Maple Surgery – Patient Participation Group Meeting Thursday 16th September 2021 via Video Conference (Microsoft Teams) at 6.00pm MINUTES

PPG Members:

Chairperson: Doctor Derek Ford, D.F Secretary: Councillor/CPFT Board of Governors Anthony Mitchell, A.M (Acting Independently of the Parish Council) Neeraja Anantha, N.A Lorraine Waters, L.W Wendy Hedley, W.H Lynn Marie Stockman, L.S David Harper, D.H Tanya Cerado, T.S Andy Howard, A.H Brian Howard, B.H (Acting Independently of the Parish Council) Connie Williams, C.W Pam Vendy, P.V Practice Manager: Catherine Trippier, C.T Assistant Practice Manager: To be Confirmed GP: To be Confirmed Pharmacist: Rajiv Nanda, R.N Edna Murphy: CCC Division Councillor, E.M Bunty Waters: South Cambs District Councillor (Acting Independently of the Parish Council) B.W Lynda Harford, L.W - PPG Guest Andrew Harrington: MKGP CEO

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04.01 Receive apologies for absence, welcome any new PPG member(s), guests and Councillors.

The PPG welcomed Lynda Harford, Apologies given by B.W, N.A, B.H, A.H. No Apologies from E.M.

04.02 Receive any declarations of interest and accept minutes of the previous meeting.

None, minutes accepted.

04.03 To discuss any correspondence and approve PPG Constitution Updates.

Accepted. All in favour.

04.04 To receive and discuss MKGP Updates.

R.N made clinical lead at practice. Planned meeting did not take place due to illness. MKGP report taken as read and accepted.

04.05 Patient survey and Mock CQC

C.T Surgery Currently working through Mock CQC. D.F Expressed greater concern over Patient Survey conducted by a market research company placing the surgery in the bottom 10 for Cambridgeshire. Colin Smith Joined at 18.27

D.F Stated it was very disappointing and raised his continued concerns over the surgery. Anecdotally feedback from residents and PPG members indicated the highest dissatisfaction he has observed in 48 years. He expressed concerns over the repeated problems in the same areas of concern: Prescriptions, Hospital Discharges, Tesco Pharmacy, and lack of access to GP's.

In the 17 or 18 months he had been working with the practice there seems to a lack of change, if this had been a company, he was consulting for he would have been fired within 3 months and certainty by this point.

A full-time manager is 16 months overdue at this point with D.F expressing his apologies that C.T has "inherited" these problems from her two predecessors. He recognised the fact that frontline staff are experiencing the brunt of patient satisfaction when the problem likely stems from the senior team. He had hoped that things would improve with MKGP but expressed exasperation that matters have gotten worse. It seems the left hand does not know what the right is doing with cancellations and problems with appointments.

L.W Echoed concerns over a lack of handover from hospitals to GP's including prescriptions. W.H Agreed.

L.H Fears MKGP have conflated different NHS instructions and is selective in how they interpret them. e.g. ignoring new guidance to increase Face to Face Appointments. The Triaging of patients is not suited to the training of a receptionist, with a clinician better suited to the task. This is causing a loss of trust as a result as patients feel blocked or given inappropriate appointments, e.g. a phone appointment for a skin complaint (A.M)

MKGP Apologised if patients felt the service was not consistent.

C.T Stated that there are a set amount of F2F and phone appointments each day.

A.M Expressed concern that this was very rigid and suggested removing the quota.

Laura Wished all the problems could be put down to Covid, the current system is in place to protect

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vulnerable patients. It has ben hard to find a balance and a system that works. The NHS has been under exceptional demand including Mental Health and that the decisions are led by the clinical staff.

D.F Recognized that the surgery was working hard but stated that all GP's surgeries in the County are working under the same environment. Something is going fundamentally wrong at the Practice to score so low in an IPSOS Mori Survey.

C.T Recognised the concerns but highlighted the small sample size of such surveys and the recent CQC report at Milton Keynes that still got a bad report. She hoped engagement with the village would help. D.F Stated that the survey was under the same conditions for all surgeries and was from a reputable company. He was saddened that he had been asking since day one for a Bar Hill News (BHN) Report like the surrounding surgeries but in 18 months it has been lacking. Any good news for the surgery is simply not being communicated.

C.T Agreed and would start monthly reports in the BHN.

P.V Asked how many patients are registered with the surgery.

C.T Approximately 3,600.

P.V Said she would also like to see information on social media such as the village F.B page and website to attract and keep patients.

D.F Suggested the surgery look at Huntington Road Surgery's social media page, when a patient is lost to the surgery it tends be for a long time.

D.F Asked to see the transformation plan that has been previously discussed as the PPG had not seen it. A.M Stated that the PPG website was also not up to date with no minutes or agendas, he said that it's hard to attract new members when it looks like we are not doing anything.

C.T Agreed to update page.

MKGP are liaising with Tesco for a Carer's Café with Jane the Community Champion. The first meeting was provisional for the 13th October 2021 with social prescribers and Caring2Together present. A.M Suggested working with Bar Hill's Community Group and gave the contact information to the

surgery. D.F Was told when you call that there is still a 4 hour window for phone calls. Even Hermes gives a 2 hour time frame, it needs to be a reasonable time frame.

C.T It should be 30 minutes either side of the time given.

D.F If he had not been able to see a GP quickly when he had sepsis he could have died. As such you don't always know if you are seriously ill. There needs to be someone with the clinical knowledge for the seriously ill.

C.T The staff should take you through a list of questions.

D.F Looked at the presentation from the company involved and thought the presentation was terrible.

P.V Tried the questionnaire online but would not bother again.

C.T Agrees that basic training needs improving and that they are taking steps to do so. They need to focus more on care navigation and signposting.

L.W Didn't like discussing her condition with the reception.

D.F Stated his recent experience had been good with GP.

L.W Didn't want barriers to accessing a GP.

C.T With full time guidance from herself she hoped the situation would improve.

D.F Hoped the full the role would make a significant difference to the practice.

P.V Felt staff were confused on her last visit.

L.W Said it should be patients before profits.

C.T The Surgery was working very hard with new training and said that she was welcome to come in and speak with her.

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04.04 Transformation Plan

Already Discussed.

04.05 To discuss methods to reduce DNA's

Deferred.

04.06 To Discuss PPG/Maple Surgery joint activities - Social Prescriber event

Already Discussed.

D.F Understood that those who needed them were still getting them. C.T Yes that is correct and there are no plans to stop clinically necessary tests.

04.08 Flu & Covid Jabs

C.S Stated she has to call as she was not receiving her texts for the Flu Jab, D.F stated that he received his. W.H Said there were none after the first day.

C.T Stated that people would be invited in groups with over 1500 to invite.

D.F Asked if Covid Jabs would be similar.

A.M Stated that he had heard from his governor role that they would be given the same way as the original vaccinations, they would be in centralised clinics such as the one at the Grafton Centre. Most people would be receiving the Pfizer jab in this area.

04.09 Face to Face Appointments and Waiting times – Will the surgery apply for funding under the NHS Access to Improvement Programme?

C.T would investigate and report back.

- 04.10 Any other Business.
- 04.11 Agenda Item requests for the next meeting. None.
- 04.12 Date of Next Meeting: Wednesday 17th November 2021 at 6.00pm. A.M Stated on behalf of himself and B.W that the third Thursday of the Month was not possible due to Parish Council meetings.

^{04.07} Blood tests (D.H)