

PPG Minutes – meeting in the Wellbeing Suite

8th December 2022

Charnwood Community Medical Group – Dr Hanlon and Partners Patient Participation Group (PPG)

- 6) **Chairman's welcome** – Mick welcomed everyone to the meeting, including Dorothy Gregory and David Jefferson. He has been in touch with John Todd, who moved to Cardiff a couple of years ago. He and Jane are to move into a bungalow in the New Year, we hope that all goes well with the removals John! Huge thanks to Paul who had prepared the big room, very cosy on such a chilly night. It was wonderful to see so many people in real life, the first time for two years.

- 7) **Those present** – Mick Gregory (Chairman) Dorothy Gregory Carole Jefferson (Secretary) David Jefferson, Bhasker Khatri, David Meredith Ian Farnfield, Peter Lewis, Sandra Mould, Paul Hanlon (Business Partner and SIRO - Charnwood Community Medical Group (Practice))

- 8) **Apologies received**

Anne Lockley, Audrey Philbrook, Emilene Zitkus, Helen Davison, John Kershaw (Vice Chairman) John Skelton, Roger Harris, Shirley Siriwardena

- 9) **Approval of minutes of October 13th 2022 and matters arising**

- a) The minutes were approved.

Matters arising

- i) Getting appointments

- b) Q – Do we still need to phone at 08.00 to ask for an appointment, we cannot as yet, book ahead. Can I ring the nurse to ask for ear syringing?
- c) A- yes. We do now offer ear syringing but the GP needs to be consulted first in some cases if there are pre-existing ear problems. For most people a selfcare leaflet will be issued before a nurse appointment is arranged.
- d) Advance booking. – There are some appointments on the system for advanced booking but they tend to be quite a long way ahead. Appointments depend on availability. Currently there is very high demand.
- e) This week, we have seen many who have concerns about Strep A. The number of children seen has been huge and unheard of before.
- f) Appointments are offered and if all of them took the expected time, duty doctors would be working past midnight. As it is, doctors have been working as late as 10.00 pm

- g) We are still seeing emergency appointments on the day. When phoning in, stay on the line and the call will be picked up
- h) at the same time, the doctors are trying to pick up routine matters.
- i) On a Monday when every GP is in, there are in the region of 200 appointments on the system.
- j) Q – Had a letter saying that I needed to see the GP. Do I still have to phone at 08.00?
- k) A – unfortunately, yes. We have looked at how we can resolve the problem but we haven't found one yet. We understand the issue and we know how frustrating it is. We can't offer pre-booked appointments because that might mean that there was nothing available for an emergency call. We are trying to make it as good as possible
- l) Q – how many calls can the phone system take?
- m) A – hundreds. Which is why you can ring in at 08.01 and be 60th in the queue. With the number of appointments available, at position 60 there is a good chance of getting one.
- n) Q – can you give a time for a call back?
- o) A – we will do our best to fit around your plans for the day. Call backs were still being made at 10.00 pm this week.
- p) Observation – we can call to book a nurse appointment at any time.
- q) Observation – chatting at the bus stop, a person was complimentary about CCMG. We get a better deal than many patients.
- r) Observation – lots on the media about how awful the NHS is. A case recently, a lady was found lying in my street, obviously very ill. An ambulance arrived within four minutes of being called. There must be many stories about huge successes by the NHS, that we never hear about

5) Practice News

a) Finance

- i) For 2023 – 2024 there is a £30 - £50K hole therefore, savings are needed.

b) Strep A

- i) Must be a record number of cases over the county, a lot of time is taken answering calls and sourcing antibiotics

c) New GP contract

- i) Due in April 2024

d) Staff welfare

- i) Strategy was agreed for all staff to look after one another
- ii) The books need to be balanced. There is a 2% uplift but other costs too, e.g. the living wage has increased significantly

iii) There are new housing developments around Loughborough, including the 3500 home Garendon 'village'. Developers pay through section 106 money for capital assets, so we *could* build a new surgery, but that cannot be for revenue costs, e.g. staffing the surgery. If the funding isn't used, it goes back to the developer

e) Q – who answers the phones?

i) A – 5 or 6. Response times have been good but the reply may not be what the patient wants to hear.

ii) Observation – Reception staff have improved, very helpful, reassuring, good courteous job.

iii) A – The Patient Services Team are so important to the surgery and their skills keep patients out of A&E.

f) Healthwatch

i) The report has arrived, (PPG members hadn't had time to read it yet)

ii) The PPG complained to the Healthwatch team about the parlous quality of the survey. Out of date, confusing etc.

Observation – lots on the media about how awful the NHS is. A case recently, a lady was found lying in my street, obviously very ill. An ambulance arrived within four minutes of being called. There must be many stories about huge successes by the NHS, that we never hear about

6) Bereavement Support Group

a. Met last week to finalize the report, which has been circulated

i. *The Group approved the documentation unanimously*

b. Dissemination

i. Paul will put on the practice website home page

ii. GP commented that it would be useful in Care Homes, for families – we can send it out- we have responsibility for Thorpe House

iii. GPs in Charnwood are impressed and would like to access it

iv. *It was agreed to allow others to use it*, Paul will remove the logos before the documents are sent out

v. There may be a way to acknowledge that our Practice and PPG developed the work.

vi. We may share with family and friends

vii. Paul will send to the virtual group

viii. 'Caroline Hammond at 'Dying Matters' is keen to reference the work on their website. *Agreed*. Carole will ping her the link when it is on the website

ix. All church pastoral Groups will be contacted (Mick)

x. Publicize the PPG and our projects at the next 'flu day (February)

c. The group complimented the project team for an excellent piece of work

7) Project Groups

- a. Next year
 - i. Review previous projects to ensure that they are still accurate/relevant
 - ii. Think about new projects
 - iii. Agree the date to relaunch the survey as it was postponed on account of a welter of other surveys coming out at the same time
- b. Speakers for 2023?
 - i. Ideas?
 - ii. Paul will ambush a Practice nurse with cake and try to get them to speak at the AGM in March.
 - iii. We can use the Wellbeing Centre.
 - iv. Any other ideas please send to Mick mick.gregory242@gmail.com

8) **Date of next meeting** – February 9th 2023

9) **Please email agenda items to Mick nearer the time**

10) **AOB** – none today

Mick thanked everyone for their attendance and hard work over what has been a busy and at times challenging year. All thanks too, to our families who support our monthly meetings and project meetings, they are very patient.

Enormous thanks to Paul and our excellent Practice Team, the Partners, the clinical and non-clinical staff who go out of their way to support our group. We are incredibly lucky to be with such an open minded, forward looking Practice. We are the envy of many.

Thanks too, from the group, to Mick, who has provided excellent leadership yet again, over the year. He does such a lot in the background that we scarcely get to hear about.

With that, Item 11, we headed for the buffet. Thanks everyone!

Happy Christmas!!!!

Minutes agreed and signed as correct..... (Chair) Date.....