

# PPG Meeting Minutes

**Patient participation Group Meeting:** Wednesday 19 October 2022 at the Surgery

**PPG Attendees:** Sue Cowling, Janet Roden, Cilla Adcock, Martin Pike, Nadia Emmony

**Practice Attendees:** Steve Reeves, Dr Clare Blundell, Suzanne Hurst, Caroline Excell, Zoe Harmer

**Apologies from:** - none

**1. Welcome:** Steve welcomed everyone to the meeting.

**2. Apologies:** Steve apologised for the meeting being rescheduled due to a misunderstanding on the dates in email. The agreement is to rotate the days of the week in order to enable different staff to attend. (Tuesday, Wednesday or Thursday). The next meeting will be on a Thursday (8<sup>th</sup> December 2022)

Appointment of new Chairperson. Steve asked that someone from the group volunteer to be Chairperson. Cilla agreed for a period of 6 months. Caroline and Cilla would do this month's minutes between them. Future agenda items should be emailed to both of them.

**3. Minutes from last meeting:** minutes were agreed.

**4. Updates from last meeting:**

- . Sue had been unable to open a new bank account, but will persevere.
- . New patient pack had been updated on website.
- . Waiting room panels are ready to be ordered with titles representative of topics.
- . Cover at pharmacy entrance. Martin had spoken with Downham Market Rotary and they will come up with the money. Matter is ongoing re these benches.
- . Flu/Covid Jabs – 4/5 sessions had now taken place and those housebound and in care homes, but the practice will still be doing some sessions.
- . PPG group booklet – The sample the group had reviewed and Sue thought it was a bit condescending. This will be held over for the future.
- . Long Covid Support Group – awaiting response from Dr Kevin

**5. Update on changes within the Practice**

- . Steve advised there will be a new Doctor starting on 12 November, 2 days a week (Dr Richard Heighton). Re the current locum Dr Devar, Steve advised they were not sure whether she was coming back or not. Steve also advised they were looking to recruit another 2 admin team members. James Cowling had left and his replacement had changed their mind and was not starting. The practice was also struggling to recruit a new Nurse Practitioner and to get a replacement for Jake (Paramedic Practitioner). A Phlebotomist had left but the position has now been filled, just awaiting a start date.

Martin asked how many full time doctors there were and how does staffing equate to other surgeries. Steve advised there are (including Dr Heighton) currently 6 GPs (equivalent to 4 full-time doctors) – this excludes locum GPs. If the practice was fully staffed we would be slightly overstaffed compared to other practices. Currently as there are insufficient clinical staff, the surgery uses PCN (Primary Care Network). NHS England have run a campaign to promote the PCN roles to help patients understand that they don't necessarily need to see a GP. There is also a position for a trainee registrar GP (generally 6 or 12 month periods) and Clare said that it was part of their training to include certain aspects of medical care to patients and time has to be allocated by the practice for this training.

A question was raised as to how many patients the practice has and Steve advised there were just under 11,000. Countrywide there is a massive shortage of GPs, generated by work pressures, stress and deciding not to follow the GP path.

. Sue asked exactly what is required now to become GP. Dr Blundell advised that a lot had changed since she qualified and gave an explanation detailing that it now takes a total of 9 years to become a GP as training is required in a variety of subjects including dermatology, gynaecology, mental health, elderly care and many other areas. This includes working in hospitals doing a 12 on, 12 off shift in these areas where the work is controlled. In general practice, it is not but full on from the moment you arrive to when you leave. Dr Blundell has never experienced the pressures they are currently under and the workload is crippling. It is also, not just the doctors, but the pharmacy, practice nurses and all parts of the team are in the same position. It also has to be considered that the practice get paid quite a small amount of about £200 per patient a year, but if you attend A and E, they receive £80 per contact and this is something else the practice has to manage. The practice is well staffed, but it is tough, and every day is tough. It is also becoming more and more difficult to provide the level of care we wish to provide for the funding available. Dr Blundell also advised that some services will be moved elsewhere in the future, due to winter pressures. It has also been agreed that the practice will close between 1.00 pm and 2.00 pm (same as the pharmacy) from 1 November 2022, in order to ensure everyone takes a break. A duty clinician/administrator will pick up the telephone also allowing the admin team to do some administration tasks.

Nadia suggested it would be nice to arrange a 'thank you' to the practice.

## **6. Update on where practice is 12 months on from CQC**

. Steve advised that the rating from the 9 November 2021 review was now graded as 'Good'.

## **7. Facebook updates**

. Martin asked that there be time to get the message out to patients re the lunchtime closure. Steve agreed and Facebook would be updated together with signs on the tv screens and doors. Cilla suggested that the article Steve wrote for the local Parish magazine be updated on the website and this was agreed.

Cilla also suggested that the PPG put an update on the website and would liaise with Nadia on this. Sue asked about opening on a Saturday morning, and this is being considered, but appointments will pre booked. Cilla mentioned that it was good to see the updates/information regarding specific health issues. Steve advised that some of these were done at national NHS level and was a trial service for a year.

#### **8. Representative from Pharmacy**

. Steve asked if there was anything specific the group wished to know as it would be difficult to ask someone to attend in their own time as they were so busy. However, Caroline is going to follow this up.

Nadia asked if there was any office space for an Osteopath to attend as this could generate some income to the practice, but also offer an additional service that patients would pay for. Steve advised that there was only one room currently available, but that was used as an isolation room and with winter coming it will be necessary to use it.

#### **9. Staffing levels – volunteers to assist with call taking**

. Steve advised it was a possibility, however, there were only so many phone lines and office space. Any volunteers would need to be DBS checked.

#### **10. Telephone – volume of calls coming in/lost calls/call waiting time**

. Steve advised that abandoned calls are running at approx. 35% but this does include calls that are disconnected and patients ringing back several times. There have been some issues regarding acute prescriptions causing patients to go back and forth between the doctors and the pharmacy. A new process has since been put in place.

#### **11. Shingles Vaccinations**

. There is no separate clinic but patients will be put into the nurses' clinic for those eligible between 70 and 79 years of age.

#### **12. Health Records Information**

. Regarding Martin's query as to how to understand the codes used in a medical record - Steve advised that for every entry such as a diagnosis or review there are a number of codes entered to the record but they make no sense without seeing the full description of these codes (which can be found online). The codes are used for reporting, performance management and care. Cilla asked about blood test results requested by the QE hospital but done at the surgery and why they were not on her record or NHS app. Dr Blundell advised that whatever hospital/consultant/area had requested the bloods, the result would go back to them.

#### **13. Any other business**

Steve thanked everyone for attending.

**14. Date of next meeting**

. The date of the next meeting will be Thursday 8 December 2022 at the health centre commencing at 6.30 pm