

MINUTES OF PATIENT PARTICIPATION GROUP MEETING HELD 21ST FEBRUARY

IN ATTENDANCE

DR R Nam
Valerie Ward
Eric Ashby
Anthony Bostock
Stephen Collard
Valerie Morris
Eric Richards
Raymond Tearall
Sarah Tearall

Apologies Janet Thompson-Beresford and Yvonne Johnstone

Minutes taken by Tina Spendley

Meeting commenced at 1.10pm

Val started the meeting with an update on Friends and Family feedback. This was good for December with 14/25 rating us as excellent and would recommend. There were no negative comments with most saying we gave good patient care, staff were helpful, friendly and reliable and that nothing was too much trouble. The others gave us a likely to recommend or did not state. It was noted that it was easy to get an appointment. The replies that neither recommended or not recommend commented that it was difficult to get through on the phone and also that some of the receptionists are not very nice.

Val then gave an update on the new telephone system due to be installed in February. This will advise patients of their position in the queue and also will offer a call back service, keeping their place in the queue. Stephen Collard queried the wait time if you were for example 10th in the queue asking if the wait time would be long. Although it is not possible to give a wait time it was explained that the receptionists do not get involved with the reason for the appointment request, they simply make the appointment and move on to the next call so the wait time would be relatively short. He was happy with this.

It was mentioned about the 111 service and the fact that this was improving as appointments booked at A&E via this service are seen at the allocated appointment time once arriving at A&E.

Eric Ashby queried the offer of appointments at other surgeries. Dr Nam explained the PICs rota system and also the winter pressure GP appointments, explaining the additional funding that has been put in place to provide this service. The NHS access and availability was discussed and also the fact that doctors at Kings Mill are not being involved in the recent strike action.

Val Morris asked about services offered at the surgery, citing a case of her husband having to attend A&E with a cut hand following an accident and said that with additional provision, this could have been dealt with at the surgery rather than hospital. Dr Nam explained the situation saying that we would need additional staff and a nurse to be available in the practice Monday to Friday 8am till

6pm and this was not possible, although it was said that a surgery such as KCPC could possibly provide this as they have more space available.

Val Morris queried the number of clinicians and clinical appointments offered at the surgery. Dr Nam said that we are offering 20 sessions a week with 3 locums (5) Jackie Florence (5) and himself (10) compared to 16 sessions a week under Dr Oza. From May, Dr Chilton would be working here on Fridays. Also the new nurse Sarah-Jane would be joining us on 11th March full time and will be doing bloods on Fridays. We also currently have Kemi on Tuesday, Wednesday and Thursdays and Ivy on Monday Tuesday and Wednesdays. We will also be getting an additional nurse on Thursdays who will act as a mentor to Sarah-Jane until she is fully trained in all aspects of her role i.e. smears. We are also looking to recruit a new HCA. We have been struggling to fill this position but when this is done spirometry and ear syringing will also be being done by her.

Val Morris asked why Dr Nam has not taken on a GP as a partner in the surgery. Dr Nam said that this was difficult due to quality of graduates coming through the system. Dr Chilton is currently involved in the training of these graduates and most are not suitable as possible partners. It may be in the future that Dr Chilton will join our surgery as a partner.

Val Morris asked about the costs of employing GP. Dr Nam advised the incomes seen on the websites was not accurate as practice profits are divided by the number of regular GPs, not taking into account whether they are part time or not. Dr Nam explained the system of income based on patient numbers and that GPs all have the same formula. Val queried whether we put a limit on the number of patients we take on. Dr Nam said that we do not do this and pointed out that some surgeries are removing patients based on where they live if they fall outside the catchment areas whereas we do not although some services and home visits would not be available to these.

Our Policies regarding deceased patients and access to patients' notes were discussed.

Val Ward said that we have not yet been informed of the date of the next CQC visit.

An update on the sluice room, new flooring, walls, infection control and the implementation of our new website was given.

Val Morris raised the question of the Diabetic Specialist nurse who comes into the surgery. She was not happy with the consultation her husband had had with one of these nurses. A discussion around this was had and Dr Nam explained that these nurses are not employed by ourselves but are provided and we get no choice in who is allocated to us.

Val Ward said that the new Nurse Sarah-Jane is very well trained in most things, and is more up to date and very enthusiastic about her role.

Val Morris said that since the departure of Wendy Bevan Poste, the previous practice nurse she has been looking to move surgeries. Val Ward asked Val to give the new nurse a chance and also pointed out that we offer more services than just a nurse. The departure of Jess the HCA was discussed and agreed that she did have a long way to travel and was now nearer to home.

Dr Nam pointed out that ourselves, Family Medical Centre and Selston surgeries have a high ratio of appointments to patients. He said that he has put on extra telephone sessions to accommodate more patient demands. He said that since Covid demand for appointments had increased, also the number of mental health issues has increased to almost 1 in 5 young people. Also gender issues, ADHD and Autism disorders have also increased.

Val Morris asked if patients are now over-using the GP services. Dr Nam agreed and Eric Richards said that this was likely due to increased internet usage. Dr Nam said that a lot of parents don't even have a children's thermometer to check temperatures and just bring them GP.

Eric Richards said that PPG meetings was a new thing to him, having just moved from a different surgery who did not offer this. Stephen Collard mentioned that he has, in the past, been a member of five different PPGs. Everyone agreed that the PPG is a good thing and it was a pity that younger patients did not join although it was acknowledged that younger people probably did not have time or the inclination to get involved in these things.

A general discussion followed regarding the loss to the practice of Wendy. Everyone agreed that she will be missed greatly as she was very dedicated, accurate and knew her patients very well. Dr Nam stated that she would be better supported in the new practice as there will be three other part time nurses to help with the work and she will be able to step down a bit.

To sum up, Dr Nam asked if, before the next PPG meeting, that the group have a look at the new website and also try out the new telephone system when it is up and running and report back next time. Val said that we would try and get the television in reception working again and also the JX board as Anthony Bostock said that with the radio on in reception and also the new floor echoing, he could not hear when his name is called by the GP.

The meeting ended at 2.30pm.