual regarding discharge for IOS patients. SM said that discharge should be organised through patient transport, but not everyone knows they need to contact them. PC explained that the patient should have a conversation about hospital discharge when they arrive on the ward.

PC mentioned that a large group of residents have been sent letters inviting them for screening on the mainland. Some are having trouble getting flights booked and are having to keep on phoning PTS. CF explained the issue is with the fact that Skybus only have one morning and one afternoon flight. JH suggested contacting Skybus to see if they would put on more flights. CF/KH will email them with our concerns about this.

PC said that we used to have regular meetings with AK and SF. CF explained that we are in regular contact with them and know what is happening. At Park House all rules and procedures regarding COVID are in place.

Remote consultations – PC asked if we had any qualitative thoughts from professionals and the community regarding non face-to-face consultations. CF/KH explained we are waiting on our survey results and those from RCHT.

Opticians – We have contacted the school nurse and health centre to see about the possibility of another optician visiting the islands. The response from the Health Centre is that there is no flexibility and this would not be possible. CF/KH to approach spec savers and see what they can offer.

We have had feedback from the community around this and the costs involved in having to take children to the mainland to get their eyes tested and glasses fitted. SM thought that Specsavers used to visit the islands. PC asked if we could get a 'position statement' of where we are with the current optician on the island; we could take this to scrutiny.

SM asked who pays for the equipment in the room at the Health Centre that is used by the optician? CF explained that it looks like it is all NHS supplied equipment. SM asked why two opticians cannot use it? CF read out the response form the Health Centre:

"I have had contact from a patient asking exactly what they have approached you about and understand their concerns which I did advise them to contact the Healthwatch team. The practice does not provide non-NHS services in primary care, only our contracted services which have been approved. We have a contract with our locum optometrist who used to work for Reynolds opticians, we do not have a contract with Reynold's themselves.

We also do not have the capacity to accommodate a private service within the building. The reason there is a long waiting list for the optician is because the optometrist can only visit up to three days at a time, sometimes this is shortened due to bad weather whereby they have to travel back to the mainland earlier. We have started our services again for the optician however these are taking longer with less patient capacity due to Covid 19, sanitising after each appointment and social distancing, which has prolonged the waiting list even further. We were due to have a clinic next week for 3 days but due to the second lockdown, felt it would be the safest option to cancel for now.

We do advise our patients that if they are travelling to the mainland then to try an arrange an appointment to be seen there if possible due to our long waiting list. I know it is a problem and a cost to some patients who may find this impossible, I have also advised to speak further to their mainland optician regarding fittings etc. to see if they are able to help further with Isles of Scilly patients who have any issues".

CF stated that it would be so beneficial for residents here if we can get this sorted. PC asked if the 'position statement' could be sent to the whole Board.

Integration transformation – PC - This is still going ahead, but have not heard any more on it. Some services will be moving to Cornwall; these have not been identified yet. PC raised the issue at one of the meetings that the community needs to have early warning if services are moved to Cornwall. The response was that they are being transparent about it.

Cancer Care – PP-H has spoken to Di from Macmillan. Activity on the islands has gone quiet due to COVID. PPH plans to call everyone in the Scilly C-Siders to see what they want to do / need. Di from

Macmillan is keen to work with us to give better support / on-line support for cancer patients. PPH recognises though that a lot of people will not have access to the internet.

JH asked if the group were aware that the library is now open for sessions where computers can be used and that posters are up displaying this as well as being advertised on FB.

CF/KH next action is to share the data from the survey with Di.

PC asked if we had welcomed the new dentist. CF /KH said that a welcome is on our website and in our next newsletter.

PC said that he gave a HW update to Scrutiny. JH asked if the Board could be sent the scrutiny report.

PC explained that we have high community engagement figures. PC said it was a well-presented report and thanked CF and KH. PC said he will discuss workload with KH and CF in the future.