Attendees – Dr F Shamshad (PCN Partner), Louise Whitfield, Sophia Nicolaou (note taker), CS, SO, TF, KW

Apologies – MM, MC, SV, PW

Matters arising:

Dr F Shamshad addressed the PPG committee thanking them for their continued support. FS informed PPG that Caradoc Surgery is the most improved surgery nationally since 2019. NHS England get this data from sending out questionnaires to selected patients. FS said Caradoc is good but still not great and the unpredictability of staff and capacity makes it difficult to keep improving.

FS asked the PPG if Caradoc patients would be willing to travel to Clacton to our sister sites if we are short of GPs at any time to help with capacity. CS to communicate with patients.

FS says there might be a possibility of a Respiratory Hub with one GP and 2 Advanced Nurse Practitioners, during the winter months to help with capacity but this would not be in Frinton. FS reported that during October 2023 -February 2024 under 5-year-olds used 800 GP appointments for coughs and colds and a hub would help release these appointments.

Ranworth PCN is the only Practice in the area that has a CRP machine which can check bloods for infections which helps reduce the prescribing of unnecessary antibiotics.

FS stated that the PCN contract ends on 1.3.2026 and therefore next year decisions will need to be made on renewing the contract, stating the future is tougher with an ever-increasing population. Caradoc currently have 8,300 patients on the list which is 1,000 more than 5 years ago. FS will have to make decisions based on patients list size, GPs available, Clinic rooms and if Patients would be willing to go to Clacton for some appointments. One patient equals 15 planned care appointments.

KW and SO asked if any plans to close the surgery. FS stated the ICB would like one main Central Health Care Centre to serve Frinton, Kirby and Thorpe. This would depend on money and land available and could take up to 5 years to implement. CS asked if patients will be consulted first and FS said yes of course he wants patients happy, staff happy which then results in a positive environment.

FS informed that we had a lung specialist working at Ranworth Surgery but not many Caradoc patients used this service. KW said more communication is needed explaining why we are offering services across the PCN not just at Caradoc and why patients should use them. FS wants patients and the ICB all on the same page. KW asked how FS monitors and reviews the PCN, FS informed that it is combined information from the ICB, CQC, infection control and Baxendale Management Consultancy.

Capacity/demand:

KW asked if renting Network Rail car park yearly for staff and using Caradoc's existing staff car park for an extension. FS informed that the surgery's car park is owned by Network Rail and would need to seek permission for a possible temporary structure to be built. This building could be used to increase capacity or for training. Again, this would depend on ICB approval, staffing and costs involved.

AskmyGP:

FS stated that AskmyGP does not give more capacity it is just another route of communication and was mis sold to the PCN. We are now looking at a different system called SystemOne Connect again this does not increase capacity. If a patient already uses online services, they can use the same login details for the SystemOne Connect. LW will be visiting another surgery to see how it works before any decisions are made.

Personnel:

The PCN now has a full time Cancer nurse Kay Selfe. She works across all sites and is at Caradoc on a Thursday to see patients. She will contact patients that need support and focuses on patients that are not attending their screening tests. If anyone has a concern, staff can send a message to Kay any day and she will contact the patient.

PPG Email:

For security IT have had to close the PPG nhs.net email account. The new email for the PPG is <u>caradocppg@gmail.com</u>

Information Flow:

Daily, the Admin team process emails, letters, BP forms and any other correspondence, they are scanned onto patient's notes and read coded on the system. If any action is needed it gets sent to the relevant clinician. Every day one of our doctors is GP on Call and they pick these up and review and then if needed will task reception to contact the patient.

Complaints:

Leaflets are available at reception; information is also on our website. We can discuss a complaint face to face, on the phone or via email. We have a 28-day policy to respond to complaints. We usually respond in the same way that we have been contacted. LW will bring complaint data to next meeting.

Inspection:

LW informed that the CQC inspects the surgery there is no set time for them to come, we were good at the last inspection. There are also quarterly ICB meetings. We have external infection control company that come yearly and our nurses conduct infection control daily. LW will find out timeline and bring to next meeting.

Wave Net:

Our new phone system went live on Monday 24th July 2024. PPG members at the meeting were given a sheet of how it all works. All calls are still recorded.

AOB:

New member application information given to CS. LW will check data with Admin to see how many patients are using this service. KW asked about locum GPs. LW informed we have 3 regular locums Dr Hickman, Dr Milne and Dr Van Der Hoek. Medication reviews are carried out yearly by our Clinical Pharmacists and our lead CP is Aroma who is based at Kennedy Way.

Next Meeting:

10am - 25th September 2024