



Sherwood Medical Partnership

Clipstone | Farnsfield

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Farnsfield PPG Meeting Tuesday 10th April 2018

Attendees: MB, JK, CK, MS, NG, EB, SK, NJ, IC, KB

Apologies for absence: WW, MA, RE

A pre-meeting announcement was made to give notice of the date of the Parish Council meeting to be attended by David Ainsworth, the Director of Primary Care Newark and Sherwood CCG. The purpose of this visit is to provide the opportunity for patients of Farnsfield surgery to raise the concerns they have about the service provided by the surgery.

Minutes from the last Meeting

These we discussed and approved

Terms of Reference for the PPG Group

The terms of reference for the Farnsfield PPG were agreed with NJ advising that they were based on the appropriate example terms of reference and it was also noted that the detail could be reviewed and amended annually in light of changing needs.

Introductions

NJ was confirmed as the chairperson, with MS elected as deputy. EB agreed to continue as minute secretary and KB elected as deputy .

Members of the committee introduced themselves, followed by an introduction by MB, the new practice manager, who outlined her career

history to date which had included experience as a receptionist, deputy practice manager, practice manager, business manager for two merged practices and a period of employment with the Local Medical Committee in Nottingham. Also, it was advised that following her work to support the practice in respect of the recent CQC inspection report, she was approached by the partners and offered the role of practice manager.

CQC Inspection

It was noted that the outcome of the 2017 inspection was the operation of the practice 'requires improvement', necessitating the revisit of an inspection team before September. It was also confirmed that the 2016 inspection had also resulted in the same grading.

NJ stated that, at the present time, people feel bad about the practice and that the role of the PPG was to offer help and support to make improvements to the patient experience. He went on to say that the group would be managed by consensus basis with NJ undertaking the necessary research and administration. The PPG will be a critical friend for the surgery.

Specific areas had been chosen for discussion by the PPG to help to improve patient experience:

Reception

- Reception was sometimes unmanned and should be manned at all times
- Queues formed when there was only one receptionist on duty and she was trying to sort out a complaint, which left no capacity to sort out anything else
- There were concerns that the introduction of the check-in screen had impacted on the number of receptionists on duty and that the installation of the system had been opposed by the PPG originally
- Privacy could be an issue when receptionists were having telephone conversations with patients
- NJ had already discussed receptionist training with MB, who felt they managed well under difficult circumstances
- There had been complaints that some reception staff could be quite rude

- New data protection rules might mean that patients names cannot be displayed on call screens
- It was felt that the practice was always displaying standard replies such as: people off sick and loss of office staff to deflect criticism
- The CQC reported the loss of 17 members of staff over the last 12 months – does this reflect on the management?
- MB reported the recruitment of the following new staff : HDA, receptionist and a secretary to work across both sites
- There was some concern that Farnsfield had not been in receipt of a fair split of resources
- Receptionists too easily asked people to go to A and E
- The question was raised as to whether the receptionists at the surgery were aware of the Urgent Treatment Centre in Newark, also, if patients were referred there by a GP, were they aware of the limitations of the treatment available there?
- MB agreed to highlight this matter at the team meeting at the Crown Medical Centre the following day

Appointments

The group wanted to discuss the issues that they felt related to the appointment system and to suggest several possible solutions

- There seemed to be a fundamental mismatch between the availability of appointments and the demand
- Appointments are booked at four weeks plus
- Patients are asked if the request is urgent - what is the criteria for urgent?
- Difficulties in booking appointments, for example - on requesting an appointment on Monday morning, when none available told to try again on Thursday when more appointments are released , so sometimes not possible to make an appointment
- Urgent and emergency appointments, none available, asked to phone back at 1.00pm - is this a good arrangement as it causes the phones to get blocked.
- NJ suggested that a doctor take the urgent and emergency calls in the morning which could significantly reduced requirements for an appointment. Example of a practice near Hull does this very successfully

- Are two and five day appointments available?
- Could more urgent appointments be made available?
- Clarification is needed on how the appointment system works
- There was a discussion about the possibility of timed telephone appointments.
- Would the practice be appointing a clinical pharmacist?
- There is a push under the Sustainability and Transformation Plan for all practices to have this in place by 2020
- It appears that a large number of appointments over both sites are DNA. But patients, who had cancelled appointments and, also where the surgery had cancelled the appointment, still received texts to say they had missed an appointment.
- MB was asked to look into this as it could be providing misleading data and she noted that technology may be at fault here
- Evening and weekend appointments now being provided by Abbey and Crown on a rota basis for the Newark and Sherwood area. The question was asked, who had decided this would be delivered from Crown and not Farnsfield?
- There is a level of frustration about the service being delivered at Farnsfield, there has been no communication about the loss of the Saturday morning surgery which is no longer available.
- This was part of our surgery hours available every third work, pre-bookable for those unable to attend during the week.
- Although the PPG were assured that there would be no impact on surgery hours and available appointments when Sherwood Medical Partnership undertook to provide the out of hours service, it seems that the first casualty is the Saturday morning surgery for Farnsfield patients.
- Since the merger with Crown the general feeling is that Farnsfield surgery had been sidelined, its services eroded and that the village was not getting a fair share of the resources as it was considered that Farnsfield has had its services chipped away since the merger.

Upcoming Events

Carers signposting support to be available at the surgery- Date TBC

Date of Next Meeting

Tuesday 1st May 18:30 at Farnsfield Surgery

Items for Discussion

- Communication
- Prescriptions
- Phlebotomy
- Referrals