

Minutes of GMP PPG Meeting
Face to face and online
8th February 2024 at 17.30, Granta Sawston



Present:

PPG Committee representatives in person:

Dave Arnold (Linton) (chair and Minute taker)
Hazel Stevenson (Sawston)
Mark Jacobs (Barley)
Bill Dewberry (Royston)
Graham Wylde (Sawston)

PPG members:

11 members in person
8 members online (initially)

GMP representatives:

Sandra East, Head of Patient Services
Tim Harrison, CEO
Dr Tim Wright, Managing Partner
Ian Duthie, Wellbeing Team Lead
Processor Stefan Scholtes, Patient Chair on GMP Board (online)

Apologies

6 apologies were received.

1. Welcome

Dave Arnold welcomed PPG members and GMP staff to the meeting.

Whilst waiting for the online service to be connected, he outlined the current situation regarding follow up to the Patient Survey report. On 5th February Maureen Haldane, Mark Jacobs and Dave Arnold met with Tim Harrison and Sandra East to address the report recommendations and to agree a series of meetings to review their implementation. A working party will be established to undertake this over the coming months.

Royston Health Centre was not part of GMP at the time of the Survey, and therefore a representative from Royston Health Centre will be invited to contribute to the discussion.

2. Nominations and Election of Officers

Dave Arnold briefly explained that he and his Co-chair, Anne Thompson, had been in post since early 2019 and that Covid had disrupted the process of election of officers.

To bring the PPG in line with other groups, the current situation of having two Co-chairs will, subject to agreement of the PPG, change to the nomination and election of a Chair and Vice-chair where the Vice-chair becomes Chair after two years. Both positions will last for a period of two years. A Secretarial post is ideally needed, also to last for a period of two years.

Dave invited those present and the wider group of PPG members to consider taking an active role in the PPG.

3. Online Presentation by Dr Anneka He, supported by Dr Tim Wright

“How to improve communication from GP to consultant at the point of referrals.”

Tim and Anneka explained the work that has been undertaken with Neurology at Addenbrookes and GMP to establish a procedure to jointly discuss patients with neurological issues on a regular basis via a teleconference. The research undertaken by Anneka, funded by the National Institute for Health and Care Research (NIHR), investigated whether this interaction led to qualitative benefits for both clinicians and patients and whether there are beneficial outcomes for patients. Several GPs can be involved in tele-conference discussions.

The initial project was self-actuated in that both Consultants and Tim Wright devoted their own free time to set up and manage the project. Funding has since been available from Addenbrookes for clinical meetings and for the trial to progress to another Primary Care network (Meridian).

Both Anneka and Tim have seen real benefits in that both GPs and consultants are better aware of each other's issues that results in treatments appropriately suited to the patient's condition. This has resulted in a reduction in the number of wasted referrals, for example, instances where a patient has been directed to the wrong sub-specialist clinic.

A copy of the presentation is attached (Appendix 1).

4. Six Sigma study of GMP (Judge Management School MBA project)

Unfortunately the MBA student presenter was not online to give an overview of a project called Six Sigma, evaluating GMP procedures including the appointments booking process. Their report had been given to GMP and Tim Harrison took us through the main points part of the project, including an evaluation of responses of patients to the NHS National Patient Survey. It included patient preference for telephone/video consultation vs face to face, which was one of the

factors covered in our PPG/GMP Patient Survey. The results were pretty similar.

Preference to see the same or preferred/named GP was a high priority but if the issue was a matter of seeing any doctor ASAP then this was of overriding importance.

A number of issues covered by this project are already being addressed by GMP, including reception staff training and waiting times for answering the telephone.

5. GMP update

Tim Harrison updated us on GMP developments. There has been a recruitment of 11 doctors in the past 2 months. None are full time 5 days a week but that is the nature of employment preferences of GPs. Four of the GPs will be allocated to Royston.

Face to face appointments are now 15 minutes which means fewer GP consultations but with more GPs this should be manageable. Continuity of care is seen as important and longer appointment times increase patient contact with the GP and results in greater patient satisfaction and has a beneficial effect on patient wellness.

GMP has employed a psychiatrist at Sawston to help with mental health issues.

A new telephone system is being implemented on the 12th February, where patients do not have to hang on in a queue. Instead they can hang up whilst keeping their place in the queue and GMP will ring them back when they get to #1.

6. Wellbeing Hub

Ian Duthie leads the Granta Wellbeing Hub with 7 Social Navigators, three of whom are funded by the Integrated Care Board assigned to patients with Long term conditions such as Dementia.

The Social Navigators can orchestrate communication between patients and local services available such as Social Services, community hubs and community cafes. They have a role in identifying social and welfare needs of Granta patients before they develop into health issues.

The support for Warm Hubs (national scheme last winter) did not materialise this winter so the Wellbeing team has not been involved.

In answer to a question by a patient, Ian stated that the team has confidential access to patient clinical records.

7. Next PPG Meeting

This will be arranged during the month of April, date to be determined.

The meeting ended at 19:05

Dave Arnold
10th February 2024