

WATERFRONT AND SOLENT PATIENT PARTICIPATION GROUP

Minutes of the PPG Annual General Meeting held on Thursday 17 October 2019 at 7.15pm at the Parish Hall, Hythe

PPG present: Colin Bell (Chairman), Alan Johnston (Vice Chairman), Gill Johnston (Treasurer), Pauline McMahon, Polly Read, Pam Sexton, Sandra Wilkinson and Jill Tomlin (Secretary)

In attendance: Dr Simon Sherwin and Dr Andy Hoyle

Apologies: Committee member June Matthews

The meeting was attended by approximately 70 patients from the Practice.

Welcome

PPG Chair Colin Bell welcomed patients of the Waterfront and Solent practice to the meeting, especially in view of the inclement weather. He proceeded to present his report for the last 12 months as follows:

“The weather is changing and leaves are dropping from the trees. Autumn is here. All these point to the time when your Patients’ Participation Group’s Committee have to give an account of its activities since it was last elected in October 2018. As you know, all registered patients over the age of sixteen are automatically members of the Patients Participation Group and the Committee is elected by you. The PPG committee is a small group that attempts to form a bridge between the health professionals and the whole patient body. There is a fine line to be drawn so that we work effectively to support the health professionals in as many ways as possible. However, our role is not to complain, either on our own part or take up grievances on behalf of patients. We are not a pressure group but a support that attempts to be as helpful as possible

Over the years, since the PPG was formed, we have seen the stress and restraints that the health professionals are under. It has provided an insight and reality check. Nothing is perfect but against the pressures on the number of patients wanting appointments day by day, and a greater demand on resources, the service that is provided is commendable and in this practice the patients are well served by caring and hardworking practitioners. On your behalf, I thank them and commend them.

Every Committee Meeting which is held at 6.30 pm is either attended by Dr Sherwin or Dr Hoyle who give us an extra hour of their time after a full day of appointments, administration and home visits. We are grateful to them both for their commitment. This means a longish journey across the forest for one, and missing his children’s bedtime stories for another. I would like to thank Dr Sherwin for his co-operation for his willing help in getting our events on the screens in the waiting room and on the web site. Thank you both for your unstinting and positive support. It has made all the difference.

Now, I want to thank all members of the Committee who have worked hard to ensure that ideas become realities. Each one has been diligent and hardworking and I am pleased that all are seeking re-election though some in different roles.

Alan Johnston Vice Chair who is standing as Chair

Gill Johnston Treasurer

Jill Tomlin Secretary who is standing as Vice Chair

June Matthews Standing as Secretary

Pauline McMahon, Polly Read, Pam Sexton and Sandra Wilkinson. Standing as Members

I am delighted, too, to welcome two new members who have been nominated to be on next year's Committee. They are Christine Glass and Moira Steele. I wish them well and thank them for volunteering.

Patients sometimes ask us why we hold raffles at Meetings and Tombola at the Flu Clinic. We receive no funding from any other source and we need to pay for this Hall and printing of handbills for our meetings, but not for the Flu Clinic that is funded by the Surgery. We are grateful for contributions from you the patients. We have had some very generous contributions in the past and these have been very helpful. If you feel generous, please make cheques payable to the PPG. You will note from the Treasurer's report shortly that we have saved our money over the past couple of years so that when the time comes and the surgery makes a request, we can oblige within reason. I want to thank Polly Read who undertakes the excellent Tombola at the Flu Clinics and the raffles at our meetings. This year the Tombola had over a hundred prizes and made over £250 profit. We are grateful to her for her unstinting effort and enthusiasm.

I must also mention two helpers, Ian and Kay Kincaid who help us at the Flu Clinic and do so with so much good humour and gusto. It is great to see Ian restored to good health after his major surgery last year.

The Committee has been looking at ways which will enable us to engage with more patients than those who support our twice-yearly meetings. Dr Hoyle has suggested that we organise a coffee morning say once a month to be held at the adjacent building Marcella House. We could encourage patients after their appointment to pop in for a coffee and a chat (on similar lines to the Flu Clinic.) I have spoken to the Manager who agrees in principle. Of course, we need helpers and I would urge anyone here who has an hour or so to spare once a month to express their interest by filling their names and telephone numbers on the paper I will leave here. I look forward to your positive response.

I must reflect on our Annual Flu Clinic which is a joint enterprise between the health professionals and the PPG Committee, The atmosphere in the Hall is one of purpose but also seeing the health professional team interacting with so many people is deeply satisfying We also have community stalls, the tombola and the refreshments When you consider that well over nine hundred patients attended, all in all, we can count it a success.

There are many changes that are now taking place in NHS organisations both locally and nationally. One of which is the formation of Primary Care Networks (PCNs) that will require surgeries to work closely with other local surgeries and share specialist services. Our surgery (7400 Patients) will work with Red and Green Practice (23,800 Patients) and Forestside Practice (11,400 patients). Many practices are actually merging and some are closing. Indeed, the time they are "a changing".

I have decided that after seven wonderful years as your Chairman, the time has come to stand down, to allow someone else to pick up the baton – and go for it full out.

Thank you for the privilege of serving you and thank you for your unstinted help and kindness”.

Vote of Thanks

On behalf of the Committee, Alan Johnston current Vice Chair, thanked Colin Bell for his excellent service over the past 7 years. He was delighted to inform the meeting that Colin would be staying on the Committee where his wise counsel and good humour would still be available.

Treasurer’s Report

Gill Johnston, the Treasurer presented the annual accounts. The total income amounted to £1,038.18. £595.32 from 2 Tombola, £310.00 from donations, £34.63 from collection tins, £97.33 from a raffle and interest of £0.90. A total of £253.49 was spent on hall hire (£144.59), stationery (£3.90), AGM refreshments (£51.36), printing (£18.00) and advertising (£35.64). This left a balance of £2,111.79 which was being saved until the surgery requested a new item.

Any Other Business

None.

Committee for 2020

Dr Sherwin took the chair and gave due notice that this AGM had advertised publicly and nomination papers widely available from 4 to 14 October 2019. He read out all the nominations and they were duly elected including the 2 new members Chris Glass and Moira Steele. Dr Sherwin extended his grateful thanks to Colin Bell from the surgery.

Presentation “Where it comes from and where it goes”.

Dr Sherwin gave a presentation on the funding background for the practice’s income and expenditure. The main points are summarised as follows -

A practice is run like a small business but with only 1 customer NHS England which sets out what they want done, how much it will cost and the rules of how it should be done. The practice is run by a partnership of Drs Sherwin, Hoyle and Sheppard. Other staff are employees.

In 2017/18, GP surgeries were paid an average of £152.04 per patient, a 0.4% increase on the previous year. This is to provide unlimited access to all the expert services at the surgery. Referrals and hospital visits are not paid by the surgery. Some patients of course, will need little care while others require a huge amount of care and support. The rates are negotiated by the General Practice Committee.

Income arrives in the following form

A global sum

Quality Outcome Framework

National Enhanced Services and Local Enhanced Services which includes payments for late/Saturday surgeries and involvement in the new PCN (Primary Care Network)

Rent Reimbursement even if the property is owned.

Vaccinations

Non-NHS income including school reports.

Income must cover salaries, mortgage and office costs, equipment and assets, IT, training and subscriptions. What Dr Sherwin termed “crazy costs” included £35,000 for not providing 24-hour care and to fund the 111 service. Also the high cost of locums when holidays are taken by permanent staff.

Any income left from these activities is for the partners and for investment in the surgery. There is no potential to “sell” services eg private work as this is not permitted by NHS England.

The surgery’s overall aim is to keep everyone happy!

Questions

1. Dr Sherwin confirmed that hospital referrals are not charged to GPs and that whoever carries out phlebotomy is paid for their work. Lab testing is paid for by the CCG.
2. Failure to attend for appointments cannot, unfortunately, result in a cost to the patient.
3. The average number of surgery visits per patient per year is 7 or 8.
4. 75% of the cost of running a surgery is for staff and associated costs. Staff are the biggest asset and also the most costly.

Raffle

The raffle was drawn at this point and prizes distributed. Polly Read reported that £74 was raised.

Presentation – Dr Andy Hoyle on “General Practice Myth Busting”

The waiting room is empty so no-one is doing any work. Dr Hoyle outlined a typical doctor’s day involving appointments from 8.30am to 1pm and from 3.30 to 6pm. In the 2.5 hours left in the middle of the day, clinical meetings, test results, training, staff reviews, home visits and lunch (if possible), all have to be fitted in. So the myth about no-one working is busted!

I’m not being referred because you’re trying to save money. Referrals are never a financial decision. Some procedures were now not accepted as they are considered by the CCG to be of limited clinical value. These include snoring surgery, breast reductions, varicose vein surgery, ear grommets, tonsillectomies and removal of benign skin lesions.

I always get the flu after the flu jab. Flu vaccinations contain an inactive virus and while there may be a mild immune response, this is not flu.

Your doctor is not taking part in a medical drama! Time is an important part of healing in some situations and a problem cannot always be fixed in one episode as Doc Martin seems to manage!

Your GP is as much a specialist as a generalist. Diagnoses are based on limited investigations available to the GP which is regarded as the most challenging roles in medicine.

All GP receptionists are dragons! Definitely not true at WFS surgery as Dr Hoyle's photographs of the receptionists showed!

All GPs drive posh cars. Dr Hoyle showed a photograph of his own, rather battered, car!

The money not paid to the EU will be spent on the NHS! Dr Hoyle declined to comment!

Additional Questions

1. The surgery does not pay for repeat prescriptions via chemists.
2. Training for all staff has to be kept up to date and the only possible way is to close the surgery occasionally at lunchtimes. GPs have an annual assessment via the CCG and have to be re-validated every 5 years. Dr Hoyle now has an additional role as a GP Trainer to 2 GP Registrars which takes some time,
3. Hythe Hospital redevelopments plans are on-going and the PCN is hoping to have input into services to be provided there in the future.
4. The recent surgery telephone problems were due to electrical surges at the local sub-station.
5. The e-consult scheme's aim is to provide a 24/7 service and responses can be via email, text or a phone call. It can help in cutting the time used in obtaining history and symptoms.

Vote of Thanks

Committee member gave a Vote of Thanks to the doctors and for the exemplary service they gave to their patients.

Jill Tomlin

PPG Secretary