

The Calverton Practice: Patient Participation Group (PPG)

Minutes of a meeting held at the Calverton Surgery on Thursday 18 July 2019 at 2.15 pm.

Present

Jeff Burgoyne (Chairman)
Bridget Hall (Practice Manager)
Pat Bosworth
Margaret Briggs
Enid Cox
Jackie Guyler
Jane Yeomans (Assistant Practice Manager)
Vivien Sadler (Minute taker)

1. Apologies for absence received from Chris Archer, Nick Borrett, Audrey Booth
Lynda Britchford, Diane Frudd, Chris Jackson and Susan Kernahan.

2. Declarations of interest: None.

3. Practice News: BH reported that the Practice had now implemented SystemOne computer system. This had presented some challenges within the Dispensary but issues are gradually being resolved. Long queues in Boots and reports of delays and out of stock items due to Boots also having new computer system. Appointments had been for emergencies only for a week during the data cut for SystemOne and therefore the following week had been busy catching up on the backlog of work. As SystemOne does not have a website facility and the EMIS website is out of date JY is working on a new website which will allow a new Practice and separate PPG website – JY will give login details in due course. . The waiting room screens are awaiting programming.
AB and JB have spent a few hours helping and encouraging patients to use the appointments booking-in screen.

The builders have now completed the works but some snagging still remains. Grass turf is being put down and a memorial garden is being planned by Dr Lanyon for staff to use in break times financed by a legacy left by Dr. Kesten Challen.

BH described the online prescription reordering service and asked for feedback from patients who use it. Issues raised included: items not being ready for collection even a day after the due date. Some items needed to be re-authorised by the GP which caused delay. JY explained that Boots system had recently changed which caused delays and they sometimes could not trace a prescription so it was necessary to quote a token number. All patients have to re-register at reception with SystemOne to use the new system.

Some Saturday appointments are being offered but as support services are limited at the weekend it is not ideal if someone needs an ECG etc. However, patients can be seen at another surgery in the area if appointments are available.

Staffing: Two GPs are due to go on maternity leave from November so locum cover is being sought. Dr. Fleming is still on maternity leave and will return after Christmas. Dr. Harris is covering her

maternity leave but will leave when Dr Fleming returns. Dr Oliver, Registrar, finishes in August and a replacement – Dr Singh- has been arranged. A sports medicine trainee has been appointed for 6 months and a Registrar has been appointed for 6 weeks from September.

BH reported that the Care Quality Commission has conducted an Annual Regulatory Review(ARR). A phone survey was carried out and as the responses and other external information were satisfactory there was no need for an inspection at this stage.. The 5 year visit is due next year.

JY described the family and friends survey and asked if the PPG members could encourage patients to respond. Also, it would be helpful if a PPG member could regularly go through the donated magazines in reception and check their suitability . EC volunteered to start this after the August school break.. JY will contact NB and decide where to put the upstairs notice board.

A proposal to hold coffee and biscuit mornings in the new Meeting Room around the time of the flu clinics.

4.Primary Care Networks (PCNs) Arnold and Calverton

JB explained that there 4 local PCN have been formed in the NNE CCG area – these are

1 Byron/Hucknall PCN -Torkard,Whyburn ,Om and Oakenhall practices.

2 Arnold and Calverton PCN -Highcroft,Stenhouse and Calverton practices

3 Arrow PCN – Daybrook,Plains View,Unity,Westdale Lane,Peacock and Ivy practices

4 PCN 4(name not agreed) – Park House,Trentside,West Oak,Jubilee and Ivy(divided)practices

Some Practices didnt want to be in their allocated group. Some Practices have 2,000 patients whereas others have 15,000. Each group has funds to allow services to be purchased particularly to employ a PCN physiotherapist and pharmacist. JB has been nominated to attend PCN meetings and had learnt that there are different ideas on what to do with the money allocated which has caused underlying tension.Most funds will be held by a 3rd party(PICS) for authorised use. However, the Arnold Calverton PCN seemed generally to be in agreement and wanted to co-operate. Groups are being encouraged to form PPGs so they can support their local practices by informing patients about self-help groups and activities available in their area. MB volunteered to attend and JB would circulate dates. JB gave examples of fundraising activities , eg Plains View has a library which raises around £400 annually from the sale of books. Any equipment bought has to remain the property of the fund raising group, not the practice.

5.New Housing

JY had produced a poster which can be used as a flyer. It is also published in the Echo. Patients can register online but will need to go into reception with ID. A reminder could go on the Facebook page. JY could print off flyers to be given to the housing developers' offices.

Any other business

Boots will make a charge for delivery of prescriptions from September 1st.

Items to be carried over to the next meeting: patient survey ,e-consultations,young mothers and children groups advisory meetings,virtual PPG meetings.

Date and time of next meeting has been set for Thursday September 12th at 2.15pm in the Meeting Room at the Surgery.

This date was set to avoid the next PCN meeting .