

Fountain Medical Centre Patient Participation Group Meeting

Location: The Fountain Medical Centre via Teams

Date: Monday 26th September 2022

Present: SG, TH, LB, LF, SI, SP, SR, JK and JG

Chair of Meeting - TH and SG

SG - Welcomed everyone to the meeting.

TH - passed on her thanks to SP for his help with the practice newsletter and said it will be on the website today and a link will be sent out to the patients to access.

SP - anytime I can be of a help please get in touch.

TH -Thank you SP and I will now hand you over to SG.

SG -Thank you for taking the time to join the meeting. I have some news for you, but you are probably aware of the Morley Health Centre merger and to mitigate any issues with regards to the merger as I am sure you are aware. We were approached by Morley Health Centre, and they are a pro-active single-handed practice which has 2400 patients registered. It has been there many years and the GP is coming to retirement as well as having some personal issues. It is a rather small practice and is finding it difficult with regards to impact of covid and impact on the services they can provide and as you can imagine it has now tipped the balance and they approached us for help. We have supported them since covid, and I am looking to share your views on it and to look at developing a survey from a patient's perspective of any issues we may have not thought about.

TH - we have been in discussion with Dr Sadique and an application has been sent NHS England. We have drafted some questions to discuss, and the merger will probably take place next April 2023.

When we tried to arrange the meeting a few of you could not attend and rearranged again last week and due to the Queens funeral, we had to cancel. Today we plan to read through the questions in the proposed survey. We are going to submit a questionnaire and patient letter and add in frequently asked questions. A letter will go out to all patients at both practices over the next 2-3 weeks and there will be a link to go on for the practice survey. We have highlighted a day for an open forum meeting. If there are any patients that need this in a different format, we will provide.

SG - so here are the questions for the Survey

Where are you registered as a patient/relative/carer.

Do you understand the reasons for merger?

When the practices merge will it cause problems with healthcare and how would you solve?

Do you use online access?

Which are the 3 things that are important to you when booking appointments?

Please tell us if you have any other questions regarding the merger?

Did you know every practice has a patient reference group and would you be interested in joining?

- SG that's a general overview of the survey. What are your views?
- SP would frequently question be first?
- LB what about those that don't have access?
- TH If they are not able to access online there are other sources and formats.
- SI spot on my question
- TH It is covered in the letter just needed your input with regards to questions and to run it by you for any ideas. The link takes you to an automated paper we would add that on for patients who cannot access, and we will provide a report of the results of survey on website and paper format. Different inequalities health questions.
- TH SI has helped with the covid clinics and in different practices and can see it is difficult for single handed GPs. The rules for NHS staff are still isolation up to 10 days if you work elsewhere, you can carry on and go to work. So, for a single-handed GP it is hard if he has staff off. When we have staff off together it has an impact, but it is the rule. Other access and areas we cover with the PCN and support practices.
- LF one possible question is to cover is their clinical safety urgent to contact 999 or 111. There is lots of wordy answers and how are you going to publicise as every patient will want to be heard and want to know the outcome.
- SG good point 1-5 might be better.
- LF- good for patients to give an answer 1-5 and does help. So much information you won't know what to target.
- SG I will look at amending some of them. One question eluded 3 things important to you we could re word. FAQ to what it means first answer I'm not sure what it means.
- LB how are they going to accommodate new patients. I have been a patient for 26 years and have no reason to complain maybe my good fortune. It will hit FB you need something to back up i.e., in the interest of the patient's assurance are only as good as you make it, clinical, car parking and staff welfare.
- SI assuming we are talking about the merger at the Morley Health Centre. Totally agree. Disability scale 1-10 1-5 sit on one side of the answer.
- SG absolutely SI.
- LF they are merging with FMC are they going to use the old centre with regards to appointments and use as a base. If I can't get an appointment with my regular GP I panic and say no and will wait.
- SI ratio to the surgery at Morley Health Centre is one clinician full time. The impact if any pain is at Morley Health Centre. They will have the option of so many doctors.
- LF I do agree with that and we all need a doctor and probably struggle. I have a tough time trusting.

TH – one of the FAQ is see own GP of choice and this will be sent to our patients and sent to Morley Health Centre patients. We can offer a choice and we are a bigger practice.

Dr Saddique and his staff and his patients will come here. He is going to retire in a couple of years. Nurse and admin team we have space for. With regards to what is going to happen to the premises, it is a community building that is used by District Nurse and the PCN and they are always looking in the locality and it would be best use for that site. As you know SG is Director of the PCN and is patient driven. Some of our space is used by District Nurses for the wound clinics. It will be a bigger team, more services on offer for patients with additional clinical staff and admin. We have a new salaried GP starting soon and we will have additional admin staff in place before next April Integrated into the team.

- LB obviously in light of a one man show to empower his patients to think about is the specialisms of our GPs Dr Carral ENT. Dr Hall Orthopaedic and Dr Gogna who is just amazing. In my 26 years of being at FMC the team and staff work together and this fine. It might help team with fresh blood coming in and try new ideas that you could amalgamate.
- TH Dr Saddique does minor surgery, and this will increase appointments. There will be lots of benefits at both practices.
- SI we are going to be able to make our practice bigger and better for both patients coming. It will be a culture shock for his patients. The selling point is we can offer a fuller service and not just reliant on one doctor.
- SG one of the challenges is getting a locum.
- LB costs you won't need.
- SI Absolutely right. Don't get appointment and can't get with a particular doctor will be a knee jerk reaction and is going to make worse. We must promote benefits of the merger what does this mean to me? It must be benefits and I am fascinated to see the questionnaire, how are you going to get result?

TH said we are working with NHS England and their comms team they are guiding us and will oversee the merger. They have seen a lot of this across England and will advise on FAQ.

- SG Lisa and Sean I think to use the scale would be a good idea. The draft we have done we will send to the comms team. We need to make sure we cover anything and put the positives in.
- SP- with regards to transfer of patient records how is done? Electronically?

TH electronic because we work across 7 practices, we all use the same system we will be able to view. On our 3rd floor we have 1600 files of patients records and their files will come here.

- SP if a patient moves from another part of the country, Morley Health Centre is on the same system but that would not be true for other practices.
- TH most are on Systm one or Emis. It's not the same from one practice to another. NHS England a press button and you merge medical records via a GP-to-GP transfer. We have been 15 -20 years paperless and those records that are older than 15 will have a combination of paper and electronic.
- SG does that help answer?
- LB it will be communities coming together.
- SI we need to explain how we have moved forward for the future covid vaccination clinic joint effort and PCN, it won't change the approach of some of the patients.

- TH FAQ they will add some of ours at the end. What if I don't move, they will be able to register elsewhere.
- SI does that mean there will be information in the questionnaire.
- TH yes. Standard questions and they will use the same question as us and then some relevant ones to them i.e., will I be able to see Dr Saddique when he moves to FMC. His patients will still be able to see him, and we will welcome them into our practice, or they can see any other clinician.
- LF some patients with autism or Asperger's don't like change.
- SI most people in Morley are averse to change, we need to change their view.
- LF I have problems with rejection and I can't cope until I see the benefits. FAQ will highlight all benefits.
- SI that will be everyone's reaction. They will get ENT specialist opinions their view will change. This isn't just a merger benefit 2400.
- LF- if I meet a new doctor I cannot trust, and they ask how I am I just say I am fine. I have EUPD if I'm self-harming or suicidal I will not tell new doctors.
- LB there should be safeguarding to a certain extent, and we should flag certain patients, Dr Gogna knows me, but they can look back in patients notes.
- SI I get it Lindsey f2f.
- LF I will just tell you I am unhappy.
- SI not sure if covered is the geographical spread the same as ours?
- SG there were few outlying areas which would have been difficult due to the distance and visits, and some were in the middle of Leeds, Kirklees and Calderdale.
- SG they will have to register with local GP.
- SI Will I get a worse service if I am housebound.
- TH Health Watch Leeds and patient communication lots sent out re accessibility made some changes. Specific groups of patients see a copy of the surgery 100% to make accessible equal opportunity
- LB leaflets taken down need to revamp to entice patients in a monthly feature for certain conditions and make the walls more appealing .— newsletter coming out and restarted that and Stuart has been helpful
- TH we have restarted, and the newsletter is coming out, SP has been very helpful with this. Have you been in recently? Our first floor waiting notice boards done and our receptionists have done some notice boards on the Ground Floor re stop and smoking day linking in with a theme and repeated on the tv screens. When we started with covid we had to take posters down and we are now trying to do in a structed way.
- LB I work for the Ehlers-Danlos Support UK charity for Yorkshire and Humber area I could give you info for this.
- TH We are happy for you to set up a stall at the covid clinics we have Yorkshire ambulance and Carers Leeds.

SI – next clinic 15 th October.	
TH – I am quite happy for us to have stalls and we information from social prescribers.	
LB - I know members in my group would love it.	
SG - Thank you for your views and input and for the import things we can add in and make more comprehensive, we will refine the survey and post accordingly.	
TH – we plan to have another Patient Participation Group meeting over the next few months.	