Minutes of the meeting of The Cottons Patient Participation Group held at 5.00 p.m. on Wednesday, 27th November 2024 in the Meeting Room at The Cottons Medical Centre

**Present:** Sam Adams (SA) Practice Manager, Helen Boto (HB) Chair, Janet Harper (JH) Secretary, Jenny Randall (JR) Treasurer, Gwen Cooper (GC), Sue Wathen (SW), Ruth Stokes (RS), Inga Bain (IB), Lynn O’Shea (LO), Tony Mayes (TM), Jenny Chatley (JC)

1. **Apologies for absence**: John Fryatt, Ann Robinson

HB apologised for the last two meeting cancellations, but these were due to circumstances beyond the PPGs control. She welcomed everyone, especially the two new members, TM and JC.

1. **Minutes of the Last Meeting on 22nd May, 2024**:

These were agreed as being a true record.

1. **Practice Manager’s Report:**

SA reported that there were now 9,778 patients on The Cottons list.

There had been two complaints in the last quarter, one relating to appointments and the other concerning medical records.

DNAs were excessive, over 700, but this could be explained as they included the Flu Clinic and Covid appointments.

A new Healthcare Assistant, Julia Cooke-Simmons, had come out of retirement and joined the Practice on a temporary basis until a permanent replacement could be found. Recruitment here looked promising as there had been 10 applicants.

SA and Dr. Negi had recently met with the new local MP in order to highlight issues that concerned the Practice, such as funding. The meeting had been cordial and the MP had listened to points raised, but only time would tell if concerns had been noted. In our PCN (Primary Care Network) there are 8 Practices and new roles had been introduced for the PCN to provide, but no extra funding had been made available.

SA was asked if we had our full complement of doctors and he replied that we had 4 GP partners, who each worked 3 days a week, 1 salaried GPs who worked 3 days a week and 1 full-time salaried GP. It should be remembered that a full working week for a GP is taken as 4 days. At the present time there was no funding available to employ more GPs. It also had to be remembered that the extra positions within the Practice, Physician Associates, Pharmacists etc. had to be monitored and supervised by the GPs.

TM asked if The Cottons had the nationally recommended number of patients per GP. SA replied that there was no longer a figure quoted as being the recommended number, but we did appear to be in line with other Practices.

HB asked SA what had happened at the Flu/Covid Clinic in October as it appeared to have been chaotic. SA replied that at that time he had still been on sick leave following an operation, but he acknowledged there had been problems and he apologised. Due account had perhaps not been taken of the extra time it took to enter on the computer the details of each patient having a Covid vaccination as opposed to a Flu vaccination. Also, more attention needed to be given regarding the flow of patients through the Surgery building. LO remarked that with the appointment system some patients were arriving half an hour before their due time and this had contributed to the problems. The evening clinics which had been run since October had been more successful.

1. **Report from the Chair:**

There was not a great deal to report since the last meeting, but HB made the point that regarding the Flu/Covid Clinic in October she had offered the services of the PPG to help control numbers and point patients in the right direction etc., as we had done in the past, but the offer had not been taken up.

She also asked if the toys and leaflet stands that had been purchased by the PPG for the Practice in the past, before Covid, were still stored somewhere, as if they were not going to be used again then the PPG would like them returned in order to sell them and put the proceeds in the PPG coffers. SA confirmed they were stored, but he could not say that they would definitely not be used again. The problem with the toys was disinfecting and cleaning after use and this was just another job that the staff did not have time for.

HB pointed out that the next PPG meeting would probably be due in February 2025, which was also when the AGM was due to take place. We would hold the two meetings one after the other, as had been previously done, as the AGM was a very short meeting .

At the AGM she intended to stand down as Chair as she had been in the position for approximately 10 years and felt that ‘new blood’ was definitely needed and her personal commitments were such that she could not give the time and attention needed.

Also, the Secretary, JH, who had also held the position for 10 years had said she did not wish to stand again. HB asked the members present to consider if they could take on either roll. She did make the point that both she and JH would be willing to give any new incumbent all the help they needed. Regarding the Vice Chair, John Fryatt, she could not say whether he would be willing to continue or wished to retire.

It was planned to produce another Newsletter in the near future, probably in January, 2025 and any items of interest which could be included would be welcome. TM remarked that a Newsletter was an excellent way of communicating and asked who the Newsletter was aimed at and where was it distributed. In reply he was informed that the Secretary (JH) sent the newsletter out to all PPG members and displayed a copy on the PPG notice board in the Surgery. The Practice Manager sent it to the list of patients who had signed up to receive a Newsletter, but were not PPG members, and also posted a copy on The Cottons website. SA noted comments made by members present that they had not been asked if they wished to receive a Newsletter when they joined the Practice and had not even been aware that one was produced. He made a note to see that new patients were asked if they wished to receive a Newsletter.

Also, it used to be the case, pre-Covid, that some copies were placed on a table for patients to take one if they wished. This practice had ceased with the onset of Covid and had not been reinstated as it had proved to be very expensive with regard to the cost of printer cartridges. It had to be remembered that the PPG were self-funded and could not afford to run off hundreds of copies.

Waiting times on the telephone were discussed, which at the present time were averaging out at between 4 and 5 minutes. When patients called and received the message that the lines were full and to ring back later, this was down to the phone company who had restricted the queue to a maximum of 15 people. SA remarked that the contract with the present phone company was soon to expire and he hoped that improvements could be implemented after the expiration. SW added that she had used the ‘call back’ option offered when the queues on the phone were long and this system did work.

HB reported that JH and herself had had a meeting with SA a few weeks previously and certain problems had been highlighted, including the screen in the waiting room referring to joining the PPG which needed attention as it omitted certain important information. Also, there were problems with the PPG Sign-Up form on the website, which SA would attend to in the future when pressure of work allowed.

1. **E.N.P.A. Report:**

JF and JH attended these meetings, but recently JF had been unable to attend owing to ongoing medical problems. In theory two representatives from each Practice in our PCN (Primary Care Network) attended. Unfortunately, there were not representatives from at least two Practices as problems existed with their PPGs. In the past when the CCG existed, funding was allocated to the group to rent a premises for meetings every six weeks, often with speakers from local groups giving talks, and also to produce the yearly Annual Review. Two years ago, when the CCG became the ICB (Integrated Care Board) this funding was completely withdrawn. This presented a problem, but the organisation SERVE came to the rescue and allowed the E.N.P.A. to hold their meetings at the Higham SERVE premises without charge, but the cost of printing and producing the Annual Review remained. For two years now a local Councillor has used her Community Fund to pay the costs, but this could not continue. Once again SERVE have stepped in and have offered to pay for the printing etc. in exchange for a small advert for their organisation being inserted in the Review.

The other problem that existed when the ICB was formed was that the clear path by which the E.N.P.A. could raise concerns brought to them by PPGs was dismantled and now there is no mechanism by which problems can be passed on to the relevant people in the ICB. and feedback on decisions communicated back. The Chair and Secretary of the E.N.P.A. have been having meetings for the last two years with the ICB to try and establish a proper pathway for concerns to be raised and recently, to this end, they met with the CEO. Discussions are ongoing.

It was also reported that one member of staff in our PCN would be trained to carry out ear wax removal. This would make it possible to have an appointment at a Surgery for this procedure to be carried out, without having to pay at a pharmacy. It must remembered, however, that only one person would be covering the 8 Practices in our PCN.

Darsdale would be re-opening as a Nursing Home in the future, but this would add to the already high number of Care Homes/Nursing Homes that The Cottons covered.

1. **Any Other Business:**

IB informed the meeting that on [www.nhs.uk](http://www.nhs.uk) patients could leave their thoughts and opinions on how the NHS could be improved in the future. The Survey took about 10 minutes and was well worth completing.

HB produced a document which she had been sent in connection with Kettering Hospital. It appeared that new wings were to be built, together with a new multi-storey carpark, which was extremely good news. However, as the new buildings were to be built on existing carparks, even with the new multi-storey car park, there would be no increase in parking spaces, which was already a problem.

Suggestions were made that to promote membership of the PPG a poster or banner could be produced and displayed at the Library and the Council Town Notice Board. Also, a member of the PPG could, perhaps, attend one of the many group meetings that took place at the Library and explain that the group existed and their aim. It was pointed out that this had been done in the past in an effort to increase membership. Surveys had also been undertaken, but the number of patients who had completed the Questionnaires produced had been very small and none of the recommendations had in fact been accepted.

HB reported that the PPG had closed their bank account at the insistence of the bank who said that there was simply not enough movement on the account to warrant it staying open. At the present time £67.24 was held in Petty Cash.

1. **Date of Next Meeting:**

This was set for 5.00 p.m. on Wednesday, 19th February, 2025.

At the end of the meeting Dr. Perera came in unexpectedly and spoke to the remaining members regarding some of the difficulties facing the Practice. The future changes that the new Government were proposing would probably mean more funding to GPs surgeries would be cut and their drive to make services more community based was something he viewed with scepticism. He put the date of the next meeting in his diary and said that he hoped to come along and speak to members after his clinic at 5.30 p.m. ended.