

HG PPG Meeting

Minutes of the meeting held on 27 March 2024 - 2.00pm – 4.00pm in the Meeting Room, Cotgrave Hub

<p>Attendees:- Sally Bates - Chair Helen Monday - Minutes Anne Toombs David Adams Sue Knowles Mike Cox Heather Lea Norma Furnell Penny Florey Gill Handcock Denis Quinton Sheila Markham Jane O’Sullivan Martin Cox Philippa Bremner – Social Prescriber Sam Pritchett– Team Leader, Cropwell Bishop Surgery Helena Pomeroy – Team Leader, Cotgrave Surgery</p> <p>By invitation: - Emma Wiklo – Nottinghamshire Local Medical Committee Anshu Shearing – Dementia Support Worker Alzheimers Society</p>	<p>Apologies Pauline Silvester Liz Yeatman – Practice Manager, Belvoir Health Group</p>
--	---

1. Welcome and apologies	ACTIONS
<p>Sally opened the meeting, welcoming everyone and round the table introductions were made. Sally welcomed Emma Wiklo to the meeting</p>	
<p>2. Surgery updates – Helena Pomeroy – Team Leader, Cotgrave Surgery Sam Pritchett – Team Leader, Cropwell Surgery</p>	
<ul style="list-style-type: none"> • Sam reported that a new member of staff had started work in Cropwell Bishop with the Dispensary Team • Following the last PPG meeting when it was reported that clearer/additional signage was required at the Cropwell Bishop Surgery, this was now being worked on and will be implemented. 	

- Helena reported that it was a tough week at the Cotgrave Surgery due to Clinician absences, Admin Staff absences and GP sickness.
- Figures reported for the month of February 2024:-

Calls handled by Reception	14,342
Consultations	11,491
Medications Issued	12,953
Patient referrals/letters	1,448
No of appointments not attended	341

- Helena explained that there had been a complaint from a patient indicating that they could not obtain an appointment direct with the surgery, but when they rang 111 they were given an appointment – why? This is not strictly true. 111 DO NOT have access to the appointment system, at this, or any other surgery and when they give an appointment out it is a triage appointment. This is very misleading and is causing patients to be frustrated. This matter needs to be highlighted and taken to the next Rapid Group meeting, for their attention, as it is causing problems. Emma Wiklo said she would investigate this further, having links with 111.
- Good News - BHG has received an award for achieving excellent numbers of patients recruited for clinical research – one of the best at our level in the East Midlands. Much of this work has been done by Dr Wardle and Jola in Business Support.
BHG has also received recognition for excellent work supporting medical students from UoN. We have been recognised as providing excellent quality and engagement of clinical training to numerous medical students, in parallel to supporting education across all years of our curriculum, which requires additional and complex organisational planning and delivery. Much of this work is done by Dr Griffiths and the Bingham Team.
- The Surgery is in the process of organising the Spring Booster Campaign. This is for the 75+ patients and they will be informed accordingly. Housebound patients will be visited first.
The dates are 14 May at Cotgrave Surgery and) timings to be
21 May at Bingham Surgery) confirmed
- The Menopause and Asthma Group Consultations discussed at the last PPG meeting had taken place and were well attended. Further information regarding the Group Consultations can be obtained on the website.
- Medical queries can be logged by e-mail on the NHS App or on SystemOnline, whichever proves easier to use. Training regarding the NHS App was carried out at Cropwell. It is not a complete turn to technology, manual systems are still available and will continue to be so.
- Dr Amy Palace would be started work at the Cotgrave Surgery with effect from April 2024.

<ul style="list-style-type: none"> • The Dementia Walk Through had been carried out at Cotgrave, Cropwell and Bingham. Training Sessions taking place at Bingham. • The prescription ansaphone system is being stopped – it is not considered to be safe. 	
<p>3. Update on medication issues – David Adams</p>	
<ul style="list-style-type: none"> • David gave an update on the issues surrounding the supply of various medications. This was down to financial and/or political issues. The Integrated Care Board (ICB) are responsible in the main, due to financial restrictions, as to what can or cannot be supplied. GPs do not have permission to prescribe the drugs that they prescribed in the past. Every Surgery is affected in some way as to what they can now prescribe. These problems are countrywide not just local. <ul style="list-style-type: none"> - Sally and David are to meet with Jon Hermon on 7 May, to discuss how this will impact the surgery and its patients. - Zara Williams, the Community Pharmacist to be invited to a future PPG meeting to talk about the restraints taking place. - Further information can be found on the Link to the Nottinghamshire Area Pharmaceutical Committee's Formulary. https://www.nottinghamshireformulary.nhs.uk/ <p>Sally thanked David for his work on the medication issues.</p>	<p>Sally to invite Zara to a PPG meeting</p> <p>Sally to take this subject to the next Rapid Group Meeting.</p>
<p>4. Emma Wiklo –Practice Liaison Officer, Nottinghamshire Local Medical Committee (LMC)</p>	
<ul style="list-style-type: none"> • Local Medical Committees have been in statute for over 100 years, and they support, represent and advise Practices across all of Nottinghamshire. They have an LMC Committee of twenty elected GP’s across Nottinghamshire, with two GP Trainees, one Practice Manager and one Nurse representative as well, who collect and share views of local practices. Their office team is made up of a chief Executive, Head of liaison and two liaison Officers. The Liaison Team support practices with day to day issues, queries related to the GP Contract, workforce issues and premises disputes. Some of the bigger pieces of work they are currently doing is improving the Primary and Secondary Care interface. GPs have reported being asked to undertake work which falls under the remit of secondary care – this can range from sick notes, onward referrals and chasing patients hospital appointments. They have been working with colleagues at NUH to have this message passed on to all colleagues and to lessen the number of requests coming through. 	

Hopefully this will also help the patient experience and prevent patients being 'stuck in the middle'.

They have also been supporting practices with Safe Working in General Practice. General Practice is facing unmanageable workloads, with a rapidly shrinking and exhausted workforce. For them to continue to provide safe care to their patients, and to protect the wellbeing of all staff, they are encouraging practices to take control of their workload. This may mean that patients are directed to other health professionals that are being placed to provide care, such as physiotherapists, pharmacists and social prescribers. Practices are being encouraged to implement safe working limits for the number of contacts GPs have every day, and this may mean, where clinically appropriate, patients are booked an appointment at a later date, placed on a waiting list, or directed to another service such as a walk-in centre or 111.

Patient Engagement

Part of their role is also patient engagement, and as such they have been engaged with Healthwatch with safeworking, along with practice specific issues, have attended Carers meetings, PPGS etc to explain the situation in general practice, and have worked closely with the Rebuild General Practice Campaign. The Rebuild General Practice Campaign is built on a core aim of amplifying the voices of grassroots GPs – be it in the media, with politicians, with patients, or the wider profession.

Some interesting stats since 2015-

- Over 1,000 practices have gone
- Over 2,000 GPs have gone
- Over 6,000,000 more patients on the books
- Equivalent of 1.2 population seen EVERY month
- 400 million consultations per annum
- 7-8% of NHS funding is provided to GP practices
- General Practice makes up 5% of all NHS staff
- The value of a GP contract has eroded by 620 million compared with five years ago
- £1.4bn committed by Government for staff funding but your practice is not allowed to use this to recruit more GPs or more Nurses.
- The Government, DHSC and NHSE are being complicit in removing and reducing GPs, closing old-fashioned family doctor practices, in pursuit of a model of transactional primary care
- 2024 is the time to be honest with patients and Save Our Surgeries.

- At present they are pushing for a 2% increase in funding for GP Practices but there is only so much that they can do.

- The LMC is at present coming out of a five year contract and being given a one year deal.

5. Dementia Programme – Rushcliffe – Anshu Shearing

- Anshu reported on the dementia Friends Awareness Sessions taking place. This is a positive step forward.
- Dementia is a subject that can bring fear and trepidation to both the patient and the carers and both need to be looked after. It is a social pathway, not a medical pathway and that makes a big difference in so many ways.
- The Alzheimer’s Society is working closely with the NHS to support research and people living in local communities.
- It was made clear that dementia is not a catching disease, inspite of what the media may report. It is a disease that mainly affects the brain and every case is different. Rarer types of the disease tend to affect people the younger they are.
- There are 200+ different variants of the disease, the most common one being Alzheimer’s followed by vascular and then common ways (stroke/blood clot)
- An early/accurate diagnosis is essential. At the present time a diagnosis can take anything up to eighteen months?
- A blood test may be available within the next five years to give a quicker result.
- Symptoms of dementia can be varied (a check sheet was distributed for information) People are also not always willing to accept the diagnosis. It brings all sorts of implications – mental, physical and financial and help is required in all aspects.
- Medication can slow the disease down but it is not curable or reversible. It is reported that there could be a link with diet and dementia but as stated every case is different.
- A Carers Information Course – 2 ½ hours per week for four weeks is being held in Bassetlaw at the end of April.
- The event being held on 16 May at the Rushcliffe Arena in West Bridgford from 10am till 2pm (leaflets given out at the meeting) is to highlight the 1-1 help available.
- Alzheimer’s Society Helpline is 0333 150 3456

Sally thanked Anshu for attending the meeting

Additional information regarding the 16 May event:-

- Gwyneth Owen is seeking help for the supply of 50+ Binders/Folders to circulate the RDAM Dementia directory to public places and hardcopy. Any ideas on freebees would be appreciated.

**Sally - Items for the next agenda –
Transport to the event on 16 May
Dementia – next steps**

7. Minutes of the previous meeting/matters outstanding	
<ul style="list-style-type: none"> • Sally thanked Helen for coordinating and distributing minutes of the meetings. • Item from the last meeting to be carried forward to 7 May meeting:- <ul style="list-style-type: none"> - Heather to look into the possibility of the surgery being used as a central point for information being communicated to everyone in some way. 	Sally – agenda item for next meeting
8. Date of next meeting	
The next meeting of the PPG is to be held on 7 May 2024 – 2.00pm- 4.00pm at the Cotgrave Hub	