

## Minutes of Granta Medical Practices PPG Meeting, in person / virtual 30<sup>th</sup> October 2023 at 6.30pm

### Present

Committee representatives in person:

- Dave Arnold (Linton) (chair and Minute taker)
- Hazel Stevenson
- Mark Jacobs
- Maureen Haldane
- Susan Tombs

PPG members:

- 12 in person
- 5 online

Granta Medical Practices (GMP) representatives:

- Sandra East
- Tim Harrison
- Dr. Tim Wright
- Dr. Duncan Sconce (online)
- Prof. Stefan Scholtes (online)

### Apologies

Apologies were received from one PPG member.

#### 1. Welcome

Dave Arnold welcomed PPG members to the meeting and especially patients from Royston Health Centre, which joined GMP in April.

The agenda had been circulated beforehand.

#### 2. PPG membership

Dave Arnold explained the construct of the PPG in that any patient can opt to be a member. Currently there are approximately 600 patients who have expressed an interest.

We have a small committee to run the affairs of the PPG and to interact with GMP, and Dave Arnold called for additional members. *(Post-meeting note: 2 members representing Sawston and Royston have volunteered)*

### **3. Patient survey and welcome pack**

Maureen Haldane gave a presentation detailing the background to, and results from, the GMP/PPG patient survey conducted in March this year.

It was noted that the survey was not available to Royston Health Centre patients because, at the time, they had not joined GMP.

A draft report has been written by Maureen and circulated to the PPG committee and to GMP management. Maureen was clear that this was not a final version and that once done, the results and recommendations would need to be discussed with GMP.

She proposed a small working party (GMP/PPG) should be established to determine the achievability of acting upon specific recommendations and to set success criteria.

The final report will contain all raw data in appendices and be available to everyone on the GMP website.

Tim Harrison was highly complementary about the survey and the number of respondents who had taken part.

Dave Arnold stated that other practices in the Cambridge Primary Care patient group (16 practices covering over 172,500 patients) were interested to find out more about it.

### **4. GMP update on assimilation of Royston Health Centre**

Tim Harrison brought us up to date on the issues arising. Some teething problems had occurred but all now seemed to be running smoothly. Patient representatives from Royston, who were at the meeting, said that the appointments system was an improvement over what they had had.

In addition, Tim stated that GMP were in the process of recruiting three additional GPs.

### **5. Clinical issues and referrals to Addenbrookes**

Dr Tim Wright revealed that GMP were developing a patient leaflet much in line with the stated objectives of the new patient information pack that the PPG were expecting to develop from feedback within the patient survey.

He said that there was a good level of agreement in some of the patient survey issues that were being addressed in the patient leaflet.

Dave Arnold asked why the PPG had not been involved at the start and was informed that they should receive a draft to comment on in due course.

Dr Wright then described the extraordinary number of referral letters being handled at Addenbrookes and an initiative that he has been working on for over two years trying to reduce paperwork and letters to and from consultants. He is trying to get consultants to agree to a common process of reporting to simplify and speed up information flow between consultants and patients /GPs in primary care.

## **6. Appointments**

Dr Duncan Sconce presented information about a changed approach to appointments across GMP surgeries whereby each face to face appointment will be increased to 15 minutes.

This should enable a more measured patient experience but will reduce the number of face to face appointments in each session. Resources are at the heart of the issue so recruitment of new specialists / GPs is crucial.

Dr Sconce reiterated existing procedures that monitor patient progress, including patient initiated follow up (PIFU) and complex patient appointments booked by the GP.

Dr Wright reiterated the value of 'phone consultations, where appropriate. Clinicians can speak to 3 patients in the time it usually takes for one face to face consultation.

## **7. Date of next meeting**

Proposed end of January 2024.

The meeting closed at 20:05.

D Arnold  
7<sup>th</sup> November 2023