Minutes of The Cottons Medical Centre PPG meeting held by Zoom at 6.00 p.m.

On Thursday 2nd February, 2023

**Present:** Chair -Helen Boto (HB), Vice Chair – John Fryatt (JF), Secretary – Janet Harper (JH),

Treasurer – Jenny Randall (JR), Kate Dawson (KD), Mary Mannion (MM), Patience Brown (PB),

Ann Rooney (AR), Barrie Harper (BH), Chris Sidebottom (CS)

**Apologies:** Sam Adams (Practice Manager), Sue Wathen, Mary-Anne Burch, Inga Bain, Gwen Cooper

1. **Minutes of the last PPG Meeting on 24th March 2022:**

These Minutes were accepted as being a true record.

1. **Practice Manager’s Report:**

As the Practice Manager was unable to attend the meeting due to covering for sickness etc. HB summarised information that had been imparted at a meeting with him a few weeks ago, which had been attended by herself, the Vice Chair and Secretary, together with information he had sent that morning giving the present situation at the Practice.

At the present time the patient list stood at 10,140, which was a slight reduction in numbers.

Dr. Peat had left the Practice for personal reasons. Dr. Wendy Hakeem-Habeeb was due to become a Partner around March time, but sadly Dr. Ligia Costa Rocha, who had been with the Practice as a Registrar, would be leaving at the end of February. This obviously meant that another GP or Locum had to be recruited.

Unfortunately, Johnathan on Reception had left, but a replacement had already started.

At the present time there were 3 Nurses, 2 Nurse Practitioners and 2 HCAs and these positions remained stable.

The Practice now looked after 7 Residential/Nursing Homes which was a reduction of 2. One had been a shared responsibility with a Thrapston Practice who had now agreed to take it over completely and the other, Darsdale, had been closed.

Members reported that there were hardly ever any appointments on line. SA had said that this was due to the Partners not wanting to set rotas so far in advance. JF commented that it was not so long ago that making appointments on line was being encouraged as it took the pressure off the phone lines.

The main complaint was, of course, the lack of same day appointments for acute conditions. It appeared that there were not many of these as often there could be just the one GP on duty to deal with acute appointments. SA reported that he would be talking with the Partners over the coming weeks to see if they could improve this situation. Related to this topic SA was in discussion with the telephone company to see if there was a way to put a recorded announcement on the telephone line when all appointments had been taken to avoid patients holding on and becoming frustrated.

SA had quoted figures that in general, GP appointments had risen by 4% in 2022 when compared with 2019. Also, contrary to popular opinion, the figures indicated that A&E visits were down 10%, maternity down 8% and waiting lists down 7%.

Doctorlink and Push Doctor were no longer in use.

There was great concern over the abuse that staff were subjected to. SA had given an example of a mother who had recently arrived in the Surgery with her young son who had fallen and badly gashed his head. When told that she would have to take the child to A&E or Corby Urgent Care she subjected the Care Navigator to a tirade of abuse. SA had pointed out that whilst the nurses would have wanted to help, the wound required stitches and they were not insured to carry out this procedure.

It was appreciated that the mother was extremely upset and couldn’t understand why the Surgery could not help, she obviously would not have known that they were not allowed to carry out such a procedure, but in any case there was no excuse for abuse. JR stated that she had also been directed to Corby Urgent Care when seeking help for a relative at the surgery. A comment was made that to reach Corby Urgent Care, the person concerned would have to be able to drive.

The owner of the Practice site and buildings was in ongoing negotiations to try and purchase land behind the existing extension with a view to extending further and increasing parking spaces.

1. **Report from the Chair:**

HB reported that the Practice Manager had asked if the PPG could hold its meetings in the afternoon in future. He had suggested between 4 p.m. and 5 p.m. either on a Tuesday or Wednesday afternoon.

The meeting debated this, and it was felt that if the meeting was held at this time it would preclude anybody who worked or perhaps had to collect children from school. These people were usually of a younger generation and the PPG were very keen to try and bring a younger element to the meetings.

It was generally felt that 6 p.m. until 7 p.m. on the night the surgery stayed open late, was not unreasonable. This had been the practice for many years and the Practice Manager had always attended. It was also pointed out that it would be beneficial to have a Partner GP attend, if not to every meeting, then at least periodically.

Regarding recruiting new members, it was mentioned that it would be useful if the PPG had a notice board in the Waiting Room. HB replied that we did have a board, but the waiting room was configured in such a way that all boards were at the sides of the room and in this position they were not really in front of patients and were therefore not very noticeable. There was really nothing that could be done about this.

Questions were asked as to how the PPG was promoted within the Practice and the suggestion was made that if we provided a supply of joining forms, one could be handed out to any new patient registering with the Practice. Any forms which were completed could then be returned to Reception, put in a PPG tray and periodically these could be collected by a PPG officer. On the Practice website there was a box which referred to the PPG and it’s aims. This section also had a form for patients to fill in to join the PPG, but when a test was carried out and the form was

completed and ‘send’ was pressed, nobody, neither the Practice nor the PPG received it. Following this test the form was removed from the website.

Members felt that there was really no way the PPG could reach out to patients and suggest they join as we obviously did not have confidential contact numbers. However, The Cottons often sent out texts to patients who had given them their mobile phone numbers and it would be a good idea if a short text could be sent out regularly, promoting the PPG and suggesting that interested patients could either obtain a form from reception or send an email to the PPG email.

CS felt that it was important to obtain the support of the Practice and the doctors and Practice Manager should be asked what they would like us to do in order to help promote good relations between patients and the Practice and also what they envisaged the role of the PPG to be in future.

Again it was mentioned that there was money in the PPG account and at least some of this should be used for the benefit of the Surgery. HB replied that SA had mentioned some time ago that it might be useful to purchase more upright padded chairs for the Waiting Room and she undertook to ascertain if this was their definite requirement.

HB commented that since Covid there were not the same opportunities to meet patients, conduct Surveys and hold raffles. We had always had a strong presence at Flu Clinics, but this was no longer possible as vaccinations were now conducted on an appointment only basis.

1. **Report from E.N.P.A. (East Northants PPG Association):**

JF explained that this body replaced the old L.P.E.G. and the aim was to obtain information from PPGs and present this to the P.C.N. (Primary Care Network). Recently they had been reaching out to various community groups such as older people and a disabled group in Irthlingborough and asking them what their experiences were and in general aiming to give these groups a voice.

1. **Any Other Business:**

There was no other business.

1. **Date of Next Meeting:**

HB undertook to try and organise a meeting on 28th or 29th March, between 4.00 p.m. and 5.00 p.m. on this occasion, but noted the meeting’s general wish to keep the later time of 6.00 p.m.

to 7.00 p.m. She would confirm details at a later date.

This meeting has been recorded for accuracy purposes only.