

# Park Lane Surgery

## Patient Participation Group

### Minutes from the PPG meeting dated

**Tuesday 4<sup>th</sup> February 2025**

**Venue** Park Lane Surgery

Meeting Time: Start: 7.00pm

Finish: 8.15pm

#### **Attendees**

- Helen Conaghan (HC)
- Richard Brims – Chair (RB)
- Susan Camfield-Brims – Secretary (SCB)
- Neville Townsend (NT)
- Emily Michaelides (EM)
- Sarah Wingrove (SW)
- Keri Highfield (KH)
- Bette Hindmarch (BH)
- Jan Phillips (JP)
- Jan Taylor (JT)
- Mike Taylor (MT)

#### **Apologies for absence received from**

- Mavis Pickard (MP)
- Catherine McLeod (CM)
- Jane Grayling (JG)

## Agenda

1. Matters arising from previous meeting
2. Practice Manager Issues – System Updates
3. Practice Manager Issues – Staffing Updates
4. Practice Manager Issues – Premises Updates
5. Practice Manager Issues - PCN Updates
6. Any Other Business
7. Date of next meeting

## Minutes

### **1. Matters Arising**

RB opened the meeting and thanked everyone for attending.

RB noted that the Code of Confidentiality should be adhered to at all times.

RB had received apologies from Mavis Pickard as she was now unable to drive to future meetings. It was suggested that perhaps transport could be arranged between members of the Group for those with transport issues.

### **Practice Manager Issues Points**

HC provided the meeting updates here.

### **2. System Updates**

HC updated the meeting on the new ACCURX (e-Consult) as it had now been in operation for approximately 6 months.

HC said that at first it had proved successful but now problems were arising in that it was unable to meet patients' demand. This has been caused by the surgery coping with the number of patients requesting appointments. The surgery cannot meet the patient demand for appointments. This is a national problem. The solution would be to make additional appointments available, however, the surgery is not in a financial position to employ additional GPs. Some patients were blocking up the system by putting in two or three requests to obtain an appointment.

HC explained how the triage system worked with a Doctor looking through the patient requests every day to determine which were urgent cases and those that could be dealt with less urgently HC said that it was 50/50 between patients using AccuRx and patients ringing up for appointments.

HC went onto explain that it was now in the NHS Contract that every practice had to go over Total Triage.

HC said they were carrying out an 'audit' as to see why this was not working and what could be done to improve matters but pointed out that the contacts that Park Lane Surgery receives are approximately 5x above the national average.

HC also pointed out that non-urgent appointments should also be requested via ACCURX.

### **3. Staffing Updates**

HC explained that the staffing issues had been challenging as several Doctors had recently resigned, and the Practice was now under tremendous pressure and provided the following staffing updates.

HC said that the Practice had employed a new nurse by the name of Emily Acayen working 37.5 hours per week.

A new Salaried Doctor – Dr Hawkes (female) will be starting on the 25<sup>th</sup> March 2025, working six sessions, 3 days a week.

Dr Kaleel has returned to the surgery and is working one day per week as a locum.

Additionally, three other Locum Doctors are currently employed at the practice.

A Matron has also been employed, Yvonne White, who can visit patients in their homes amongst other duties.

HC further advised that the Practice are also looking to employ a full-time Paramedic, together with another salaried Doctor, to work six sessions per week.

However, both Dr R Shah and Dr Kanwar have now left the Practice. Resignations have also been received from Dr Hooper, who leaves on the 25<sup>th</sup> March 2025 and Jemma Jackson, Reception Manager will be leaving on the 28 February 2025 who leaves after 10 years.

HC pointed out that the proposed increase in Employer National Insurance recently announced in the Budget will have a detrimental effect on the Practice finances, with potential reductions in staffing possible as a result.

### **4. Premises Updates**

The only update on the premises was the front wall which had been knocked down by a passing motorist. HC was in the course of acquiring three estimates from builders as required by the insurance company.

## **5. PCN Updates**

HC wanted to promote the Hub that is available at Amwell Surgery on a Saturday and wanted patients to be made aware of the services available. Park Lane was allocated so many slots which included access to two GPs, a Physiotherapist, four Nurses and an Anxiety Clinic.

## **6. Any Other Business**

*Post Meeting Note.*

*The following shows how the demographics of patients are currently made up.*

Under 5's = 569 (5.5%)  
6 to 16 = 1184 (11.5%)  
17 to 21 = 537 (5.2%)  
22 to 50 = 3,373 (32.9%)  
51 to 70 = 2,798 (27.3%)  
71 to 80 = 1,073 (10.4%)  
81 to 90 = 646 (6.3%)  
91 and over = 93 (0.9%)  
Total 10,273 (100%)

RB pointed out to HC that on the CQC website it stated that it was undertaking a further review of Park Lane Surgery. HC had not been made aware of this fact and had not been contacted by CQC. HC was going to email them to establish where they are in the review process.

EM said that after reading the recent CQC report dated 4<sup>th</sup> March 2024, she felt the findings had been particularly harsh towards the Practice.

Finally, RB requested if the PPG meetings could be held more regularly say every 3 – 4 months as the last meeting was 8 months ago but appreciated how they are all very busy. HC agreed to try and hold them on a more regular basis.

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

Provisional – 13<sup>th</sup> May. To be confirmed nearer the meeting.

Meeting finished at 8.15pm.