

Woodville Patient Participation Group (PPG)

Minutes of meeting held on 24th September 2024 at 6:00pm

- Present** : Karen Gothard – Practice Manager
Lyn Hackett
Micky Locke
Nick Locke – PPG Chair (WoodvillePPG@21JubileePark.com)
Danielle Marratt – Operations Manager
Jenny Slawson
Peter Slawson
Alan Wright
Ann Wright
- PCN Guests** : Rebecca Bromley – Deputy Clinical Director
Debra Fearn – PCN Manager
Laurence Rickards – Digital and Transformation Lead
Dr Mark Rooney – Clinical Director
- Absent / Apologies** : Harry Jolley
Sabyta Mackay

Previous Minutes

- 49** It was agreed that mentioning the PPG on the Facebook page would make sense but suggesting that potential attendees should email the Surgery, just so that there is some awareness of likely numbers. **Karen**

14th May – Carried forward.

25th June – Carried forward.

13th August – It was decided that we were being over cautious around the potential number of attendees, so will now mention the PPG on Facebook, under the strapline “your NHS, your say”.

24th September – The Facebook post was made as expected. We will amend it now to specifically request new members. Noed that the page currently has 29 followers, so there is still a long way to go with patient engagement.

- 55** The original content of this item has been superseded and, over time, the item has morphed into a discussion about the reception templating system. **Karen**

25 July – Collette very kindly gave a demonstration. It was clear that even with the templates in use, the receptionists’ role is a lot more complex than just following a script. It is also clear that from an Information Technology (IT) point of view, a lot more could be done to streamline the process. An obvious example was where the template relates to a minor Urinary Tract Infection (UTI) – at the very end of the questioning a message pops up to say “patient is diabetic, pharmacy not appropriate” – so why waste time on all the other questions if UTI plus diabetic patient immediately rules out the pharmacy option. Nick would be happy to discuss with Laurence Rickards.

13th August – It was noted that the previous demonstration only covered a very small area of the templating. We would welcome a further demonstration.

24th September – Due to timing and availability, this is deferred to the next meeting.

60 Note that Woodville Surgery has no connection with the matters raised in this item.

Nick

The meeting felt that the objectives in the Primary Care Network (PCN) Terms of Reference document were really more aims than objectives. Objectives would typically be specific, have targets or numbers to allow measurement and a timescale by which they could be achieved. The wider documentation was felt to be waffly and lacking in substance, with hopes for the future, not plans – as examples:

- It was hoped that Ragsdale House would be open to patients soon – *when is soon? What are the blockers?*
- Urgent care would become the main priority...identified as a way of reducing waiting time – *when will the priority change? How will it reduce waiting times?*
- Expressions of interest, advise on process as soon as possible – *Why is the process not defined already?*

It is now unclear what the structure of the PCN is, as we believe that Lisa has moved on. Nick will check whether we can get someone to our next meeting to discuss.

13th August – our concerns over the efficacy of the PCN have worsened. A note explaining the specifics is attached to these minutes. We would appreciate a PCN member attending our next meeting to discuss.

23rd September – The representatives from the PCN gave an update. In summary:

- If the PCN wasn't in place, the local surgeries would not qualify for payment from the Additional Roles Reimbursement Scheme (ARRS).
- Staff are employed by the limited company (SPHeRe) to avoid any employment liability attaching to the individual surgeries.
- Delays with CQC approval continue so, as a workaround, the surgeries are adding Ragsdale House as satellite premises, under their own registrations.
- By using centralised staff, the impact of for example sickness, is spread around all the surgeries rather than being felt by only one.
- Travel to Ragsdale House was researched, but there was actually no other choice of building – funding was from Section 106 monies and had to be spent in Woodville. If patients cannot travel to Ragsdale House, they will still be able to attend their own surgery.
- A full urgent care centre is being discussed regularly, but is unlikely to happen within the next decade.
- The PCN's administrative staff deal with rotas, appointments, data collection, meeting organisation and will also be manning the front desk at Ragsdale House.
- The common approach across the surgeries to gain economies of scale is very dependent on timing.
- Provision of shared services depends on trust between the practices, to allow sharing of data etc. All the practices and their managers are working together to try and make the PCN work.
- There will be communications about the services available

from Ragsdale House ahead of the launch on 1st November.

63 Two members attended the walking group event on 1st September, to find that it didn't happen. It had been cancelled due to the forecast weather. The surgery had called all the people who had registered. It was agreed that future cancellations would be published on the Facebook page, to try and reach people who had not pre-registered.

65 It was noted that CHEC "one of the UK's leading providers of community healthcare" has been sending emails to Nick, all starting "Dear Danielle". Nick will investigate.

23rd September – Nick has been advised that CHEC had no idea what happened, and that he has been removed from their mailing list.

66 ***Note that Woodville Surgery has no connection with the matters raised in this item.***

The group has gained a deeper understanding of SUSHI (see minute 40). It is a private limited company, with the directors being four doctors from the local area. Currently, it has capital and reserves of ~£6,000.

We are aware that the previous equivalent of SUSHI, Swadlincote Health Initiative (SHI) had surplus funds of ~£580,000 when it was wound up – and we note that sum was to be divided among the members of the company, rather than being used for patient care. We presume "members of the company" means the directors – one of whom is now a director of SUSHI.

We have also noticed that there is a company newly registered at Ragsdale House, called Swadlincote Primary Health Resources Limited (SPHeRe). That has one director, who is also a director of SUSHI (and previously SHI). Presumably there is some relationship with the PCN, which we would like to understand as, typically, limited companies exist primarily to make profit rather than to provide healthcare – and we are concerned to see that best use is being made of the limited funding available.

Nick will ask the PCN to arrange for this to be explained to us at our next meeting.

23rd September – The PCN representatives confirmed that SPHeRe will be providing the central out of hours service from 1st November. SPHeRe has been set up as a not-for-profit organisation. It was not appropriate to discuss SHI in detail, but it was confirmed that the organisation was set up with appropriate agreement from the local delivery board and was managed to ensure that no conflicts of interest could arise.

71 A member noted that a note added to a prescription request, asking for a change following a review by a clinic at Derby

hospital appeared to have been missed, as the change was not done and no contact to explain why was forthcoming.

23rd September – It was confirmed that this was a human error, in that the note was missed.

- 72** At the next meeting, we will discuss whether we want to change the time of some/all of our future meetings to be during the day. **All**

23rd September – It was noted that daytime meetings would be better for demonstrations and guests. We will discuss further at the next meeting.

Matters Arising

None

Any Other Business

- 73** It was noted that Dean and Smedley will be doing Covid vaccinations from 3rd October. **All**

- 74** Flu jabs will be available at the Surgery from 3rd October. Karen pointed out that it makes sense for registered patients to obtain their vaccination from the Surgery, rather than elsewhere, as they have already been paid for. **All**

- 75** There has been another issue where a member made two appointments and when he arrived at the first one, it was not the one that he had been told to expect. This was an issue at the surgery which has now been resolved.

Date of Next Meeting

Tuesday 29th October 2024 at 6:00pm