

## **The Calverton Practice: Patient Participation Group (PPG)**

Minutes of a meeting held on Thursday 22 June 2017 at 2.15 at the Calverton Practice, St Wilfrid's Square, Calverton.

### **Present**

Margaret Briggs  
Linda Britchforth  
Jeff Burgoyne (Chairman)  
Nick Borrett  
Enid Cox  
Diane Frudd  
Jackie Guyler  
Bridget Hall (Practice Manager)  
Chris Jackson  
Susan Kernahan  
Pat Kingston  
Vivien Sadler (Minute taker)

### **1. Welcome and declarations of interest**

Everyone introduced themselves and Jeff welcomed them to the meeting.

### **2. Declarations of interest**

There were no declarations of pecuniary interest other than from Bridget Hall as Practice Manager.

### **3. Apologies for absence** were received from Chris Archer and Audrey Booth.

### **4. Minutes of the last meeting and matters arising**

Minutes of the last meeting had been circulated. Matters arising were already on the agenda.

### **5. Practice Survey**

About 390 surveys had been completed. Most had been handed out during the flu vaccine sessions so mainly to the over 60 age group.

Waiting time to see a specific doctor was a recurring comment.

Bridget explained that the walk-in service was often over-subscribed and in such events patients were put down for a triage call from a GP. The difficulties of managing demand were discussed.

Calverton practice has one of the lowest A&E attendance in NNE CCG probably due to the walk-in service.

Enid is to send Jeff a pdf of the results for circulation to all members so that they can be discussed at the next meeting. Enid thought the questions needed more thought and were not always relevant. It was hoped that the NNE CCG Representatives Group of which Jeff is Chair will be producing a standard form for all PPGs so that results can be compared. Enid was thanked for the work she had put into the survey.

## **6. Practice News:**

Bridget reported that the building work was not yet finished and described some of the challenges faced by extending an existing building. The new rooms in Phase 1 were due for completion by 31<sup>st</sup> July 2017.

The next building phase had been approved with GPs providing part of the money – 64% of the monies would come from the ETTF and the GPs will have to contribute 34%.

The contract would have to go out to tender – clinical rooms, a meeting room and a new reception area would be part of Phase 2.

Nick suggested it would be better to have the same contractors for snagging and continuity.

Nick would meet Bridget to discuss and assist with future project management.

Bridget explained that the difficulty with new building developments was that the increase in patients often happened before the 106 monies were released

Jeff reported that there could be a possibility that the next door health clinic building may become available and suggested it could be used for a number of patient functions.

Bridget reported that the Practice had recently suffered an unprecedented number of long-term sick leave absences throughout most staffing grades. This put pressure on remaining staff and a locum doctor had been secured for some sessions in August. Jeff reported that most GP practices in the region were suffering a shortage of GPs. Federating practices had been discussed to spread resources but co-ordinating the spread of staff was difficult to manage. As it was there are not enough GPs to fill vacancies. Bridget confirmed that there is a shortage of GPs nationally but as Calverton is a training practice it can take Returners. The area GP training scheme is full. The CQC inspection in 2015 rated the practice as outstanding and a revisit is likely with 2 weeks notice for 10% of those already visited.

Jeff reported that the Clinical Commissioning Group (CCG) has to reduce costs overall costs by just under 6% during the current financial year (almost £12M). Over prescribing of medicines will be examined. There may be other services that have to have costs cut. All referrals have to be verified by another GP. The effect has been to slow down and reduce referrals but this will not affect the 2 week cancer wait. Bridget pointed out that Registrar and Trainee GPs may over-refer due to their limited experience so the need for a second referrer is good practice. Patient over-ordering of prescriptions was discussed but Bridget confirmed that the computer flags if a patient is early or over ordering.

## **7. NNE CCG Opening Hours Survey**

Jeff showed a copy of a survey form which is being issued by NNE CCG on behalf NHS England because the government has promised that 7 day GP opening would become available.

The group agreed that either additional resources would have to be made available to cover the cost of the extra opening hours, or opening or the number of appointments during the week would have to be reduced to accommodate weekend opening. If the latter, this would put more pressure on NEMS, 111 and A&E.

Bridget was asked if Dr Rayner could mention the survey in his next practice newsletter. It was also suggested that it could be handed out with prescriptions and at local chemists and Post Offices.

#### **8. Press release: Joint Commissioning and the Transformation Project**

Jeff reported that the four local CCGs would be joining together to buy services so all CCGs will have the same services available at the same costs. He said that NUH are suspected of overcharging and the coding of charges is being checked. NUH is thought to be one of the highest charging authorities in the country. Bridget felt that the merger will not have any effect on patients, although Susan pointed out that would depend on whether services are centralised further away.

Nick asked about social care and mental health services and Jeff thought that these services were likely to be included in the merger.

#### **9. Any other business**

Bridget reported that the adjoining cottage and plot was being sold . There was some interest but there were uncertainties about planning regulations allowing other uses and demolition.

Susan asked about mental health provision. Jeff reported that there was a self-referral service but it is oversubscribed. Nick suggested that the Viola fundingscheme could possibly provide a local service similar to the drop in coffee shop service in Ruddington. CORE already provide some activities and there were allotments available in Calverton so a gardening group could also possibly be set up.

Nick asked if the area next to the entrance path of the surgery could be cleared up. Bridget explained that it belonged to Nottinghamshire County Council so the Practice was not entitled to maintain it.

The shopping precinct has a prospective new owner. There was no news on the planning application on the area opposite the CORE centre. Deadline for objections was closing on 26thJune.

#### **10. Date and time of next meeting**

**Thursday 3 August 2017 at 2.15 pm at The Calverton Practice.**

The meeting closed at 4.30 pm