Maple Surgery - Patient Participation Group Meeting

Wednesday 15th April 2020 via Video Conference (Zoom) at 7.00pm

Minutes

PPG Members:

Chairperson: Doctor Derek Ford, D.F

Secretary: Councillor 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 Connie Williams, C.W

Practice Manager: Clare Briars Andrew Harrington CEO MKGP

Assistant Practice Manager: To be Confirmed

GP: Not Present

Lynda Harford – SCDC Ward Councillor

05.01 Receive apologies for absence.

B.Howard, A.Howard, Corin

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

None.

05.03 To welcome new service provider and discuss the transition period and future of Maple Surgery.

Service provider welcomed by all present.

MKGP stated that they are a GP led service which focuses on patient service and primary care.

L.H Asked how the 26 surgeries that are in their current GP Federation fit in with maple surgeries current PCN? MKGP Stated that the current PCN predates them taking over the contract and that they were keen to work with the Northern Group. In Milton Keynes they have extended hours services, and additional services. They have reached out to the PCN and were looking at ways to improve services. Their work had been hampered by the Covid-19 pandemic but they were looking into social subscribers and contacting local pharmacies. Their intention is to bring stakeholders together.

Dr Rasool had chosen not to stay on at the surgery. Covid-19 have prevented challenged in recruiting new GP's, however they were hopeful to arrange new GP's as soon as possible. At present they were able to employ the same Locums to work for the practice during the pandemic.

D.F Stated that Dr Rasool's absence would be missed.

MKGP – The practice has been split between red and greed to limit contact with those who present Covid-19 symptoms. Practice is limiting contact and obtaining PPE. Plans will be put in place for postponed work such as Asthma and Diabetes clinics.

D.F Stated that he had expertise in business and that better systems need to be in place to measure service outcomes and reduce the need to see a GP when possible.

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L.H Agreed but expressed concerns that patients may present with symptoms that are more serious and a patient may delay treatment.

MKGP Stated that routine work escalate, and that some patients had expressed concern over Dr Rasool leaving, however this is a personal choice which the surgery accepts. There was an opportunity for more female GP's which some patients had requested and with new staff comes new approached and opportunities. MKGP also stated that the new locums had been fantastic. The surgery would consider Saturday appointments to help clear the backlog of routing check-ups and ensure no patient missed out.

D.F Noted that this was a national issue and all GP's and Hospitals were struggling under Covid-19. With planned care currently suspended for emergencies such as strokes and Covid-19 related treatments. It was important to consider the long term implications and introduction of Saturday appointments along with continuing to look for new staff and doctors.

There was a concern that without regular check ups patients could be seriously ill and not know it.

MKGP Stated that they had a full day of child vaccinations the next day and that three members of staff had been ill. There had been problems with patients entering the wrong area and the front door being locked. The Surgery does not want patients walking into the wrong area. NHS property signs would be moved to the correct places and efforts would be made to minimise contact with staff.

A.M Asked how the surgery was going to increase appointments.

Feedback from patients had indicated that there had been difficulty in patients accessing GP appointments, the surgery would now use BMA guidance to calculate the maximum number of appointments possible. They hoped to have an additional 180-260 appointments but asked PPG members to understand that Covid-19 may affect appointment numbers. The contract for the surgery mandates at least 194 appointments. Changes may be made to the balance of appointments to include more Nurse led sessions for pre-existing conditions such as Asthma and minor ailments. There was also likely to be an increase in phone appointments due to Covid-19.

Final decisions on these issues would be made when a new clinical leader will be appointed.

Two staff members were currently jobsharing the assistant practice manager role with recruitment currently active. Surgery would look at community/event champions, long term registers for annual reviews, group consultations, COPD et al. MKGP would look at outreach with Parish Council, Bunt Water's Chair had been contacted.

L.W Stated that she had trouble with prescriptions including being told to collect her prescriptions the next day but they were unavailable at Tesco Pharmacy. She had been told by Tesco to ring the surgery but staff were unsure of the procedures. Previous pharmacist had experienced challenges due to remote working. Surgery is looking at new ways to engage pharmacies. Surgery would no longer send large late night batches of prescriptions, which caused complications with prescription fulfilment the next day.

D.F Stated there had been problems with the website and the existing login from the previously contractor and how email prescriptions would be affected.

MKGP Stated that there would be a new website address but that the email would stay the same. He also noted that the previous supplier would not let them use their website address. The surgery did not have the money to pay for google ads for the new webpage.

D.H Stated that the most effective way to inform residents about the new website was the Bar Hill News.

A,M Asked how the new practice managers time would be split between Bar Hill and Waterbeach Surgery.

MKGP There would be an 80/20 split between the surgeries in Bar Hills favour. The Practice Manager would be able to access Bar Hill remotely and was always reachable at either site.

D.F Noted that the legacy systems at Bar Hill were very different and that he did not want Maple Surgery to become a satellite of the Waterbeach surgery.

MKGP Made clear that they were a service that put patients before profit and were committed to Maple Surgery. They expressed the importance of training and empowering decision making with staff and that the practice manager had worked throughout the Easter period in Bar Hill. MKGP always welcomed feedback and open discussions.

05.04 To suggest changes to NHS appointment text messages to include a reminder of the cost of missed appointments.

Deferred

05.05

To discuss reinstating the practice policy which allowed patients to book on the day appointments in person.

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	Deferred
05.07	To discuss repeat prescription requests from Pharmacies.
05.08	A.M Update of grant application process for a new prescription request box.
	Deferred
05.09	Date of Next Meeting: Wednesday 17th June 2020 at 7.00pm – Zoom Meeting

04.02

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