

Northdown Surgery

Patient Participation Group

Meeting Minutes for 9th October 2019

ATTENDEES:

PPG Committee: JD (Chair, patient), JC (Assistant Secretary, patient)

Patients: LS, DB, SA, HK, FK, DJ, PB, BB

Practice staff: Wendy Blake (Practice Manager), Toni Miles (IT Admin), Dr Peshen (GP)

Apologies: NH, CK, AD

Agenda item:	Discussion item:	Action Required:
Welcome and Introductions	The meeting was opened by JD who welcomed everybody and informed them that the bulk of the meeting will be handed to Dr Peshen to talk about future plans for Northdown Surgery.	
Apologies for absence	NH, LS, CK, AD	
Minutes of the last meeting and matters arising	<p>The minutes of the last meeting were agreed as an accurate record, nominated by Toni Miles and seconded by DB.</p> <p>There were no matters arising.</p>	
Future plans for Northdown Surgery – One Step at a Time	<p>Dr Peshen gave an overview of his professional background as a local GP (previously working in Ramsgate) who has been working at Northdown since June 2019. He is also parttime Head of Urgent Care in East Kent; Vice Chair of Thanet CCG and he also does some work for NHS England. He describes himself 'first and foremost as a GP'.</p> <p>Dr Peshen began by outlining some of the challenges facing Northdown Surgery which is based in one of the most deprived areas of the country. Thanet is the 4th worst across England in respect of GP to patient ratio and is one of the worst areas in respect of patient access to GPs. He also highlighted the challenges in recruiting medical staff to the area as Thanet is too far to commute from London and professionals who train in Thanet don't tend to remain in the area.</p> <p>However, he has seen many positives at Northdown Surgery in his few months in place, namely a good, supportive team of practice staff and the ability of the team to develop processes to cope with demand.</p> <p>Dr Peshen informed the meeting that the proposed merger with Bethesda is not going ahead and that staff will instead be focused upon improving facilities and access at Northdown.</p>	

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Developing Northdown as a training practice and creating an environment where 'excellence can flourish' will be key to attracting talented professionals to work at the surgery. Since the summer Northdown has recruited two GPs (with another to join at the end of January); one advanced nurse practitioner; one advanced paramedic practitioner; one mental health worker and a physio who visits on Fridays; there is also an ongoing discussion with the pharmacist to work an extra day.

Dr Peshen highlighted the need to manage the flow of demand for healthcare services at the practice by utilising the skills of a multidisciplinary team and developing more effective non-clinical work processes. Training reception staff to become effective sign-posters of patients to the most relevant professional will hopefully enable the surgery to get nearer to its target of providing 720 appointments per week - at the moment the surgery is able to offer half that number of appointments. Receptionists will continue to need to ask patients questions about what they need appointments for.

In response to questions from JCN and LS, Dr Peshen assured the meeting that the reception staff would be given appropriate training and that staff will also be able to seamlessly transfer patients to the appropriate professional if necessary.

Dr Peshen guided the meeting through a diagram he had developed to illustrate how demand can be more effectively managed within the practice, starting with a change to the way in which appointments are offered and greater signposting to the relevant professional by the reception staff.

As of 4th November, patients that need an appointment **on the day** will be advised to call at 8am and people that need a non-urgent or pre bookable appointment will be asked to call from 10am. Pre bookable appointment will be available up to 4 weeks in advance and can be made in person at the surgery, by telephone or on line. The aim of this change will be to reduce demand on the day and provide patients with more flexibility so that they are able to see a practitioner at a time which is convenient to them. Home visits will continue as they are carried out by the duty doctor on the day.

The reception staff will signpost the patient to the most appropriate member of the team, however a duty GP will be available to support the team and will be ultimately responsible for all the urgent/acute work on the day.

BB asked how the thousands of people registered with the practice will know about the changes. Dr Peshen reported that the practice will be communicating the changes to the appointment system over the coming weeks via a message on the answering service when people call to make an appointment; there will be messages in the surgery; on the website and via email.

	<p>Once the above changes have been tested and refined the practice will look at introducing the 'Teamlet system' which will involve the development of three multidisciplinary teams within the practice each supported by a health and social care navigator; so instead of having one GP looking after 3600 patients as is the case now there will be a team of 3+1 for each 3600 people.</p> <p>In response to questions from PPG members Dr Peshen highlighted the future need for more physical space within the surgery to accommodate the increased workforce. This would then open up possibilities in respect of taking back services like ophthalmology into the community.</p> <p>In conclusion, Dr Peshen reiterated that there are exciting plans for the future, but that these will be implemented slowly and will be refined based on evaluation of outcomes.</p> <p>On behalf of the meeting JD gave him a vote of thanks from the members and officers of the PPG, which was echoed by the meeting with a round of applause and positive comments.</p> <p><i>Dr Peshen left the meeting.</i></p>	
<p>Assistant Secretary's report</p>	<p>JCN gave a brief overview of two meetings she had attended since the last meeting of the PGG, namely a consultation event at Canterbury Cricket Ground and the Thanet CCG Health Reference Group. The subject of both these meetings was the development of a local 5-year plan as required by the 10-year NHS Long Term Plan which was published in January 2019.</p> <p>It is anticipated that the Kent and Medway plan will be available by the end of the year. There will be structural changes to the way in which services are organised which will mean better joined up health and social care for everyone. There will also be support for people to fit and well, and a greater focus on 'what matters to you' rather than 'what is the matter with you.'</p> <p>There is a great deal of information about the local plan available at www.kentandmedway.nhs.uk</p>	

<p>Practice Manager's report</p>	<p>The tabled report by Wendy was noted and she highlighted her plan to conduct a patient survey early in 2020 to gather feedback on the new appointments system that will be at the start of November.</p> <p>LS asked a question about the comments box on the patient access system as she had previously experienced her comments not being actioned. Toni informed the meeting that she does the online prescription requests and apologised if there had been an omission. Toni confirmed that the correct way to request something (not on the prescription repeat list) is to make a request via the comments box, which is normally actioned.</p>	
<p>AOB</p>	<p>HK had submitted a question about an email she had received about the system of appointment and prescriptions. Toni clarified that this was an email generated by the Patient Access System to inform people about the support they can receive from their local pharmacists.</p> <p>DB asked how the surgery planned to inform patients of the changes and wondered if people knew about the PPG meeting tonight as not many were present. Toni informed him that we have 788 PPG members, approx. 680 received notifications and minutes by email, whilst the other members received items by post. Posters are also displayed on the TV Media screen in the waiting room and on the website. We had also given handouts to patients attending flu clinics.</p> <p>There being no other business the meeting closed at 8.05pm.</p>	
<p>Next meeting</p>	<p>The next PPG meeting will be on Wednesday 8th January 2020 at 6.30pm</p>	