**Minutes of the Patient Participation Group meeting held at 5.00 p.m. in the**

**Meeting Room at The Cottons Medical Centre on Wednesday, 22nd November 2023**

**Present:** Sam Adams (SA) Practice Manager, Helen Boto (HB) Chair, Janet Harper (JH) Secretary,

Kate Dawson (KD), Gwen Cooper (GC), Ann Rooney (AR), Patience Brown (PB)

1. **Apologies for Absence:** Sue Wathen, Jenny Randall, John Fryatt, Mary-Anne Burch, Inga Bain

HB informed the meeting that JF was unfortunately unable to be present owing to health problems. He had recently suffered a fall at his home which had necessitated a hospital stay and he was now at a rehabilitation unit in Corby. It was sincerely hoped that he would soon be able to return to his home once it had been adapted to help with his needs.

1. **Minutes of the last meeting**: The Minutes of the last meeting held on 12th July, 2023 were agreed as a true record of events.
2. **Matters Arising:**
3. An upright, well-upholstered and sturdy chair, which had been purchased by the PPG for the Surgery was now in the Waiting Room.
4. SA explained that the Surgery’s Care Coordinator, Danielle, was unfortunately not able to attend the meeting as her husband had sustained a broken foot. This had caused problems in connection to care of their children and it had been necessary for her to take on more responsibility in this connection. She was happy to speak to HB and JH at a mutually convenient time and explain her role at the Practice.
5. SA reported that at last he had received the CQC’s rating of the Practice following the last inspection in June 2023. They had graded the Practice ‘Good’ overall, but regarding ‘Are services responsive to people’s needs?’ they had rated it ‘Requires Improvement’.
6. Regarding the booking of acute and routine appointments, SA said he would deal with this point in his report.
7. **Practice Manager’s Report:** SA reported that there were now 10,122 patients at The Cottons. This figure had remained fairly constant over the last year. There had been 5 complaints in the last quarter.

 A paramedic had been recruited and would be working 4.5 days each week, starting in December. This would mean that more appointments could be made available for acute problems. It was early days as yet, but a new GP was interested in joining the Practice for 3 or 4 days each week. If the appointment went ahead then this GP would not be a locum and would be employed on a permanent basis, again making more appointments available.

A new GP contract required the phone system to offer a ‘call back option’ and this would hopefully cut waiting times in telephone queues. The Surgery would make two attempts to contact the patient leaving their call back details.

In answer to concerns raised by PPG members, SA replied that it had been decided by the Partners that as from October appointments, both routine and acute, would be made **only** by ringing the Surgery at 8.00 a.m. or for afternoon appointments at 1.30 p.m. Appointments could

not be made any more online, or by going to the Surgery in person. Members were very concerned about this change and felt that to remove the online facility was definitely a retrograde step. SA replied that this had been the decision of the Partners who had the final word in such matters.

In reply to a question, SA stated that the B.M.A. (British Medical Association) guidelines were that one doctor could safely see 25 patients in one day, although ‘At Your Service’ published by the Policy Exchange had stated 28 patients in one day. SA reported that there was a new piece of software called Anima being rolled out over the Practices in our Primary Care Network. In theory this would enable all patients to be triaged and then directed appropriately. PB was extremely concerned about the constant changes to the appointments system being made and felt that it was confusing and not at all fair to patients. HB raised a point that SW, who was absent on this occasion, had wanted brought to the attention of the meeting. She felt that it was really important that the option to go to the surgery and make an appointment was kept as an alternative to making a phone call.

HB commented that if it would help she was prepared to approached the Partners and make them aware how frustrated and concerned patients were about the existing situation regarding appointments. SA added that he was now 4 weeks into a GP Improvement Programme, which, where it had used in other practices, had been very successful. The first 8 weeks of this programme was a data gathering exercise and once this had been done the programme suggested alterations which could be put in place to improve procedures. SA expressed a hope that the next PPG meeting would be more positive.

A point was raised that a text message had been sent out to patients asking them to make an appointment for a flu vaccination at the forthcoming Flu Clinic and the member concerned had tried four times before eventually getting through. SA replied that this had been an error and the message had been sent without the link which would have enabled patients to book their own appointment on the allotted day, without making a telephone call.

It was pointed out that surgeries were required to leave a certain number of appointments open each day for 111 appointments and if a patient was unable to get an appointment using the normal method, then contacting 111 was an option. SA added that Nurses appointments could still be booked in advance, it was only appointments with GPs which could not. In answer to a further question SA replied that the Corby Urgent Care facility were able to access a patient’s record.

On the positive side JH said that she had had reports that the new pharmacist, who carried out annual medication reviews, appeared caring and very thorough and this was corroborated by other members. SA added that patients could ask to speak to a member of the Prescribing Team about their medication, but they were unable to change medication. Members also praised the caring attitude of the nurses at the Practice.

JH asked if the DNA (Did Not Attend) figures for the previous month could be given at future meetings and SA agreed that he would supply these.

In answer to another question concerning the long telephone queues, SA said that in the past for the first hour other admin staff were designated to also take telephone calls, but the policy was now that only one person answered the calls.

1. **Report from the Chair:** HB reported that three Flu Clinics had been held, the PPG assisting at the first clinic on 16th September and she thanked the volunteers who had given their time and assisted at this clinic. The Nurse Manager, Sandra, had asked that the PPG obtain leaflets and posters from organisations who offered support and help to local people, either for free,

or for a small fee. She thanked JH for her efforts in contacting a number of these bodies and for obtaining posters and leaflets which had been displayed on the walls and on a table at the clinics. It had been noted by PPG members in attendance, however, that not a great deal of notice was taken by patients, possibly because there was a constant stream of people moving through reception and going to either doctors or nurses. Sandra had requested that in future clinics leaflets and posters should concentrate on Age UK.

As the Treasurer, JR was not present, HB reported that there was now £67.24 held in petty cash.

HB remarked that she regretted that there had been no recent Newsletters published, but this had been due to the health problems which JF had been experiencing. JF was very accomplished in the technology field and his expertise was greatly missed.

1. **E.N.P.A Report:** JF usually gave this report, but as he was absent owing to ill health, JH gave a short summary of the meeting which had taken place the previous week. The Annual Review for this group was being collated and we had supplied a short paragraph covering the donation of £400 to the Practice for the purchase of the special chair in the Waiting Room and also that we had assisted at the first Flu Clinic on 16th September and at the request of the Practice had sourced leaflets and posters of organisations who offered support and assistance to local people. These posters and leaflets were displayed at the Clinics. A photograph of HB and JH with the chair had also been taken for the review.

JH reported that the ENPA were experiencing problems in communicating with the ICB (Integrated Care Board), who had replaced CCGs. This had been difficult over the past year and every effort was being made to establish a definite route by which the ENPA could raise concerns of PPGs in the area and get responses from named officials at the ICB.

1. Date of Next Meeting: This was set for 5p.m. on Wednesday 21st February, 2024.

HB wished everyone a very Happy Christmas.

This meeting has been recorded for accuracy purposes only.