

**Minutes of Drayton Surgery Patient Participation Group (PPG) on Thursday 23rd March
2023 at 5.00pm**

Present, Apologies and Welcome

Present

Mary Ramsay (Chair), A.F. J.G. N.M. T.M. S.M. M.V. L.I.

Apologies

Daniel Ferrett, Practice Business Manager, (Mary read an email received from him in his absence) A.P.

Welcome

Mary welcomed and thanked Councillor Ryan Brent and his wife Hannah for attending the meeting, both gave a brief bio to the group. Each member of PPG introduced themselves in turn.

Thanks to J.G. for minutes

Traffic issues in the vicinity of the Drayton Surgery.

Mary started by thanking T.M. for his diligence and work he had done to take this issue forward reaching the stage that we had now come to.

T.M said he had been in contact with both Councillor Brent and Councillor Boshier over the parking and blind spots created on the Havant Road in close proximity to the car park exit of Drayton Surgery. He explained recent accidents and excessive speeding had given concern to both the Surgery, PPG and patients.

Various issues were discussed around surrounding street parking and traffic crossings Councillor Brent explained he would approach Portsmouth City Council, with local elections imminent there is a limit to his involvement at this time but he would arrange to get a Traffic Officer on site hopefully within a couple of weeks to meet with T.M. and Practice Business Manager.

He would maintain a dialogue with T.M.so both Surgery and PPG are kept informed.

Mary invited Councillor Brent and his wife to stay for the duration of the meeting, any contribution from them was welcome.

Minutes of last meeting and matters arising

The traffic issues on Havant Road. T.M.now working with Local councillors

Action regarding survey is covered under a question for Surgery Update later on agenda.

Contact with Springfield school regarding school artwork being displayed in the lower level new build. As yet the school have not contacted Daniel, Mary offered it up to group members to be involved but nobody was forthcoming.

Updating Terms of Reference to reflect group activities, Mary said she had changed the document slightly but yet to speak with Daniel. Due to recent patient migration and work involved with North Harbour Medical Group this was pending. But it would be an agenda item at the next meeting. **Action Daniel and Mary**

The previous minutes were agreed

Surgery Update

The migration of North Harbour patients

Is there a “mop up” required following the major migration of North Harbour patients to various surrounding surgeries

The honest answer here is that I don't know North Harbour Medical Group's (NHMG) official closure date is 31.03.23 so all patients should now be transferred to their new practices.

Has there been a noticeable change in the shift of Drayton Surgery's demographics since the migration

The biggest change is that our list of housebound patients has increased. However, this is manageable and as we move forward we will be checking coding and that these patients are definitely housebound. Due to the areas of NHMG that we have inherited patients from, our deprivation rating will increase but again this is manageable and expected.

I assume for the next PPG meeting Daniel will give an update on recruitment to address the transfer of patients from North Harbour. It would be of interest to understand the number of admin and clinicians that have been recruited or planned to be recruited to cover the increased workload.

We increased our Advanced Clinical(AC) & Nurse Practitioner (NP) team by 90% with 4 new AC/NP's joining us between the end of February and middle of March. This has given us many more appointments for the acute provision on-the-day. We also have a new Salaried GP who recently completed her training with us who has joined us for 6 sessions (3 days) per week.

Admin-wise, we are always looking at staff levels and will continue to monitor how the work is affected by the transfer and adjust accordingly.

Action: some concern around the number of days the new GP works, further clarification to be carried forward to the next meeting.

Does the surgery now have new medical staff in post following the NHMG closure?

See answer above

Will any of the North Harbour staff transfer to Drayton ?

I cannot comment on staff from NHMG as there is no transfer due to the closure of the practice.

What are the target staffing levels following the North Harbour transfer

The increase in patients was 20% and this has been reflected in staffing plans across the board for the coming year.

With the closure of the North Harbour Medical Group and the transfer of patients now achieved has our surgery seen any significant increase in workload

It is a natural occurrence that workload will increase however the team are managing well and we are confident that this will continue. Whilst we have taken on circa 4,000 extra patients, they are not all necessarily in constant contact with us at surgery. General feedback from the transferred patients is that they are extremely happy with the service they have received from us.

(Group members commented on feedback they had received as to the smooth efficient transfer.)

A few meetings ago Daniel indicated that at that time the Surgery had circa 19000 patients, what is the projected new total when the transfer of patients from North Harbour is complete?

The addition of the NHMG patients took us from 19,000 to 23,000 patients and with the increase in general registration, we are currently at 23,100

Are there any plans to increase the facilities at Wootton Street (WS) surgery

WS is part of The Drayton Surgery. Is its provision being expanded. Thinking about people who walk from Wymering or use buses etc.

We are currently working with both the Integrated Care Board and our landlord to increase space at WS which includes repurposing unused areas, splitting a treatment room in 2 to create an extra room and taking on the dental suite when they move to new premises

General question regarding assets at North Harbour . Who owns the land? Is there any value in equipment? How are the assets disposed of? Will Drayton benefit from any assets or equipment?

I have no idea who owns the land but Cosham Health Centre is owned and operated by NHS Property Services. The equipment used by NHMG is owned by them and they have offered some out to all practices in Portsmouth. We have agreed to take on some equipment but the majority of it is old and very tired.

What is happening to the other services that are provided at Cosham Health Centre. e.g Podiatry The Community Services. Are these lost or will they be relocated?

This is not within my remit to comment on – my focus has been the transfer of patients and ensuring we are able to provide them a safe and effective service.

Drayton Surgery

Who is responsible for Dementia patients' further ongoing memory tests, the surgery or St Mary's hospital "Remind" unit

All patients on our Dementia caseload are reviewed annually as part of Quality and Outcomes Framework and if there are further changes or investigations required we will refer on to the appropriate departments within secondary care.

Is Drayton surgery a veteran accredited surgery

Yes we are – we always have been but we have firmed up our accreditation in the past year.

In view of the Surgery welcoming many new Patients are there any plans for another meet and greet the team \ Fundraising event in the near future?

It may happen in the future but the main focus at present is settling the new patients in and ensuring we are able to manage the increase. The patients who have transferred are aware of the services offered by the Primary Care Network as NHMG were part of Portsmouth North PCN as we are.

(To help support this question Mary explained the additional roles reimbursement scheme to Councillor Brent)

With no sign of the national crisis in the NHS abating, is the surgery experiencing significant delays in referrals for hospital consultation

Delays have been 'the norm' since the pandemic started. There is a pick up in some departments but there are significant delays in others. I.E. Autism/ADHD referrals are now sat at approx. 18-24 months lead time. This is due to the increase in people being referred as well as the situation.

Do we have any idea how frequently patients of Drayton Surgery ring for an appointment (for any clinical service) and go away with nothing, being advised to try again tomorrow.

As a general rule we don't turn people away and ask them to call again tomorrow as we don't cap our acute lists unless we are in a staffing crisis due to sickness etc. In these circumstances we will try to signpost to other services and/or clinicians but as we have discussed before, patient education plays a big role in this. Sadly we still get patients who refuse to see even an AN/CP and demand they will only be consulted with by a GP.

(It was commented that we had previously been given the high numbers of e-Consult queries the surgery was effectively dealing with each day)

Survey

The survey conducted earlier in the year showed that patients generally are dissatisfied with the telephone system. Will we be conducting a follow up survey to see whether the new system has improved the situation.

The survey should be an annual occurrence so that will class as a follow up. People will always moan about telephones – I've lost count of the amount of times patients have

made comments such as ‘oh, you’ve bothered to answer and stop talking’ or assume that they are the only person in the call queue. Hopefully when the new phone system is in and running, things will improve but it will never be perfect to everyone.

Prescription providers

There seems to be a problem with Drayton Pharmacy. Lloyds at Sainsburys are going. Patients are commenting on social media about poor service from the Drayton Pharmacy. . Prescriptions are sent there and they are closed - during their stated opening hours - (pharmacist not there) and especially at times when people are coming out of surgery with prescriptions. Does the Drayton surgery have any influence here because it may well reflect badly on the surgery **The surgery is not affiliated with any pharmacies and as such have no influence over how they operate. If people are unhappy with pharmacy services, it needs to be reported to NHS England for them to investigate.**

AOB

Mary told group she hasn’t yet received any feedback from ICB on the posters the group had commented on

The group welcomed the idea when Councillor Brent told the group there is a possibility the Stagecoach no 23 bus which services Drayton and Farlington could be detoured into Queen Alexandra Hospital.

With a new patient cohort at surgery Mary muted the idea to change meeting time. It was agreed to discuss at a future meeting.

Meeting closed 6.30pm

Date of next meeting 25th May 2023 at 5.00pm

Glossary of terms

PPG.	Patient Participation Group
PCN	Primary Care Network
GDPR.	General Data Protection Regulations
TOR.	Terms of Reference
CCG.	Clinical Commissioning Group
ICS.	Integrated Care System
ICB.	Integrated Care Board
ICP.	Integrated Care Providers
FTA.	Failed to attend
CQC.	Care Quality Commission
QOF	Quality Outcomes Framework

